

A n O r i g i n a l
T h e r a p e u t i c T o o l

EXPERIMENT CARRIED OUT
AT THE HOSPITAL

between December 2000 and February 2001
on a group of 76 patients, divided into three groups,
each listening to a different theme from
Dr. Amouyal's CATHARSIS series

By Marie-Christine Plumejeaud
Registered Nurse

Sète Hospital - France



Catharsis Application Program



CATHARSIS TECHNIQUE®

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CONTENTS

1. INTRODUCTION

2. WHAT DO THE NURSES AND CAREGIVERS INVOLVED IN THE EXPERIMENTATION BY M.C. PLUMEJEAUD, IN THE HOSPITAL IN SÈTE, HAVE TO SAY AFTER LISTENING THEMSELVES TO THE THREE PIECES OF MUSIC:

- Key points
- Their testimonies
- Their letters

3. WHAT DO THE PATIENTS IN THE HOSPITAL OF SÈTE, HAVE TO SAY, AFTER THE LISTENING:
(Mainly in geriatric care)

- Key points
- Their testimonies

4. FINDING & PERSPECTIVES

INTRODUCTION

“As music soothes, calms down and eases, why should it not contribute to the healing of an ill and distressed person?” *Dr. Verdeau-Paillès - Le Bilan psycho-musical - Ed. JM Fuzeau (1981).*

The originality of Dr. Alain Amouyal's music, whose themes have been used in psychiatric, geriatric and educational settings since for many years, is bound to the fact that they are almost fully improvisational.

Dr. Amouyal while allowing his own emotional experience to speak through created a spontaneous musical support system that easily resonates with one's inner music and eases affective communication and allows the emergence of repressed personal experiences. One who hears it might also recognize oneself and catch the thread of one's own history.

When one of his friends—Marie Christine Plumejeaud, a Night Nurse—told him about the distressing situations she had to face every night at the hospital where she worked, he offered spontaneously that she might use his music during the evenings there. He then selected three particular pieces with a proven efficacy, to propose to her patients, according to their needs, that they listen to these pieces during the night. Tests were immediately conclusive.

The research described below reveals how, in a mostly geriatric hospital environment, the simple offering of these musical pieces broke down an existential isolation and acted as a soothing balm for patients confronted by suffering and solitude.

The listening sessions happened in palliative care and short-term care units over the course of 61 nights from December 2000 to February 2002. The 76 patients, men and women, all averaging around 80 years old, were suffering from the following pathologies:

- Respiratory illnesses
- Alzheimer's
- High blood pressure
- Depression and behavioral confusion
- Cancer
- Congestive heart failure

This initiative rapidly garnered the support of the caring hospital team who assisted with the walkman listening sessions for those patients who wanted them.

WHAT DO THE NURSES & CAREGIVERS HAVE TO SAY
*of this experimentation in a hospital environment
with an important geriatric component?*

KEY POINTS

- Calming, alleviation in stages, deep body and mind relaxation
- Pain threshold reduction
- Sleep-inducement
- Memory retrieval, unwinding one's life in successive phases, looking back on events in the past and envisioning the future. Looking inward at oneself. Help with self-evaluation and outcomes. Erasing of negativities. Rebirth.
- Feeling of imprinting, music entering into the body. Acupuncture through sound. Sensation of flying, lightness. Feeling of freedom.
- Environmental and behavioral modifications. Elimination of stress. Reduction of anxiety. Relief from suffocating hardships. Brings hope.
- Connection to Nature.
- Stimulation of the imagination. Dreamlike components.
- Communication improvement and enrichment
 - Between caregivers and their patients
 - Between caregivers and the patients' families
 - Amongst the team of caregivers themselves

PASSAGE - 21'

PASSAGE

Music Duration: 21 minutes

Listening sessions with nurses and caregivers

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of December 15th-16th, 2000

Witness No. 1

Profile: P., age 37, caregiver

Reactions observed:

"This music is calming and gentle; so peaceful. It is nice for relaxing to. The music evokes the time of Louis XIV; it makes me think of the set design of the film Barry Lyndon. While listening to it, I saw images of art. This music is connected to the arts."

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of December 16th-17th, 2000

Witness No. 2

Profile: J. M., age 50, caregiver

Reactions observed:

"Very calming music, which brings a nice serenity of mind and body. Non-aggressive music. Beautiful melody on which one sees mountain landscapes.""

