A Music Intervention for Dementia in Psychogeriatric Clinical Setting

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Keywords:
Music intervention
Dementia
BPSD
Psychogeriatric

Introduction
This program explores the effects of a weekly structured music intervention on Behavioral and Psychological Symptoms of Dementia (BPSD) in a psychiatric clinical setting. Music intervention has shown promise as a Nonpharmacological therapy for BPSD. Music can be used to increased social engagement and music as a therapeutic intervention needs to target the person’s ability to attend to the process and respond with emotion.

Objectives
The aims of the program are to provide a structured day routine, encourage physical exercise and cognitive stimulation, explore capabilities and interests, and facilitate sharing and interaction in BPSD

Methodology
The subjects recruited in Psychogeriatric male and female wards were: (1) Diagnosed with Dementia with BPSD, (2) Mini-Mental State Examination (MMSE) score of >=10, (3) Geriatric Depression Scale (GDS) - Short Form <10. The MMSE, GDS and Cohen-Mansfield Agitation Inventory (CMAI) - Short Form were used to measures changes in the primary outcomes of mood and disruptive behavior. Approval for the pilot program was endorsed by Chairman of Psychogeriatric Team Meeting. The music intervention utilized the live music, person-centered engagement approach whereby participants were actively assisted by the trained nurses to participate within a group setting in singing, rhythmic drumming, vocal or percussion improvisation, physical movement.

Result
A pilot music intervention was implemented from 3rd to 30th December 2012, 2 sessions per week and 60 minutes per session. 11 subjects were assessed to be eligible for the intervention. 5 subjects dropped out as 2 subjects due to physical condition, while others were discharged. 33.3% showed improvement in MMSE and 16.7% showed improvement in GDS. The frequency of majority agitated behaviours
for all subjects noted decreased according to CMAI. All subjects showed increased enjoyment in singing songs and playing musical instrument. They expressed positive feedbacks and eager to participate the music intervention program in future. The music intervention program resulted in improvements in BPSD. As a weekly intervention is modest in cost and holds the potential to maintain connection, belonging, autonomy and their sense of self-identity even as the disease progresses and provides the impetus for further research on music interventions to address issues of quality of life in BPSD.