



Langone Medical Center: A pioneer in horticultural therapy

Laura DePrado, Final Touch Plantscaping 1:04 p.m. ET Dec. 19, 2016

Horticultural therapy at Rusk Rehabilitation treats those with illness, injury, rehabilitative needs, including programs in pediatric, orthopedic, neuromuscular, stroke and head injury.



Wichrowski MSW HTR, Senior Horticultural Therapist, Clinical Assistant Professor, Rusk Rehabilitation NYU Langone Medical Center, engaged in horticultural therapy demonstration with school group at Jangheung International Integrative Medicine expo October, 2016 (Photo: Courtesy of Emily Shun, Hong Kong Association of Therapeutic Horticulture)

One of the nation's first horticultural therapy programs began at Rusk Rehabilitation at NYU Langone Medical Center in the mid 1970s. Langone Medical Center serves individuals with

a range of medical conditions, and works with Dr. Howard A. Rusk's philosophy of treating the entire person, including emotional, psychological and social needs.

Horticultural Therapy (HT) at Rusk Rehabilitation treats those with illness, injury, rehabilitative needs, including programs in pediatric, orthopedic, neuromuscular, stroke and head injury. Horticultural activities are available to all patients who are interested, and family and friends of patients are often encouraged to participate. In some cases the family as a whole unit is the focus of the treatment.

The HT sessions work to reduce stress and anxiety for patients and visitors alike.

Patients benefit greatly from stress reduction, improved mood, and pain diversion. Patients also improve physically from the prescribed exercise the HT activity provides. Therapists may work on endurance, activity tolerance, strength, range of motion, and fine motor skills HT provides cognitive restoration and stimulation as well as works on sequencing.

The primary treatment team in Rusk Rehabilitation includes the physiatrist, nursing, physical therapy, occupational therapy, speech therapy, psychology, recreational therapy, and, of course horticultural therapy. Other specialties can be called in as needed. Rusk Institute was opened in 1948. Ten years later, 1958, The Glass Garden was built as an amenity for patients and staff, and was run by horticulturalists for many years. Around 1970 one of the rehabilitation staff started to bring patients down to the garden for therapy.



Matthew J Wichrowski MSW HTR, Senior Horticultural Therapist, Clinical Assistant Professor, Rusk Rehabilitation
NYU Langone Medical Center, working with physical rehabilitation patients Rusk institute of Rehabilitation
Medicine working with physical rehabilitation patients Rusk institute of Rehabilitation Medicine (Photo: ~Courtesy of
NYU Langone Medical Center)

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Later In the 1980's as the field of horticultural therapy became professionally organized, horticultural therapists began to run the program and provide therapeutic horticultural services in various settings around the medical center.

Currently, horticultural therapy programming is divided between the North Campus (on First Avenue between 30th and 34th streets), and the downtown setting in the Hospital of Joint Diseases (17th Street and Second Avenue). On the North Campus as well as the Hospital for Joint Diseases, the treatment takes place bedside and group programs are conducted in sunlit common rooms on the units.

Additional programming is provided at Hassenfeld Children's Center for Cancer and Blood Disorders, a special clinic for children diagnosed with cancer. For nearly 50 years HT took place in the Glass Garden which was comprised of a greenhouse, children's play garden and courtyard gardens. However, "irreparable damage from Hurricane Sandy closed the Glass Garden in 2012. "Without the award winning garden setting we needed to become flexible and creative in providing programming," said Matthew Wichrowski, assistant clinical professor of Rehabilitative Medicine.

At Rusk Rehabilitation, Wichrowski works in the medically complex and cardiac rehabilitation unit, epilepsy unit and acute care psychiatry. His primary role is to provide clinical services and he has been employed as a horticultural therapist at the medical center for 23 years. Over that time, he has played a pivotal role engaging in clinical research and serving on the Patient Satisfaction Committee and performance improvement projects.

In 2015, Wichrowski received a faculty appointment from NYU School of Medicine to clinical assistant professor role, allowing him to further his teaching, research and publishing interests.

How does Wichrowski define horticultural therapy?

"The broad use of nature-based therapies with its many different applications and techniques make a strict definition of horticultural therapy and therapeutic horticulture difficult," he said. "I would describe it as the use of nature and nature-based activities to meet the needs of participants as

provided by a trained therapist. Horticultural therapy determines individual goals for participants which are charted.

"Therapeutic horticulture also utilizes nature-based activities by a trained therapist, and there are goals for the group of participants in general, but these are not individually measured and charted," he added. "Overall HT can be effectively utilized in healthcare, educational and social and vocational settings to provide a wide variety of benefits for participants."

Wichrowski has published a number of articles, most notably a collaborative article in the Journal of Cardiopulmonary Rehabilitation and Prevention, "The Effects of Horticultural Therapy on Mood and Heart rate in Patients Participating in Inpatient Cardiopulmonary Rehabilitation Program." Wichrowski's study demonstrated a significant reduction in heart rate and agitation for patients participating in a horticultural therapy program.

The program consisted of a plant exploration component emphasizing the sensory aspects and positive adaptations of the various plants in the collections, as well as a hands-on planting activity and information session on healthy lifestyle activities for those with cardiac conditions.

Through his experiences, Wichrowski has worked closely with and inspired many of his patients along their rehabilitative journeys.

"I had a patient some years back who had a large brain tumor removed. He was previously an accomplished sound man in the music industry and the tumor excision had significantly impacted his cognitive abilities," he said. "He had been having trouble adjusting to his new circumstance and the uncertainty of the future. In his first HT session, he found himself among a group of patients also facing difficult challenges. Each was able to successfully complete their plant activity with the help of the therapist. After the session, he stated he felt like he was "back in the game," and came to every session available to him. He also became a great supporter of the program after his discharge, writing letters to administration about the healing experience."

HT provides a range of benefits in many areas of function. It provides a unique variety of benefits while also reinforcing many of the patients' goals within the team treatment model. In some cases, the benefits derive from the sense of normalcy associated with the activity.

The positive distraction also helps patients divert from their pain for a while and is beneficial to patients whose life has been greatly disrupted by their medical circumstances. The skills learned and practiced in therapy can be utilized at home after discharge and provides a range of healthy lifestyle activities throughout one's lifetime.

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