Location: Short-Stay Care Unit, Les Pergolines - Sète, France

Date: Evening of December 12th-13th, 2000

Witness No. 3

Profile: C. D., age 55, caregiver

Reactions observed:

"I agree this music could be played for patients at the end of their life. You see a life pass by in connection with this music. There is nothing aggressive in this music. On the contrary, it is so soothing: water flowing, trees, the countryside, and nature."

MUSIC LISTENING SESSIONS in a hospital setting

A couple: they run towards each other, kiss each other, they're happy. For someone at the end of his or her life, it is well to listen to. It allows you to close your eyes and forget your suffering; it heals, it allows you to **pass on**," (she did not know the title of the song).

Location: Short-Stay Care Unit, Les Pergolines - Sète, France

Date: Evening of December 12th-13th, 2000

Witness No. 4

Profile: G. R., age 24, 3rd year nursing student

Reactions observed:

"It's a music that doesn't impose, but rather guides. There is a guiding thread. I watched many images unfold before me: vast landscapes, large lakes, large forests...the feeling of flying.

I'm surprised, because the music is very melancholic, but uplifting at the same time. It has an effect, contrary to other relaxation music – probably connected to its spontaneity – quite a relaxing effect. This music helps you to reflect upon yourself, upon your life. It's something that you can do alone at home, while listening to it."

G., in addition, said he was happy about the initiative to play music for the patients

Location: At home - Sète, France

Date: Evening of December 16th-17th, 2000

Witness No. 5

Profile: P., age 23, caregiver in a polyvalent rehabilitation unit

Reactions observed:

"At the beginning of the piece, I am not comfortable, because I feel as though I am going to be exposed to some rather difficult memories. Moreover, I am very cold, but I find the music incredibly beautiful and harmonious.

Soon after that I allow myself to be carried away by the piece. I feel as though I am settled into a comfortable armchair. I am still cold, my diaphragm is in a knot, and my blood is clogged. I feel my feet come in contact with a soft moss; green, cold and moist. I begin to understand that the moss is purifying my blood and absorbing my pain.

Something I cannot explain pulls me upwards. I look towards the horizon. The setting sun is there. It pierces through me; it is wonderful. I look as far as the eye can see, and I begin to gather pieces of myself, scattered about. I feel much better now. I am warm again. A large warm sun burns my stomach. I am sure at that moment that I am loved. I am also sure that I chose to be born. Thank you."

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of January 4th- 5th, 2001

Witness No. 6

Profile: S., age 31, caregiver

Reactions observed:

"This music is quite beautiful. For me it translates nature, pure and simple. I experienced this listening session in three stages:

- The first 10 minutes, I had the impression that I was in the movie *The Horse Whisperer*... that kind of mood. Then, I was in another film... *A River Runs Through It*. I was in the green of the forest, and then the flowing river: wonderful...

- At the third "ding!" it was as though it was the movie of my own life, with melancholy coming back up from separations, events, mistakes made, regrets... It passed before me, but it wasn't the negative aspect of it. Then, I relived my childhood when I lived with my parents: all of the happiness I experienced with them.

- At the end, I watched my parents grow old, and then my own aging.

This music comes to you. You don't have to force yourself to listen to it, and it doesn't force you, either. Honestly it talks to you in your deepest heart: it calms you, but doesn't put you to sleep."

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of January 13th- 14th, 2001

Witness No. 7

Profile: H., age 42, caregiver, having verified the appeasing effect the music was having on certain patients wishes to listen to the music herself and spontaneously writes what she experiences.

Reactions observed:

"1. The sound of violins gives one a feeling of release, of feeling good. This very soft music brings a feeling of relaxation to the body, manifesting as a complete relaxation of the person. It takes the stress off and allows you to visualize softer things. For example: patients, male or female, in an agitated state, may begin to relax thanks to the soothing, gentle and delicate music, featuring passages of slow and accelerated pacing, and of high and low notes.

2. Personally: I felt like a ballet dancer on stage in a giant classical Opera Ballet. So, through the music, our imagination escapes.

Conclusion: music may allow those who are suffering to achieve a deep relaxation in both their body and their mind, while erasing the sources of irritation and nervousness. It allows one to relax completely, to let go, to unwind and diminish, even to suppress the anguish, the fear of their illness or of their death (this for the patients)."

MUSIC LISTENING SESSIONS in a hospital setting

Personally, I could witness this unwinding and relaxation of the body happen with patients Mrs. G and Mrs. E. With our presence by their side, they were both able to fully let go. Music listening can, therefore, at times take the place of some medicine. Introducing music in the treatment may really allow some of the patients, both male and female, to experience their suffering in a different way, and to soften the final moments of dying. People often have to face their suffering alone.

