What Effect do Music Sessions have on Inpatient Psychiatric Patients? A Pilot Study

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Abstract

This study evaluated the impact of incorporating music in the group therapy setting on UConn’s Inpatient Psychiatry Unit. We aimed to assess if different music interventions would enhance patients’ therapeutic experience on the unit. Music’s effect on patients was evaluated in this IRB-approved prospective pilot study. Self-reported, paired pre-post surveys were used to collect data on patients’ responses to three types of music sessions (live, recorded, control). Patients were asked to rate eight outcome measures.

Twenty group sessions were conducted with ninety patients participating in the study. Characteristics and pre-session survey responses were similar across session types. Adjusting for pre-session responses, we discovered significant differences between session types in mood and quality of life compared to placebo and music intervention sessions.

Patients responded most positively to live music sessions when compared to either the recorded music or control sessions. The unadjusted session type-specific differences were related to patients’ self-esteem, mood, self-satisfaction, and quality of life. This study shows that music had efficacy in enhancing hospitalized psychiatric patients’ overall well-being. Further studies plan to explore whether music played to the entire milieu (versus small-group setting only) might further positively impact patients and/or psychiatry staff.

Methods

This IRB-approved prospective study determined music’s effect on patients admitted to UConn’s Inpatient Psychiatry Unit. Paired self-report surveys before and after 1-hour group sessions collected patients’ responses to 3 different sessions: recorded music, live music, and control (Table 1). Patients rated how they felt in 8 areas (Figure 1) on a 1 – 10 scale, with 10 being most positive except for negative feelings. Some patients included comments (Table 2).

This clinical and evidence-based use of music interventions to accomplish individualized goals. "[9]

Results

Twenty group sessions were conducted (7 recorded, 8 live, 5 control). Pre-session responses and demographics were similar across session types. Unadjusted, paired pre-post surveys showed differences in self-esteem (t136 = 4.0, p = 0.001), mood (t134 = 3.4, p = 0.01), self-satisfaction (t136 = 4.2, p = 0.032), enjoyment of life (t136 = 5.6, p = 0.007), and quality of life (t136 = 5.6, p = 0.004). Session type-specific paired-t tests for pre-post rating differences showed increases in pre- to post-ratings for self-esteem (recorded, t132 = 3.1, p = 0.006) and satisfaction (live, t134 = 2.5, p = 0.023), mood (live, t134 = 3.4, p = 0.002), quality of life (live, t134 = 2.5, p = 0.018), and self-satisfaction (live, t134 = 2.5, p = 0.019) compared to control (t134 = 2.8, p = 0.0001) (Figure 1).

Discussion

Patients appeared to respond more positively to live music sessions when compared to either the recorded music or control (no music) sessions. There was no evidence to suggest that patients responded differently to recorded music sessions versus control, however they expressed positive qualitative feedback (Table 2). The unadjusted session type-specific differences were related to patients’ self-esteem, mood, self-satisfaction, and quality of life. This study shows that music had efficacy in enhancing hospitalized psychiatric patients’ overall well-being. Future studies plan to explore whether music played to the entire milieu (versus small-group setting only) might further positively impact patients and/or psychiatry staff.

Table 1: Patient demographics for music intervention and control group participants.

<table>
<thead>
<tr>
<th>Patient Characteristic</th>
<th>% of 90 Patients</th>
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<tbody>
<tr>
<td>Gender: Male</td>
<td>53%</td>
</tr>
<tr>
<td>Age group: 18-30 years</td>
<td>31%</td>
</tr>
<tr>
<td>31-64 years</td>
<td>62%</td>
</tr>
<tr>
<td>65+ years</td>
<td>7%</td>
</tr>
<tr>
<td>Voluntarily admission</td>
<td>64%</td>
</tr>
</tbody>
</table>

Table 2: Comments from patients on UConn John Dempsey Hospital’s Inpatient Psychiatry Unit regarding music sessions.

<table>
<thead>
<tr>
<th>Session Type</th>
<th>Select Patient Comments*</th>
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</thead>
<tbody>
<tr>
<td>Recorded Music</td>
<td>&quot;I am very grateful for music, I love this session, made me feel good and this group should occur more often&quot;</td>
</tr>
<tr>
<td>Live Music</td>
<td>&quot;Out of all my 25 hospitalizations, this was the best ending I have experienced&quot;</td>
</tr>
<tr>
<td>Control (no music)</td>
<td>&quot;This group should happen daily as it benefits all&quot;</td>
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</tbody>
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References


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