PROCEDURE

Hydrotherapy

Hydrotherapy uses guided exercise in warm water to improve movement, strength, and comfort.

PURPOSE
Improve movement, strength, balance, and comfort

PROCEDURE TYPE
Therapeutic - non-invasive guided movement in warm water

WHERE IT IS DONE
Outpatient clinic or specialist rehabilitation pool

ANAESTHESIA
None

HOW LONG IT TAKES
Usually 30 to 60 minutes

PREPARATION
No fasting; bring swimwear and follow pool screening instructions

RECOVERY
Same day; driving is usually allowed

MAIN RISKS
Falls, overheating, skin irritation, pool-acquired infection

RESULTS
During sessions, with progress reviewed after several visits

Overview

Hydrotherapy is treatment using water. In rehabilitation, it usually means exercising in a warm pool with guidance from a physiotherapist or another trained rehabilitation professional. It is also called aquatic therapy or aquatic physiotherapy.

Water supports some of your body weight. This can make movement easier when walking or exercising on land is painful or difficult. Water also provides gentle resistance, which can be used to build strength. Warmth may help muscles relax and make joints feel less stiff.

You usually remain awake and actively take part. Hydrotherapy is not surgery, and it does not involve injections or anaesthesia.

This article covers supervised pool-based rehabilitation. It does not cover colon hydrotherapy,

water birth, spa treatments, or the use of water to clean wounds.

Why the procedure is performed

Hydrotherapy may be offered when a health condition, injury, or operation has affected your movement. The aim is usually to help you exercise safely while reducing the load on painful or weak areas.

It may be used as part of rehabilitation for:

Research suggests aquatic exercise can provide modest short-term improvements in pain and physical function for some people with hip or knee osteoarthritis. The benefit for other conditions is less certain and is influenced by the exercises used, your goals, and how regularly you attend.

Hydrotherapy does not repair every injured structure or cure an underlying condition. It is usually one part of a broader rehabilitation plan.

- Arthritis and other painful joint conditions
- Back pain or long-term musculoskeletal pain
- Recovery after some injuries or operations
- Reduced strength, flexibility, balance, or walking ability
- Some neurological conditions that affect movement
- Difficulty tolerating land-based exercise

Who should and should not have it

Hydrotherapy may be suitable if water support helps you move more comfortably or safely than you can on land. You do not always need to be able to swim. Many pools have shallow areas, rails, steps, hoists, or flotation equipment.

It is not right for everyone. Treatment may need to be avoided or delayed if you have:

Warm-water immersion moves blood from your limbs toward your chest. This can affect the workload on your heart and breathing. Stable heart or lung disease does not always prevent hydrotherapy, but an individual assessment may be needed.

Tell the facility if you are pregnant, use mobility equipment, have diabetes, have reduced skin sensation, or need help entering and leaving the pool. These issues may require added support rather than ruling treatment out.

- Fever, vomiting, diarrhoea, or another contagious illness
- An infected wound or a wound that cannot be covered safely
- A new or unstable heart or breathing problem
- Uncontrolled seizures or episodes of unexplained loss of consciousness
- Bowel incontinence that cannot be managed in the pool
- A recent operation without clearance for pool immersion
- A skin condition that could worsen in pool water
- Severe fear of water that prevents safe participation

How to prepare

Your treating facility's own instructions take priority because pool rules, changing facilities, and equipment differ.

You will usually be asked about your medical history, current symptoms, skin condition, continence, swimming ability, and need for assistance. Tell the team about recent surgery, wounds, infections, seizures, heart or lung conditions, and any previous difficulty in warm water.

Fasting is not normally required. A light meal beforehand may be more comfortable than a large meal immediately before entering the pool. Drink enough water unless you have been told to restrict fluids.

Bring swimwear, a towel, suitable footwear for wet floors, and any prescribed inhaler or emergency medicine. Waterproof dressings should only be used if the team confirms that your wound is suitable for pool treatment.

Shower before entering. Do not apply heavy creams or oils unless advised, because they can make your skin and pool surfaces slippery.

What happens during the procedure

Your first visit may begin with an assessment on land. The therapist may check how you walk, move your joints, balance, and perform everyday activities. You will discuss what you want treatment to help you achieve.

You then enter the pool using steps, a ramp, or a hoist if needed. The water is generally warmer than a standard swimming pool.

Your programme may include walking, supported floating, stretching, balance practice, joint movements, and strengthening exercises. Floats, resistance equipment, rails, or a pool treadmill may be used. The therapist may work beside the pool or in the water with you.

Exercises should be challenging but controlled. Tell the therapist if you feel dizzy, unusually short of breath, overheated, unwell, or increasingly painful. You can stop and leave the pool if needed.