It is almost nowadays an urgency to create or to put on a team, a staff with this “Music” to help with relaxation, to lighten, appease, or release the suffering of the patients. We would have very positive results in relaxing people young or old. I hope that music will enter into the core treatment in order to relieve the oppression every patient is faced with.”

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of January 19th- 20th, 2001

Witness No. 8

Profile: G., age 35, caregiver

Reactions observed:

“I had to turn off the music it relaxed me so much. I would have fallen asleep. I found it very natural – given the sound of the instruments – and it evoked many images of nature. It is a really positive, calming music I would easily propose to those who are stressed and depressed.

This music has a real content, unlike so many other music types, which lack it. This music talks to you, tells you something, goes with you... Could I have a copy?

Anyhow, thank you for allowing me to listen to it, because I can truly see how this will help the sick... and also the healthy!”

Location: Hospital Center, Medical Unit - Sète, France

Date: Evening of January 31st – February 1st, 2001

Witness No. 9

Profile: M. H., age 50, caregiver

Reactions observed:

“Complete body relaxation. After just 10 minutes, the body is acutely aware of the music. I felt as if I was imbued by this superb music... so gentle and relaxing.”

Location: Hospital Center, Medical Unit - Sète, France

Date: Evening of January 31st – February 1st, 2001

Witness No. 10

Profile: C., age 28, caregiver

Reactions observed:

“Very beautiful and relaxing music that made me think of my husband and my daughter, and of the happiness that I experience with them. This music evokes the one of the film Titanic; it evokes happiness; my family.

Positive music that helps you to escape: an inflow of fresh air.”

Location: Hospital Center, Medical Unit - Sète, France

Date: Evening of January 31st – February 1st, 2001

Witness No. 11

Profile: A., age 20, caregiver

Reactions observed:

“I felt good. I completely let go. It made me think of the film Braveheart as soon as it started. I thought of memories from my past, and of my future, as if the music was connecting them to each other. I also felt as though I were flying: a complete lightness of the whole body.

People can look back at their lives. This music allows for a moment of looking face to face with ourselves, and reconnects with life.”

Location: At Home

Date: February 1st, 2001

Witness No. 12

Profile: G., age 66, nurse

Reactions observed:

“It enters everywhere, through my entire body. Acting on my heart, on my solar plexus. Even though I still feel tense, this music has on me a powerful, calming effect. This music would work well with the elderly, with the clinically depressed, and simply for anyone to relax. Extraordinary music.”

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of March 26th- 27th, 2001

Witness No. 13

Profile: N., age 45, caregiver with 12 years of experience working in an intensive care unit

Reactions observed:

"I allowed myself to let go all the way down to the tips of my toes. Compared to other music that I listen to for relaxation, this music has a very different effect. For instance, I really like the music of Jean-Michel Jarre, but I remain tense, whereas this music relaxes you completely. One has to listen to it in a forest by a lake; you escape completely.

I saw my entire life pass by: my childhood, my adolescence, all my years passing one by one, and ahead it was the future... No other music has ever had on me this kind of effect, of unwinding my life — and it was the beautiful parts of my life. I was completely serene even though I have many negative aspects in my life as well.

This is truly a music which helps you to self-examine, to reassess who you are."

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of April 6th- 7th, 2001

Witness No. 14

Profile: V., age 34, caregiver

Reactions observed:

"I felt as though I was a bird, as though I were flying; a true escape. I watched as different landscapes filed past me.

Even though I was tense from personal issues, and from the fact that I don't really want to come and work here, I "put down the luggage," reassessed, and I felt completely relaxed."

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of April 5-6th, 2001

Witness No. 15

Profile: Mr. L., age 47, senior night nurse

Reactions observed:

"I saw myself in slow motion, as a little girl, in a field in Algeria; my father was cutting with a knife mushrooms that I picked.

MUSIC LISTENING SESSIONS in a hospital setting

At the moment the music went “ding!” I am a teenager; the first time life kicks you in the bottom. Then I saw myself as a woman, with my son in my arms.

From there I saw my parents, and was by their side as they aged. And then when I shall be myself a grandmother, with everything I will have to pass on to those I love.

Towards the end, when you are dying, you are like a king, a queen... being welcomed somewhere, even if you did not always behave well: everyone who loved you, who preceded you, is opening the way for you. I saw M. and D. again when they were alive, myself reliving all the pain of their passing.

