comfort, and relaxation during both data collection scenarios. Based on the results of these tests of the analyzed data, the hypotheses were all accepted. Tables illustrate pre- to post-session changes in levels of all three variables from both session and data-collection scenarios. Copies of the data-collection forms are also included in the Appendix. The discussion section addresses limitations of this study and suggestions for future studies.

Publication Types:

- Clinical Trial
- Controlled Clinical Trial

PMID: 11712719 [PubMed - indexed for MEDLINE]

: J Palliat Care 2001 Autumn;17(3):135-41

On a personal note: a music therapist's reflections on working with those who are living with a terminal illness.

Hartley NA.

Music therapists are constantly called upon to justify their work through research projects and evaluation processes. Rarely do we get the opportunity to talk personally about our work, the effects it has on us as music therapists, indeed, as human beings. This paper traces my own journey as a music therapist working with the terminally ill. Using audio extracts of music improvised with patients at the end of their lives, the concept of "attention" in music is addressed and explored. The paper will investigate: a) What is the difference between the quality of attention that is available to ourselves and our patients "in" music, as opposed to other ways of being together?; b) What does musical experience, particularly when achieved through improvisation, enable us and our patients to be that we cannot achieve in other ways?; c) Can "being in music" with another person fulfill a sense of longing that is evident in people at the end of their lives? In her book Waiting For God, Simone Weil suggests, "Those who are unhappy have no need for anything else in this world other than people capable of giving them their attention..." (1). Can the improvisation of music offer a unique and uncomplicated medium for being close?

PMID: 11816752 [PubMed - indexed for MEDLINE]

1: Support Care Cancer 2001 May;9(3):156-61

Music therapy in palliative medicine.

Gallagher LM, Huston MJ, Nelson KA, Walsh D, Steele AL.

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A partnership between The Cleveland Clinic Foundation and The Cleveland Music School Settlement has resulted in music therapy becoming a standard part of the care in our palliative medicine inpatient unit. This paper describes a music therapy program and its impact on patients, their families, and staff. A service delivery model is suggested for implementation and integration of music therapy within palliative medicine. Specific music therapy interventions, evaluation and documentation techniques are also mentioned. A description of patient and family responses to music therapy, staff satisfaction, and effectiveness of interventions is presented.

PMID: 11401099 [PubMed - indexed for MEDLINE]

: J Palliat Care 2001 Autumn;17(3):142-6

Music therapy as psychospiritual process in palliative care.

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This paper proposes a theoretical framework for understanding how music therapy elicits and supports depth experiences in palliative care. The author explores music therapy as a containing or sacred space in which ventures into the realm of psychospiritual awareness may safely occur. The ultimate goal is to facilitate the process of connecting to that which is psychologically and spiritually significant for the patient, thereby transforming experiences of suffering into those of meaning.

PMID: 11816753 [PubMed - indexed for MEDLINE]

1: J Palliat Care 2000 Spring;16(1):35-8 Related Articles, Books, LinkOut

Music therapy in palliative care for hospitalized children and adolescents.

Daveson BA, Kennelly J.

Royal Children's Hospital Foundation/ABC Learning Centres, Brisbane, Australia.

Publication Types:
Review
Review, tutorial
PMID: 10802962 [PubMed - indexed for MEDLINE]

nvestigations into synchronisation of heart rate and musical rhythm in a relaxation therapy in patients with cancer pain].

[Article in German]

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OBJECTIVE: Registration of the influence of musical rhythm on synchronisation and coordination of heart rate. DESIGN: Randomized pilot study. PROBANDS: 28 patients with chronic cancer pain in a stable phase of the disease. Intervention:14-day training of a relaxation therapy designed for improving the falling asleep, including a 30-minute lullaby-like, rhythmically dominated music with gradually decreasing tempi. No training in the control group. OUTCOME MEASURES: Continuous registration of heart rate and comparison with musical beat on day 1 and 15. Analysis of the degree of synchronisation, i.e. the coordination of systole and musical central time point (1st beat of the 6/8 time alla breve). Recording of the time of falling asleep and registration of the patient's subjective evaluation of the relaxation therapy and the pain intensity using verbal rating scales. Documentation of the use of analgetics. RESULTS: Under the relaxation therapy trained patients showed an increasing synchronisation and coordination of heart rate and musical beat. At a musical tempo between 48 and 42 beats per min a very stable 2 : 3 synchronisation occurred. Trained patients who reported the best relaxing and analgetic effects showed the highest degree of synchronisation. Relaxation therapy led to an improvement of falling asleep and to a decrease in consumption of analgetics. CONCLUSIONS: Lullaby-like music within a special range of tempi can induce a trainable synchronisation of heart rate, functionally associated with the formation and intensity of a relaxation reaction. Further investigations are promising, however, substantial improvements in the measurement and documentation methods are needed.

Publication Types:
Clinical trial
Controlled clinical trial
PMID: 10460982 [PubMed - indexed for MEDLINE]

1: J Holist Nurs 2000 Sep;18(3):245-60

Cultural differences in music chosen for pain relief.

Good M, Picot BL, Salem SG, Chin CC, Picot SF, Lane D.