A session commonly lasts 30 to 60 minutes, including instruction and rest periods.

Recovery and what to expect afterward

You may have mild muscle aching after hydrotherapy, particularly when starting a new programme. The session should not cause severe or steadily worsening pain.

You can usually eat and drink normally afterward. Drinking water may help after exercising in a warm environment.

Most people can return to ordinary activities the same day. You may feel relaxed or tired, so allow time to shower, change, and cool down. Follow any activity limits related to your injury or operation.

You can usually drive after hydrotherapy because no sedative or anaesthetic is used. Do not drive if you feel dizzy, faint, unusually tired, or unable to control the vehicle safely.

Many people can return to work the same day. If your work is physically demanding, or you are unsure how you will respond, it may help to arrange your first session when you can rest afterward.

Risks and possible complications

Hydrotherapy is generally low risk when the pool is properly maintained and treatment is matched to your health and abilities. Possible problems include:

Serious water-related incidents are possible if someone cannot stay safe in the pool. Screening, supervision, accessible equipment, and following staff instructions reduce this risk.

Leave the water promptly if you become unwell. Showering after treatment and avoiding the pool when you have diarrhoea or a contagious illness help protect you and other pool users.

- Slipping on wet surfaces or losing balance in the pool
- Muscle soreness or a temporary increase in pain

- Dizziness, overheating, or feeling faint
- Skin, eye, or ear irritation from pool water
- Infection associated with contaminated water
- Worsening of an uncovered wound or skin condition
- Breathing or heart symptoms triggered by exertion or warm-water immersion

Results and follow up

You may notice during a session that movement feels easier in water. Improvements that carry over to walking, strength, balance, or daily activities usually require repeated practice.

Your therapist may track progress using movement tests, walking distance, pain ratings, balance tasks, or activities that matter to you. The programme may be adjusted as your ability changes.

Follow-up is usually routine. After several sessions, the team may recommend continuing hydrotherapy, moving toward land-based exercise, following a home programme, or trying another treatment.

If hydrotherapy does not help you reach agreed goals, continuing indefinitely may not be useful. Ask what improvement is expected, how it will be measured, and when the plan will be reviewed.

Alternatives

The best alternative is based on why hydrotherapy was offered.

Land-based physiotherapy uses similar strengthening, flexibility, and balance exercises without a pool. It is more widely available and may transfer more directly to everyday movement, but weight-bearing exercise can initially be harder or more painful.

A home exercise programme offers flexibility and avoids travel. It provides less direct supervision, and exercises may need to be modified if they increase symptoms or feel unsafe.

Walking, cycling, or gym-based exercise can improve fitness and strength. These options may cost less and be easier to continue long term, but they do not provide the support and reduced joint loading of water.

Pain medicines may provide short-term relief for some conditions, but they do not replace movement and strengthening. Their benefits and risks depend on the medicine and your

health.

Injections or surgery may be considered for specific joint, tendon, spine, or injury-related problems. These are more invasive and carry different risks. Hydrotherapy cannot substitute for surgery when an operation is needed, although it may sometimes be used before or after one.

You can also choose not to have hydrotherapy. Ask how this may affect your recovery and whether another form of rehabilitation would meet the same goals.

When to call your healthcare team

Contact your healthcare team routinely if you develop a persistent rash, ear pain, wound redness or drainage, worsening pain, or unusual fatigue after treatment. Also contact them if sessions repeatedly cause dizziness, breathlessness, or symptoms that interfere with normal activities.

Seek urgent medical advice if you have significant breathing difficulty, repeated fainting, or a rapidly worsening wound infection.

Call emergency services for severe trouble breathing, chest pain, sudden weakness on one side, loss of consciousness, or another symptom that appears immediately life-threatening. Do not drive yourself in an emergency.

Common questions

Will I be asleep?

No. Hydrotherapy does not require sedation or anaesthesia. You are awake and participate in the exercises.

Can I drive home?

Usually, yes. Do not drive if you feel dizzy, faint, unusually tired, or unable to operate the vehicle safely.

How painful is it?

Water support often makes movement more comfortable than land-based exercise. Mild muscle soreness can occur afterward, but severe or increasing pain is not expected.

Do I need to know how to swim?

Not always. Many programmes take place in shallow water and use rails or flotation equipment.

Tell the facility if you cannot swim or are afraid of water.

When will I know if it is working?

Movement may feel easier during the first session, but changes in strength or everyday function usually take repeated sessions. Your progress should be reviewed after an agreed treatment period.

What should I wear?

Wear comfortable swimwear that allows movement. Bring a towel and non-slip footwear, plus any items requested by the facility.

Sources

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