This music generates a resurgence of your life, and it is positive, a bearer of hope. Whoever composed this music must have gone through a lot of things in his own life to have been able to bring out all that is essential with such subtlety.”

Location: Hospital Center, Medical Unit - Sète, France

Date: Evening of June 11th-12th, 2001

Witness No. 16

Profile: M., age 47, caregiver, after noting the healing effect that the music had on the patient, is interested in listening to it

Reactions observed:

“I don’t know where the sound comes from. It seemed as if it were coming from everywhere, and that you, too, were hearing it. It brought back some painful memories...in the moment I was surprised (she makes a gesture of a knot in her solar plexus); and then there was a relief, serenity. I am an atheist, but there is something else in this music, something religious, even if I don’t believe it.”

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of July 7-8th, 2001

Witness No. 17

Profile: Miss M., age 31, nurse, stayed the night at the bedside of her grandmother at the end of her life. Miss M., who performs musical entertainment with the elderly, is very interested in the idea of playing music during the night.

Reactions observed:

“I listened to the piece four times...so beautiful and so soothing. I do relaxation exercises, and felt exactly the same effects with this. It makes you deeply let go. Very good music.”

ENLIGHTENED HEART – 25'

ENLIGHTENED HEART

Music Duration: 25 minutes

Listening sessions with nurses and caregivers

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of March 11th-12th, 2001

Witness No. 1

Profile: H.C., age 42, caregiver

Reactions observed:

"Music is a therapeutic tool that should be selected immediately for healing. It is a way to relax, to let go completely of everything in your being. It is a cure for anxiety and stress, manifested by relaxing the body. It seems logical for me that music should be instated as a part of the "nursing diagnosis." I feel as though one should implement this process as soon as one possibly can. It would bring a direct answer for anybody with a health problem.

The nurse, thanks to her teaching and knowledge acquired in music, will be in a position to heal anybody's pathology with diverse, such sweetening, music pieces: it will only bring further relief to a patient, lessen suffering, and bring peaceful sleep.

In this piece, there were sounds of violin and piano that emitted such a gentle delicacy, and then the sound of hammers, that bring about a feeling of absolute calm, a feeling of well-being. You just let your imagination run free. It's wonderful.

A piece of music this sweet could do nothing but bring about a quiet peace to the patients, sick or elderly. Moreover, I think that this music could be very healing for children fighting illnesses, because every child loves gentleness, and this music is gentleness incarnate.

My God, it is just divine to listen to these music sounds hitting the ears, this rhythmic hammering coming back as regular vibrations, this air that encompasses, that enters the body, these very soft sound waves, that pass through your ears and give you relief of feeling well. It is love itself that infinitely cradles you. It is your entire heart that speaks to you. Bravo, for this music so sweet, and pure."

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of March 20th-21st, 2001

Witness No. 2

Profile: C., age 50, caregiver

Reactions observed:

"Beautiful music; evokes serenity, nature. I like it. I find it sad (with a sweeping motion that moves from the heart and shows painful knots). Music that you don't want to turn off underway, you feel that it takes you down a path. You wait, feeling that the composer is bringing you something. It is so beautiful."

Location: Short-Stay Care Unit, Les Pergolines - Sète, France

Date: Evening of April 4th-5th, 2001

Witness No. 3

Profile: A., age 50, caregiver

Reactions observed:

"Relaxation, in stages, until arriving at a deep relaxation. Overall, wanting to cry. We would all hope that life be as kind as this music. We never come in contact with a lightness such as this on earth. It is like a forest breeze. It's good for helping one fall asleep. This music allows one to disconnect, for a moment, from the pain. It is a true aid in front of suffering."

Location: Hosp. Center, Versatile Surg. Unit, Les Pergolines - Sète, France

Date: Evening of May 10th-11th, 2001

Witness No. 4

Profile: M., age 54, caregiver

Reactions observed:

"Beautiful music you could listen to as ambiance. Very gentle, even during our night shift; it would remove the stress; change the whole atmosphere and the way everyone behaves. As far as our night shift is concerned, I think it would help us sleep better in the morning, having lessened the stress.

Music that touches so deeply, the moment I began listening, I shivered and my eyes welled with tears. It brought back the past. I saw my father (who has passed away), and relived the beautiful moments we shared together. My father loved music. I know that I can communicate with him through the music. That was very good to me.

