Music therapy in dementia care
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Music therapy in dementia care: Perspectives on clinical practice

Hanne Mette Ridder, Aalborg Universitet

MUSIK OCH SÅNG INOM DEMENSVÅRD, Stockholm, 4.10.2012

Fokus for clinical praxis:

- Intersubjectivity

"All present moments involving intersubjective contact involve actions, be it a mutual gaze, a postural shift, a gesture, a facial expression, a respiratory change, or a change in vocal tone or strength" (Stern 2004, s. 145).

Understanding dementia

“... dementia is essentially a strange and frightening situation that activates very deep fears and consequently a range of behaviours aimed at making the world less frightening.” (Cheston & Bender 2003, p. 145)

Personhood and a psycho-social approach (Kitwood 1997)

The human voice

- Processing of the human voice is neurobiologically different from the processing of other acoustic signals (Porges 2001, p. 144).
- This has an impact on social engagement via hippocampal function, stress-related responses and self-soothing behaviours.

Hippocampus and stress-related responses

- Hippocampus: impressions are turned to memories
- Alzheimer’s disease: damage to Hippocampus
- Hippocampal dysfunction: problems in creating meaning/understanding → the nervous system is stressed
- Hypersensitivity to stimuli → strong emotional reactions experience of chaos → anxiety

Stress and self-soothing behaviours

- Dementia. Two extreme states; either:
  → depression, avoidance, ‘vegetation’
  → anxiety, panic, aggression
- Parallel to two first phylogenetic stages in the polyvagal theory (Stephen Porges 2001)
  → Immobilization: freezing, paralysed, avoiding contact
  → Mobilization: mobilizing behaviours necessary for flight/fight
**Stress and self-soothing behaviours**

- **Immobilization system**
  - Depressed
  - Parasymathetic nervous system
- **Mobilization system**
  - Stressed
  - Sympathetic nervous system
- **The social engagement system**
  - Socially engaged
  - The mammalian signaling system for motion, emotion, and communication.

(Porges 2001, p. 130; Hart 2006)

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**The therapeutic relation**

- … if the individual perceives the environment as safe, there is the neurophysiological possibility that the cortex could regulate the lower motor neurons of the social engagement system to promote communication and social behavior.
- Thus the perception of safety is the primary requirement for our intervention (Porges 2001, p. 143).

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**Attention**

"…When the level of stimulation is more moderate, somewhere between the two extremes, his attention will be more easily captured and maintained" (Stern 1977).

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**Examples from case descriptions**

<table>
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<tr>
<th>3-12 softs</th>
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<tr>
<td>65 94 60 90 50 70 25 70 17 70 79 62 63 54 60 18</td>
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Fig. 07.2a: Reaction time is relatively high. This makes a jump in bpm marked with the dotted line.

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**Arousal regulation**

- **Number of Bs during session**

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**Arousal regulation**

- **Mean bpm**
  - Week 1: 83.7
  - Week 6: 77.2

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**Mean bpm**

<table>
<thead>
<tr>
<th>Week 1</th>
<th>Week 6</th>
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<tbody>
<tr>
<td>70</td>
<td>75</td>
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<tr>
<td>80</td>
<td>85</td>
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<td>87.8</td>
<td>87.7</td>
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Songs in music therapy

<table>
<thead>
<tr>
<th>Level</th>
<th>Components</th>
<th>Aspects</th>
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<tbody>
<tr>
<td>Focussing attention</td>
<td>Structure: stability and cues</td>
<td>Constitutional</td>
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<td></td>
<td>Songs as cues</td>
<td></td>
</tr>
<tr>
<td>Arousal regulation</td>
<td>Musical and social elements</td>
<td>Regulative</td>
</tr>
<tr>
<td>(→ environmental attention)</td>
<td>Songs that stimulate/ sedate</td>
<td></td>
</tr>
<tr>
<td>Dialogue</td>
<td>Focus on psychosocial needs</td>
<td>Dialogical</td>
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<tr>
<td></td>
<td>Validation, holding, facilitation</td>
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<tr>
<td></td>
<td>Songs with personal meaning</td>
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<tr>
<td>Conclusion</td>
<td>Structure: stability and cues</td>
<td>Integrative</td>
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<td>Songs as cues</td>
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</table>

TAK for nu!

Reference: se
www.cedomus.aau.dk