Pilot investigation of a spa bath for managing patient pain, anxiety and well-being in an acute palliative care setting

Gemma Skaczkowski^{1,2}, Juli Moran³, Julie Langridge³, Kirsten Oataway³, Carlene Wilson^{1,2}

¹ Olivia Newton-John Cancer Wellness & Research Centre, Austin Health

² School of Psychology & Public Health, La Trobe University

³ Palliative Care Unit, Austin Health

Introduction

- Complementary therapies provide an avenue for addressing acute patient distress in palliative care.
- There is preliminary evidence that water-based therapies may improve pain and quality of life for patients with chronic disease, though there is a clear need for stronger evidence.¹⁻³
- These interventions have received little attention in a palliative setting.

Aim: To examine the impact of a simple spa bath for reducing symptoms and improving well-being within a palliative care hospital setting.

Model: ArjoHuntleigh Parker Bath 500

Method

- Design:** Pre/post assessments of 3 key outcomes.
- Setting:** Palliative care ward at a major metropolitan hospital.
- Intervention:** Spa bath designed to accommodate frail and unwell patients.
- Participants:** Patients at the end-of-life.
- Measures:** Edmonton Symptom Assessment System—pain, anxiety and well-being (0-10 scales).

■ Improved ■ No change ■ Deteriorated

Results (N=52)

- Pain** improved by 2 points
($t(51) = -6.13, p < .001, d_z = .85$)
- Anxiety** improved by 1.84 points
($t(51) = -4.58, p < .001, d_z = .64$)
- Well-being** improved by 2.25 points
($t(48) = -7.19, p < .001, d_z = 1.03$)

- Conclusion:** The simple provision of a spa bath can improve patients' quality of life.
- **Strengths of the intervention:** One-off cost, minimal training, can be conducted in the normal course of nursing duties.
 - **Further investigation** is needed to examine the effect duration, a broader range of outcomes, and potential moderators— such as time of day, frequency, duration, temperature and ancillary environmental characteristics (e.g. music, aromatherapy).
 - Adding a **control group** would examine the unique impact of providing patients with bathing facilities, separate from other aspects of palliative care.

¹ Carere A, Orr R. The impact of hydrotherapy on a patient's perceived well-being: a critical review of the literature. *Phys Ther Rev.* 2016;21(2):91-101.

² Verhagen AP, Bierma-Zeinstra SM, Boers M, et al. Balneotherapy for osteoarthritis. *Cochrane Database Syst Rev.* 2007(4):CD006864.

³ Yamamoto K, Nagata S. Physiological and psychological evaluation of the wrapped warm footbath as a complementary nursing therapy to induce relaxation in hospitalized patients with incurable cancer: a pilot study. *Cancer Nurs.* 2011;34(3):185-192.