Virtual Music Therapy as an Integrative Treatment for Palliative Patients

Kelly Mitchell, BSN, RN, OCN
Project Chair: Mary DiGiulio DNP, APN, FAANP
Project Team Members: Katherine DeMarco DNP, MSHS, APN, FNP-BC, ACHPN & Jenna Forsythe MSN, RN, AOCNS

Introduction
Palliative care focuses on caring for the whole person by focusing on improving their emotional, psychosocial, spiritual, and physical well-being (Beilharz, 2019, p. 736). Despite being implemented since the 1970s, music therapy is still not implemented as a treatment for inpatient palliative patients at hospitals who have great access to palliative care. Music therapy addresses one’s physical, emotional, and social components, all of which are essential elements palliative care focuses their care towards.

Background/Significance
- Music as a universal language has physical, emotional, mental, and social components that influence people on a personal basis (Fernando et al., 2019).
- Music therapy is an evidence-based practice in which a therapeutic relationship is created between the patient and music therapist by using music to achieve patient-centered goals (McConnell et al., 2016).
- Music therapy has been implemented internationally within the last decades as one of the most commonly used complementary therapies in palliative care (Schmid et al., 2018).
- There are several ways in which music therapy can be implemented: receptive, creative, expressive, or combined interventions (Gallagher et al., 2018).
- Music therapy has been found to address many symptoms among palliative patients.
- Improvement in physical symptoms such as pain, shortness of breath, fatigue, and comfort (Gallagher et al., 2018).
- Reduction in emotional symptoms of anxiety, depression, sadness, grief, and stress, as well as improving communication, mood, and feelings of hope among palliative patients.
- Enhanced quality of life is a key impact music therapy brings into palliative care.

Aim
To implement virtual music therapy as a holistic, patient-centered integrative therapy for palliative patients in order to reduce symptom burden as evidenced by changes in the Edmonton Symptom Assessment Scale (ESAS) total symptom burden score.

ESAS symptom scores:
- Pain
- Shortness of breath
- Tired/decreased energy
- Drowsy
- Nausea
- Appetite
- Sad/depressed
- Anxious/nervous
- Sense of wellbeing

Methodology
The ESAS provided quantitative data by converting symptoms into numerical values.

Design
Pre-post evaluation study

Sample
Palliative patients, 20 years and older, admitted to inpatient adult gerontology units for palliative reasons, non-COVID spoke for themselves, and could complete the ESAS independently or with caregiver assistance.

Target sample size: ≥ 34

Setting
Adult-gerontology inpatient units HMH – Hackensack UMC

Measures
The palliative patient’s ESAS scores taken right before receiving virtual music therapy were compared to the patient’s ESAS score taken right after receiving virtual music therapy.

Results
34 study participants

<table>
<thead>
<tr>
<th>Symptom Severity</th>
<th>Average Score Pre</th>
<th>Average Score Post</th>
<th>P Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pain</td>
<td>5.21</td>
<td>3.82</td>
<td>.001*</td>
</tr>
<tr>
<td>SOB</td>
<td>1.65</td>
<td>1.09</td>
<td>.162</td>
</tr>
<tr>
<td>Tired/Decreased energy</td>
<td>4.94</td>
<td>1.85</td>
<td>.000*</td>
</tr>
<tr>
<td>Drowsy</td>
<td>4.24</td>
<td>1.62</td>
<td>.000*</td>
</tr>
<tr>
<td>Nausea</td>
<td>0.82</td>
<td>0.65</td>
<td>.364</td>
</tr>
<tr>
<td>Appetite</td>
<td>4.35</td>
<td>2.85</td>
<td>.015*</td>
</tr>
<tr>
<td>Sad/Depressed</td>
<td>3.68</td>
<td>1.50</td>
<td>.000*</td>
</tr>
<tr>
<td>Anxious/Nervous</td>
<td>2.97</td>
<td>1.21</td>
<td>.000*</td>
</tr>
</tbody>
</table>

Individual ESAS Scores
- Sense of wellbeing
  - Pre: 4.91
  - Post: 1.97
  - P Value: .000*

Discussion
- These outcomes highlight the necessity for use of integrative therapies to address aspects of the palliative patient’s condition medical care on its own cannot address.
- There were substantial observations made based on age, gender, ethnicity, and diagnoses
  - Median age 51.5 – younger population being more open to virtual music therapy
  - More female patients (22) practiced compared to male patients (12).
  - Hispanic population were more willing to physically participate in the virtual music therapy sessions.
  - The cancer population accounted for 58.8% of the study participants.
  - The sickle cell patients (5) all wrote their own songs with the music therapist.
- It is hopeful this study will promote the use of music therapy as an integrative therapy not only in the palliative care setting, but eventually in other specialties and hospitalized patient populations.
- Not only should music therapy be recognized as a health profession, but more education should be provided to patients and healthcare professionals on it.