

Music Therapy In The Prevention And Treatment of Depression In Older Adults In lima-Peru

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Abstract

It is the first effort aimed at the application of Music Therapy techniques to help in the prevention and treatment of depression in the older person in the Miraflores of Lima, Peru. The Biopsychosocial and Yesavage tests were applied to all patients. We describe all the used techniques, the musical themes and therapeutic instruments used in a total of 50 people aged between 60 and 96 years, a six months treatment with a weekly frequency and culminated in a substantial improvement of problems like Depression, anxiety and nervousness as other mental health problems, among other achievements.

Keywords

Therapy, Depression, Elderly

“Music therapy is the first technique to approach the human being and also the last to join him”.
Dr. Rolando Benenzon

Definition

“Music therapy is a technique that allows the release (Catharsis) of psychological and organic pain related to improve the quality of life and revitalize”

“The Music therapy humanizes and dignifies elderly patient, and improve his quality of life”

Introduction

In Lima (Peru) there is a trend of population aging as a result of declining birth rates and rising life expectancy. It is estimated by 2014, people over 60 will represent close 15% of the national population. It has been estimated that the prevalence of lifetime depression is 20.4% in men and 19.6% in women with a very high frequency. Likewise, it calculated that up to 30% in people over 60 years have any of the various forms of depression. The presence of minor depression or subclinical depression is estimated at 35% to 40% of the older people and major depression in hospitalized patients with acute disease reaches 50%. It has been noted several contributing factors that could lead to depression in them: socioeconomic, family dynamics, retirement, isolation, violence, death of family and friends, financial loss, etc.

Theoretical framework

Music therapy with holistic therapy, which affects the totality of the human being is used in anti-aging medicine as part of the Mind-Body Therapy (TMC).

Dr. Rolando Omar Benenzon is an Argentine music therapist, psychiatrist and researcher in this field, which has had different experiences in the use of music therapy, anti-aging medicine and depression. The proposed start treating the elderly, individually or in groups, after collecting a detailed history that relates to his personal history, and particularly to their taste and musical knowledge. The intervention was developed in three phases.

Phase I: Sound Life history

Phase II: Use of therapeutic musical instruments, songbooks, etc.

Phase III: Composition of songs and editing CDs

Features of music	Aspects to work with the patient
1. Capacity of evocation and recreation	Relieve depressive states
2. Ability to achieve relaxation and containment	Decrease anxiety. Promote muscle relaxation. Decrease pain perception.
3. Instrumental work	Expressing through instruments (object broker). Contain aggression / anger.
4. Creativity: Musical Instruments Workshops	Building self-esteem. Convert the subject in active patient.
5. Ability to communicate and socialize	Social Development, psychosocial and reduce isolation.

Theoretical background

In relation to the history, we made a thorough search of international literature among which are: Effect of field experiences in music therapy: Choral Music Perception in Geriatric Wellness Programs. *Journal of Music Therapy*, Volume 41, Issue 4 (December 2009) pp. 340-352; Kimberly Van Weelden, PhD and Jennifer Whipple, PhD, MT -BC, of Florida State University.

Research conducted at the Cleveland Clinic in Ohio (2010), where Dr. Sandra L. Siedliecki, and a group of researchers found that when patients with chronic pain listened to music a daily hour for one week, their levels of pain, depression and disability decreased and were in the mood to improve depression.

Aitor Aitor Lorono L (2009) conducted a study with depressed people in BILBAO. They applied Music therapy to reduce depression and stress level using melodies that create an altered state of consciousness in which the person creatively overcome their conflicts and cause of their depression.

As for the effects of music therapy versus mood, there are an important number of researching, one of which is held in the school of medicine at Stanford University. The twenty men and women, aged 61 to 68 years old, who listened known pieces while practicing various stress reduction techniques without the help of a music therapist improved their mood and depression decreased them.

Objectives

Determine the effectiveness of music therapy in older patients with depression, anxiety and nervousness by applying the Biopsychosocial, Yesavage and modified Hamilton tests in patients in Lima, Peru. Also improving Self Esteem of older patients.

Materials and methods

Group composed of 50 (30 women and 20 men) from 60 to 96 years. None of the treatment group has had severe disorders; however, the majority had problems of depression, communication and family relationships, accompanied by feelings of loneliness, indifference, depression and aggression. From the physical point of view, there were disorders such as hypertension, diabetes mellitus, bronchial asthma and arthropathy.

Instruments

Clinical history and direct observation to rule out severe pathologies.

Yesavage Test. To quantify the geriatric depression scale.

Biopsychosocial Test. To pick up the fundamentals of psychological and physical measure was desired in the study.

Music Therapy Test (Musical History). To explore musical tastes and doing so in music therapy treatment for each patient.