MUSIC LISTENING SESSIONS in a hospital setting

As far as other music is concerned, (and I do listen to a lot, in many different genres), none has ever touched me in such a way. This music would be only healing for the sick. If I could have listened to this piece in my own home, I would evidently have been able to let go even further. Thank you for allowing me to experience this moment.”

Location: Short-Stay Care Unit, Les Pergolines - Sète, France

Date: Evening of July 22nd – 23rd, 2001

Witness No. 5

Profile: M., age 25, caregiver

Reactions observed:

“I practice Shiatsu massage and this music put me in a state of complete relaxation. I felt a tingling through my body, almost like acupuncture through sound, and most strongly on my heart's meridians, in my breathing in my arms, where the circulation was activated.

This music evokes passion for me, in the sense of the “heart's energy,” – it **opens the heart**. It affects the meridian of the heart.

This is a perfect approach of a healing practice to be used with patients. This is fantastic! You must go on!”

RESONANCE - 31'

RESONANCE

Music Duration: 31 minutes

Listening sessions with nurses and caregivers

Location: Medecine Unit, Sète Hospital, France

Date: Evening of April 25th-26th, 2001

Witness No. 1

Profile: V., age 36, caregiver. Surprised by the calming effect of the music on M., V. who was suffering from stubborn low back pain wants to listen to this music. She expresses that she is all the time tense, stressed, and that listening might help her.

Reactions observed:

“The impression that the soul is detaching from the body, that you float on top of things. At first I felt something that wanted to come out (gesture from her chest) and then as if I had no body anymore: I reached for my jaw (the lower one) to feel my body.

The sounds of small bells made me think of fairies, nymphs, their magic light... Water: it's excellent. I saw myself in a tunnel like a speleologist where you follow the water all the way to its source - searching for what is most important. This is for you. Really positive music, removing stress, it raises you. If I had to give it a title: Beginning of Life.”

After listening, the face of V. was completely changed, extended, and relaxed. The voice of V. was more centered and her speech was slower.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of May 25th-26th, 2001

Witness No. 2

Profile: A., age 50, caregiver

Reactions observed:

“It brings on vacation: the song of nature, the wind in the wheat, the sound of the bee, I see myself in the fields. There is something comforting about the emotional, which can help a child. In summary: physical relaxation, and placed in contact with the rhythms of nature. Renewing the mind.

Location: Short-Stay Care Unit, Les Pergolines - Sète, France

Date: Evening of December 12th-13th, 2000

Witness No. 3

Profile: J., age 48, caregiver

Reactions observed:

"This music gives rise to many images. At the 2nd minute, sort of green lasers were passing in front of me, very enjoyable. Then the silence of a cathedral, you are in harmony. It is hyper-relaxing. At the 6th minute: a kind of shrill sound pulls you out of this state: it makes your pulse climb; a break with the minute before. Then I was in open space where boats were moving, with sounds reminiscent of flapping wings.

From the 10th to 20th minute, there was the feeling of swelling, and then coming back down to earth. Hyper relaxation. The music reminds me of a choir dressed in white, singing very soft Gospel spiritual songs. Then, a sound that seems like it is making out time, then another as the bells of spring. The last two minutes, the water flows and the time goes. You see, I become a poet with this music! I can tell you that, for patients and even for Caregivers, it can really help. Very good music! Whenever I'm feeling bad, I go to the seaside. With the music, I really heard the sea."

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of October 4th-5th, 2001

Witness No. 4

Profile: R., age 27, caregiver

Reactions observed:

"Something new, futuristic in this music: I first had contact with the sea on the rocks, then arose a sense of impending doom: war? There was September 11th... I was in the feature film "V," "the invaders." In addition, there was a sound that was like an engine noise, "zzz..." I felt anxiety, distress, I had goose bumps, sweats..."

Location: Short-Care Unit, Les Pergolines - Sète, France

Date: Evening of November 13th-14th, 2001

Witness No. 5

Profile: C., age 50, caregiver

Reactions observed:

"I feel like being alone on the beach, in a creek, and I write on the sand the bad moments of my life. The rolls of waves just erase them as and when I write, and the music behind me takes me to a new life: it is like a rebirth."

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of November 13th-14th, 2001

Witness No. 6

Profile: C., age 32, caregiver

Reactions observed:

"Upheaval of negative things, fears, a feeling of hostile presences, especially elements of anxiety, felt until the end, and of which I am not clear. If I listened to this music before falling asleep, I'd have nightmares..."

C. says she is undergoing currently a period of "blues" and that under her comical looking exterior, she hides a certain despair.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of December 20th-21st, 2001

Witness No. 7

Profile: J., age 25, safety guard, musician, disc jockey, rap devotee, loves all music.

