

Implementation of a nurse-led forest therapy module into an interdisciplinary multimodal pain management program: feasibility of concept and recommendations for practice

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Background and aims:

There is well known evidence of human health and well-being benefits of spending time in forests (1), particularly in stress-related and mental health (2). Even therapeutic effects of forest exposure is measured in CBT-programs for depression (3). There are only few studies exploring the effects of forest therapy in patients with chronic pain (4, 5), but the therapeutic potential for this population has been recognized (6). We developed and implemented successful a nurse-led forest therapy module into an interdisciplinary multimodal pain management program for chronic pain patients in an acute hospital setting.

Methods:

Following steps of development and implementation have been performed:

1. Development of criteria for selection of appropriate forest settings for patients with chronic pain and their special needs.
2. Conception of the module content based on nursing interventions.
3. Implementation and report of first experiences in practice.

Results:

To implement forest therapy in chronic pain treatment facilities different aspects have to be considered, particularly criteria to ensure patient safety. Nursing interventions like "basal stimulation" are appropriate methods in this therapeutic context.

Most patients evaluate the forest module as beneficial as well as the pain nurses consider their interventions in the forest setting as enrichment of the multimodal pain management program.

Conclusions:

Implementing a nurse-led forest therapy module into an interdisciplinary multimodal pain management program can be highly recommended when considering different precautions and criteria. Further research is needed to estimate the clinical evidence of this forest module.

Literature:

- 1) Oh et al. Environmental Health and Preventive Medicine 2017,22:71
- 2) Grilli et al. Int J Environ Res Public Health 2020,17:6125
- 3) Lee et al. Int J Environ Res Public Health 2017,14:321
- 4) Kang et al. Ann Rehabil Med 2015,39 :957
- 5) Han et al. Int J Environ Res Public Health 2016,13:255
- 6) Stanhope et al. Environ Res 2020,187:109641

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