

# HYDROTHERAPY

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## HYDROTHERAPY

**Primary Disciplinary Field(s):** Medicine, Psychiatry, Physical Therapy

### 1. Core Definition

Hydrotherapy is fundamentally defined as the therapeutic application of water in the treatment of disease or injury, leveraging the physical properties of water, including temperature, pressure, and buoyancy, to achieve specific physiological outcomes. As a form of physical medicine, it aims to induce effects ranging from deep sedation and muscle relaxation to intense systemic stimulation. Although traditionally utilized across general medicine and rehabilitation, the provided context focuses primarily on its specific historical and limited contemporary role as an auxiliary treatment modality within the field of **psychiatry**.

### 2. Historical Context and Use in Psychiatry

The use of water for therapeutic purposes is ancient, with the history of hydrotherapy dating back to **Hippocratic times**, recognizing it as one of the oldest forms of medical intervention. In modern clinical settings, particularly psychiatry, its application is less frequent than in previous eras. When employed today, hydrotherapy functions chiefly as an **aid or adjuvant**, reserved for patients who may not tolerate standard psychopharmacological medications or require non-chemical means of symptom management.

Psychiatric disorders that historically benefited from hydrotherapy--particularly its sedative forms--include conditions involving significant agitation and anxiety, such as certain manifestations of **delirium**, severe states of **involitional psychotic depression**, and chronic presentations of **hypochondriasis**. Its effectiveness often relies on interrupting cycles of tension and excitement through intense thermal or prolonged neutral stimuli.

### 3. Major Modalities of Hydrotherapy

Hydrotherapy, particularly in institutional psychiatric settings, traditionally relied on two primary, highly structured modalities, each designed to elicit distinct therapeutic responses: the continuous tub and the cold pack. These techniques differ significantly in their duration, required temperature settings, and target patient symptoms.

Continuous Tub, or Prolonged Neutral Bath

Cold Pack, or Wet Sheet Pack

#### 4. The Continuous Tub (Prolonged Neutral Bath)

The **continuous tub**, formally known as the **prolonged neutral bath**, is designed to provide sustained, non-irritating sensory input to manage acute excitement and tension. For this treatment, the patient is placed in an oversized tub, resting comfortably in a canvas hammock with their head supported by pillows, minimizing physical exertion.

The core requirement of this modality is meticulous temperature control and duration. The water is continuously circulated and maintained at a temperature that is typically 1 to 3 degrees Fahrenheit below the patient's normal body temperature, thereby creating a thermally neutral environment. The treatment is administered for a minimum duration of one hour. The primary goal is to control states of profound emotional distress, including major excitement, debilitating tension, and acute apprehension, by inducing a generalized state of relaxation through prolonged, gentle immersion.

Crucially, the continuous tub treatment demands strict monitoring and must be terminated immediately if any adverse physical symptoms arise. These contraindications for immediate cessation include increased patient agitation, the development of skin irritations such as **dermatitis**, the onset of fever, or any signs of a developing **circulatory disorder**.

#### 5. The Cold Pack (Wet Sheet Pack)

The **cold pack**, also known as the **wet sheet pack**, is a contrasting modality that utilizes the sharp physiological response to cold to achieve profound sedation. This procedure involves loosely wrapping the patient in multiple layers of sheets and blankets that have been thoroughly wrung out in cold water. The specific temperature of the water is carefully calibrated to the patient's physical constitution and tolerance level.

Specific temperature guidelines for the water are: 48° F for highly **vigorous patients**; 60° to 70° F for the average patient; and a much warmer 92° to 97° F reserved for individuals who are frail or exceptionally sensitive to cold. Upon initial application, the abrupt exposure to cold triggers a momentary but powerful physiological reaction known as **therapeutic shock**, which is vital for initiating the subsequent sedative effect. Sedation typically begins within ten to twenty minutes, though extreme patient excitement may delay this outcome. Sedative effects can sometimes be enhanced by applying ancillary thermal stimuli, such as placing ice packs to the back of the neck and hot packs to the feet.

The application of the cold pack is governed by strict ethical and clinical rules: it must never be used as a form of punishment, and it is strictly contraindicated if the patient does not willingly accept the treatment. It is noted to be most effective in young and physically robust individuals. The treatment must be terminated if the desired sedative effect has not been obtained within forty-five minutes, or if the patient displays symptoms of physiological overheating, often termed

"superheating." Signs of superheating include a rapid pulse, increased talkativeness, restlessness, noticeable flushing of the face, or excessive perspiration.

## 6. Other Hydrotherapeutic Techniques

In addition to the two primary institutional methods, hydrotherapy encompasses several other techniques aimed at achieving specific local or systemic therapeutic benefits:

**Hot Foot Baths:** These are used primarily for their sedative effects, working by inducing vasodilation in the lower extremities, thereby diverting blood flow peripherally and promoting relaxation.

**Jet Sprays and Scotch Douches:** These techniques use high-pressure streams of water, often alternating temperatures, to provide a strong tonic and stimulating effect on the circulatory and nervous systems.

**Electric-Cabinet Bath:** This method uses localized heat and controlled conditions, sometimes applied to depressed patients specifically to reduce acute agitation and alleviate persistent feelings of **guilt**.

**Aquatic Recreation:** A more recent innovation in mental health care involves the structured use of swimming pools and aquatic activities, promoting physical exercise, social engagement, and generalized well-being in institutional settings.

## 7. Contraindications and Precautions

While beneficial for specific indications, the forceful physiological changes induced by hydrotherapy necessitate careful patient selection and adherence to contraindications. The intensity of the cold pack, for instance, makes it unsuitable for patients who are **aged and emaciated**.

More general contraindications across various hydrotherapeutic forms relate to underlying systemic vulnerabilities. These procedures are typically contraindicated for individuals suffering from serious **heart disorders**, severe respiratory illnesses, or conditions that inherently involve an accelerated metabolic state, such as **hyperthyroid disorders**. Continuous clinical assessment of the patient's pulse, temperature, and skin condition is mandatory throughout the administration of any hydrotherapy session to ensure safety and prevent adverse outcomes.

## 8. Further Reading

[Hydrotherapy \(Wikipedia\)](#)

[Hydrotherapy \(Britannica\)](#)