His father was a trumpet player, and there are many musicians in his family. He is interested in the approach of the music with patients and staff: "You can always get something out of an experience."

Reactions observed:

"At the beginning, something heavenly: one is flying... But is it in the air? Is it under the sea? A kind of exploration... You do not know if you are between sky and water. You fly in a space simultaneously of air and water. Then I felt like a particle in the water, up toward the light, then descending into the depths. Then, as if I came back to the Source, at the end, in a setting of nature and ferns, in the Source's runoff..."

It really is a good music that conveys feelings. I found it interesting that short moments of anguish come back, but they were quickly soothed by different sounds and melodies – indeed complex – as if you were passing onto another stage, a succession of steps.

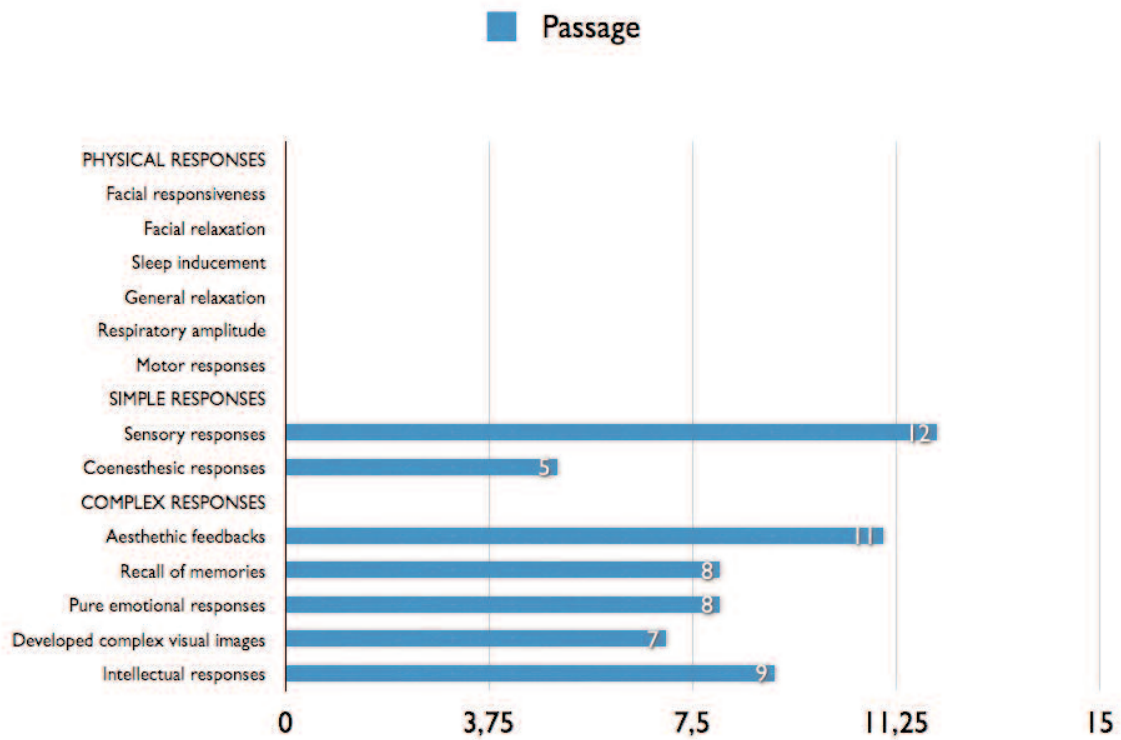
What I most felt in this music was a kind of freedom; its freedom. At one point I actually shivered when hearing a little bell sound. I am Catholic, but I told myself, as if I was in the skin of a Buddhist, that these bells are sounds that open inside, as if it was opening the chakras.

I thank you, because I received a lot of things in that moment of listening. It's really good for patients..."