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Nurses use music therapeutically but often assume that all patients will equally appreciate the same type of music. Cultural differences in music preferences are compared across five pain studies. Music preferences for pain relief are described as the most frequently chosen type of music for each culture. Findings indicate that in four studies, musical choices were related to cultural background ($p = .002$ to .049). Although the majority in each group chose among the other types of music, Caucasians most frequently chose orchestra music, African Americans chose jazz, and Taiwanese chose harp music. For culturally congruent care, nurses should become aware of cultural differences in music preference and provide culturally specific selections among other music expected to have a therapeutic effect.

PMID: 11847812 [PubMed - indexed for MEDLINE]

Rev Enferm 1999 Apr;22(4):293-8 Related Articles, Books, LinkOut

[Effect of music on children with cancer].

[Article in Spanish]

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This study looked for a relationship between immunity and one's spirits while investigating the effect musical therapy produces on Immunoglobulina A (IgA) found in saliva and a Patient's Opinion on the Likert Scale (OPEL). There were 30 children as patients, 15 in a control group and 15 in an experimental group. They were 5 or 16 years of age and checked into the Sant Joan de Deu Hospital in Barcelona due to neoplastic illness.

Publication Types:
Clinical trial
Randomized controlled trial
PMID: 10514756 [PubMed - indexed for MEDLINE]

: Prog Cardiovasc Nurs 2001 Winter;16(1):5-13 Related Articles, Books, LinkOut

The effects of music on cardiac patients on bed rest.

Cadigan ME, Caruso NA, Haldeman SM, McNamara ME, Noyes DA, Spadafora MA, Carroll DL.

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Hospitalizations that require invasive cardiac procedures or support with an intra-aortic balloon pump can be unsettling. This study was undertaken to measure the effect of a music intervention on physiologic and psychological responses of patients on bed rest due to procedural sheaths or an intra-aortic balloon pump. A randomized, two-group, pretest/post-test design was utilized to measure the effect of a 30-minute music intervention on heart rate, blood pressure, respiratory rate, skin temperature, pain perception, and mood states. One hundred forty subjects participated, 65 in the control group and 75 in the treatment group. There were no significant differences between the groups in demographic, clinical, or baseline variables, except for respiratory rate. After the music intervention, there were reductions in blood pressure, respiratory rate, and psychological distress, as measured by the Profile of Mood States ($p < 0.05$). Music appeared to affect selected physiologic responses and reduce psychological distress in patients on bed rest.

Publication Types:
Clinical trial
Randomized controlled trial

PMID: 11252881 [PubMed - indexed for MEDLINE]

usic medicine. A neurobiological approach.

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Music medicine is a relatively new medical specialty for most countries in the world and a rediscovery of a discipline for some countries in Europe. In the scope of music medicine are health problems of musicians like stage fright and psychic stress, pain syndromes and motor disturbances. Specific demands of musicianship like performing before the public, performing under the constant critical scrutiny of conductors, being expected to perform perfectly, and the physical demands of performing on a musical instrument were seen as the determinants of the complaints, and treatment does usually not differ between musicians and non-musicians with comparable diseases. In the present article, growing neurobiological evidence will be summarized showing that musicians differ from non-musicians on brain structure and function and on some hormonal and immunological parameters. Musicians tend to have atypical brain organization for verbal and non-verbal materials, their auditory system tracks sound levels more accurately, musicians attend pre-consciously to musical material and they react to music as if it is a stressor, i.e. with increased activity of the autonomic nervous system and with an increase in stress hormone production. A musician is more likely than a non-musician to be non-righthanded and to be vulnerable to atopic diseases. Testosterone levels are assumed to be lower (male) and higher (female) than controls. Melatonin was found to be elevated, and ACTH was related to musical talent. His/her brain reflects early music practice by enlarged structures, like the anterior part of the corpus callosum and the representation for piano tones and for the left thumb and little finger in string players. In addition, the left planum temporale was found to be larger in musicians with absolute pitch. These differences between musicians and non-musicians may have implications for music medicine in theory and practice, and further research should help to improve treatment of musicians.

PMID: 11455337 [PubMed - as supplied by publisher]

an To Kagaku Ryoho 1997 May;24(7):792-9Related Articles, Books, LinkOut

[Hospice program and palliative medicine music therapy

[Article in Japanese]

Nakagami Y.

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Hospice and palliative care have important roles for cancer patients in an incurable state to alleviate their total pain and to achieve the best quality of life. Interdisciplinary team-doctors, nurses, therapists, social workers and so on provide effective support in order to fulfill the varying needs of patients and families. Pain relief as a palliative medicine is most urgently required by seventy percent of patients on admission to our Hospice at the Salvation Army Kiyose Hospital. A case is presented with some comments on pain management. Music therapy is also introduced. This is one of the complementary methods for consolation of the mind and body of patients. Some of them seem to find it beneficial.

PMID: 9170516 [PubMed - indexed for MEDLINE]

1: Dimens Crit Care Nurs 1995 Mar-Apr;14(2):78-85 Related Articles, Books, LinkOut

A relaxation protocol to reduce patient anxiety.

Mynchenberg TL, Dungan JM.

Relaxation and music therapy have shown promise as anxiety-reducing interventions for patients in critical care settings. The challenge for nurses is to incorporate these modalities of care into effective clinical strategies. This article describes one method of introducing relaxation therapy to the anxious patient within the context of the Dungan Model of Dynamic Integration.

PMID: 7889802 [PubMed - indexed for MEDLINE]