Techniques

The patient is proposed to listening music according his personal taste, in order to stimulate the imagination and creativity and provoke memories, images and fantasies. Musical improvisation, as Bruccia model, involves spontaneously express freely and creatively through any musical instrument, the voice (singing) or body (dance). Travel Technical musical Cid (Posh 1999). Patient arises imaginary travel to various countries, helps the patient to escape recalling positive experiences and return to reality with a more positive spirit. Singing, either through musical improvisation described above or through musical dialogue. It consists of improvised music sequence exchanges between two or more people.

Dance therapy is to express through movement, rhythm, melodies or songs they hear or sing themselves. Schütz relaxation technique with musical background to achieve sedation states in the sessions, and also to teach individuals to use music application further use sedatives and individually.

Used music

Treatment included pieces of music of various genres, as Musical History of patients, most of whom chose classical music of Mozart, spiritual music church (The Lord is my strength, and how not to believe in God, the family hymn) and international music (ballads, Boleros, Clayderman, etc.). Also used dance music salsa, cumbias, etc. The musical themes were used: 1.- I BELIEVE IN GOD, 2.- IMAGINE, 3.- MOZART- K-448,4.- Resist 5.- HARMONY 6.- THE LORD IS MY STRENGTH 7.- DO NOT BELIEVE IN GOD AS 8.- FRIEND 9.- FAMILY, 10.-MY WAY

Procedure

The sessions, of one hour, is developed with a weekly frequency. The sessions comprised of active and passive techniques described above, with the understanding that the singing, playing, improvising and listening are musical activities that are used for therapeutic purposes and are determined by the individual characteristics manifest in previously conducted tests.

Methodology

The group consisted of 50 people (40 women and 10 men) from 60 to 96 years old, with an education that ranged from second grade to the upper level, with the following distribution: 04 university students, 06 high school (pre-university), 20 incomplete secondary, 20 primary education.

As psychological characteristics, although none had severe disorders, could be seen in most problems. Depression in varying degrees, as well as communication and relationship with the family, accompanied by feelings of loneliness, indifference, depression, aggression and few opportunities for recreation (all found from individual interviews and biopsychosocial test). From the physical point of view (as confirmed in the individual medical history), there were disorders such as hypertension, diabetes mellitus, bronchial asthma and arthropathy.

Results

Variables	Before treatment	After treatment
Depression	50	03
Loneliness	50	03
Sadness	50	02
Esteem	08	42
Aggression	15	03
Little communication	33	07
Disinterest	20	04
Nervousness	44	03
Socialization	10	42

Discussion of results

Music therapy is recuperative and preventive therapy that also achieving socialization, recovering the mood of patients, which means improving their self-esteem, strengthening their immune system and therefore the quality of their life.

The study case supports that the symptom categories benefit by 70% progress in improvements, which proves the effectiveness of the therapy in order to improve the quality of life in the population excluded by the system and even the family.

In a general sense could be seen that the work performed music therapy had a considerable impact on the elderly people who attended it. In fact, their mood improved visibly increased their family communication and social interaction, decreased their state of loneliness and alienation (common at this stage) and memory disorders and self esteem. It is interesting to note the enthusiasm with which this activity received, being that therapy time constituted an important time for them entertainment and distraction, in addition to connect with important experiences of his past.

As for the relationship between the clinical picture presented by patients and their ages, it did not found significant relationship while presenting diseases consistent with those suffering from the average of the patients, ie, hypertension, diabetes mellitus, arthropathy and depressive. However, and although there was no strict control over the experiment, reported a decrease in the amount of some medications used for relieving physical pain and sadness that characterized the beginning of it. Certain relationship was observed between the clinical and schooling, and that patients with higher levels of education facing the disease and seeking support mechanisms to live with more quality. This was evident from the start of the music therapy sessions to talk about their diseases and became more evident in the course of the same.

Conclusions

We conclude that Music is preventive and curative, especially for older patients with depression and other neurological diseases.

Although the sample was mostly women (as is common with psychotherapy groups voluntarily attending) which prevented meaningful comparisons between the sexes, as a trend was observed that from the physical point of view, both women and men, behaved very similarly, while that from the psychological point of view prevailed among women depressive symptoms.

This experience encouraged to continue its application and improvement in people of this age. The surrounding reality calls everyone to give them careful attention. In the final analysis, the law of nature dictates that all are born, grow, develop and die. Should be made by the actual older people the same what one would wish for himself in the future. It includes provide affection, attention, and not to deprive them of enjoying the most beautiful of the arts: Music. She is able to boot the hidden human feelings, as recognized by great musicians and arising the deepest emotions. It is fair to admit that "Love and music are the two wings of life and good health".