*GRAPHIC CHARTS
NURSES AND ASSISTANTS*

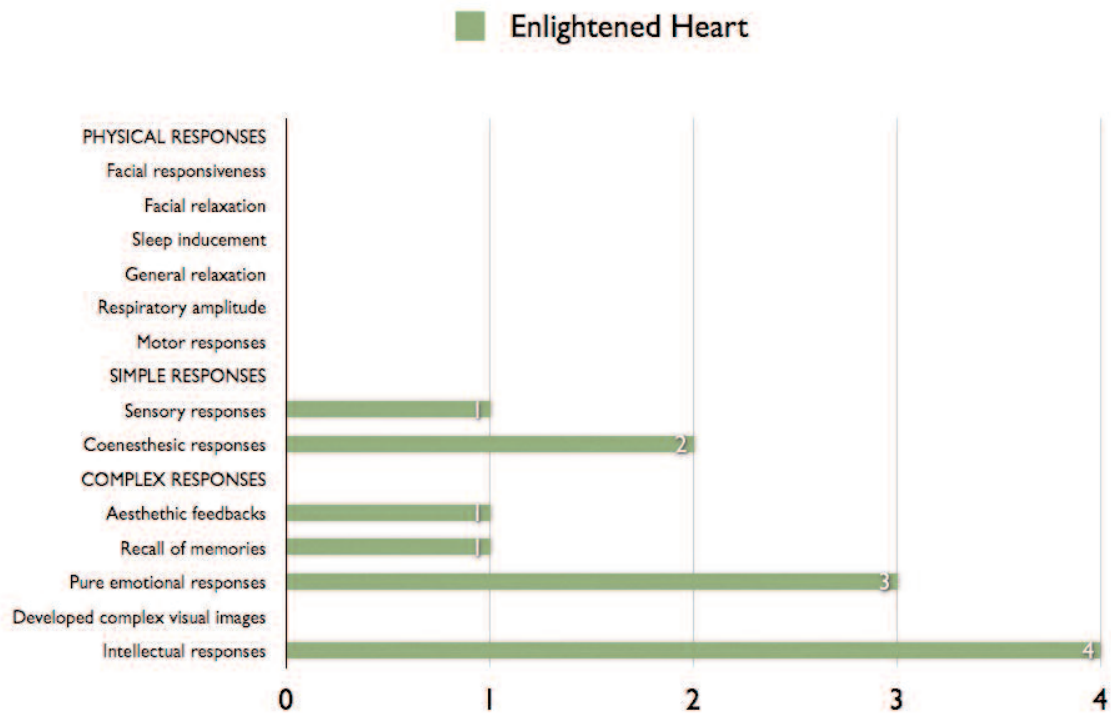
PASSAGE

OBSERVATIONS of 17 CAREGIVERS



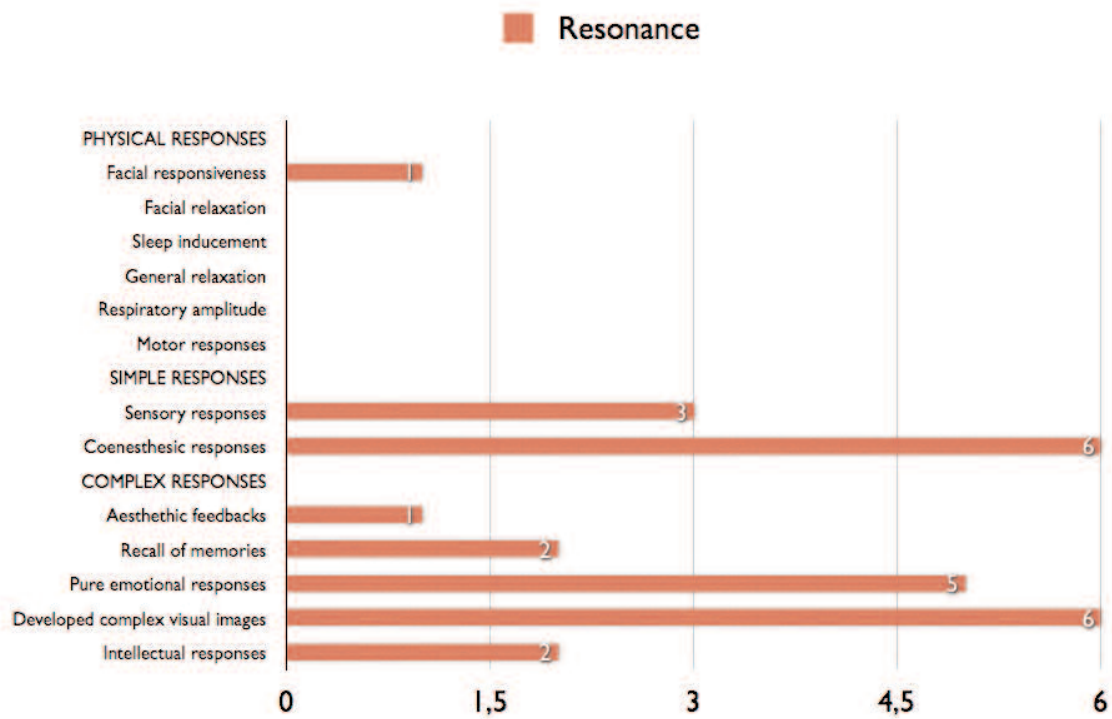
ENLIGHTENED HEART

OBSERVATIONS of 5 CAREGIVERS



RESONANCE

OBSERVATIONS of 7 CAREGIVERS



*ASSESSMENTS
NURSES AND ASSISTANTS*

ASSESSMENTS

Philippe Arnaud, age 38 *Caregiver on the replacement pool at night*

December 2001

As it is well known, music softens manners and if it is targeted, can be very relaxing. In a hospital, few patients are comfortable, doubt in the future is often present, and a tricky stress moves in. So I think that music, be it in the background or personally applied (as therapy), can relieve many patients, help them come through.

For the elderly, to enter an institution puts you at the fact that you are in the twilight of life. The sky darkens slowly and one thinks that after the rain there will be no more good weather...from there comes a form of depression that certainly affects behavior and health of the elderly. This music clears out a patch of blue sky in this dark period that is the end of life. I will always encourage and focus to the best of my ability on this therapy, because it is as useful for me as a medication or any other treatment (massage, etc).

Philippe



Marcelle Perea, age 54 *Caregiver in multipurpose Chirurgie*

November 2001

Dear Marie-Christine,

I responded with joy and great pleasure to your proposal of testing some music before giving it to patients for listening. As you know, I am very sensitive to beautiful music, one that has the power to carry you away into havens of peace and that softens the everyday life, one which can help patients distressed in the night, and those at the end of their life. The first song, "Enlightened Heart," carried me for 20 minutes in this relaxing atmosphere: I was at the water's edge, with a full moon reflecting and a thousand shining on the still water and giving me the impression of a heavenly serenity. But the second piece, "Vocalization," was too short. The third piece, "Plateforme," gave me a feeling of coldness; I would even say uneasiness. In my opinion, not to be recommended for patients feeling bad about themselves.

So, I write you my way of looking at it... I conclude with warm embraces,

Marcelle

Jeanine Simard, age 42

Care Assistant in Chirurgie and Resuscitation

November 2001

Marie-Christine, I would like to share with you my observations on the work you do with the music.

Everyone knows that finding themselves overnight in the hospital is not something easy for relatively young people, but especially for seniors who may sometimes lose, at the same time, their autonomy and their marks gained throughout their lives.

That said, the work you do by having people listen to music is very positive. I can certify so, as I was with you every time you offered it to a suffering person. I noticed that everyone who listened to this music was less stressed, calmer and had a good night despite the pain.

This music relaxes them, truly, allowing them to focus less on the pain, which helps them rest for a speedy recovery. I hope that the work you do with the music will amplify, as it is beneficial to those receiving care and for caregivers.

Warm regards,

Jeanine

Florence Christin, age 28

Caregiver on the replacement pool at night

November 2001

During my various assignments in the service, I had the opportunity to work several times with Marie-Christine. Initially, her plan to use the music made me smile, as I was sure that some people would not be receptive to this type of intervention, mainly the elderly or those with dementia.

In one night and without knowing it, Marie-Christine showed me that I was wrong. I remember that night in orthopedic surgery promised to be eventful. There was, among others, a woman of about forty years with an already lengthy orthopedic story and she was hospitalized again for a major intervention. This lady did not respond to anything: neither painkillers nor advice given by caregivers. The only thing that seemed to have a little effect on her pain... her discomfort... was morphine which she excessively asked for.

That evening, Marie-Christine suggested that she listen to a disc and then, a surprise. The patient rang again once before morning to have the Walkman removed and to tell us its magic. Several times we went to see her and I noticed that this lady was sleeping peacefully (an event that could happen, before, only after a morphine injection) and even her face had relaxed. She no longer had the grimace of pain that never left her for days. That night, this patient did not call for morphine.

Another time, an elderly woman, and known to be agitated, seemed to want to inform the whole staff that she was within our Unit. After having offered the music to her, without being sure she had understood my question, I said to Marie-Christine that the patient agreed to listen to music.

From the first chords, the cries went silent and this lady started to tell us about the time when she was a child. Her mother was a singer and her father a musician. She herself was practicing piano. She loved music and it did her good to hear it. We spent nearly half an hour listening to her telling us her memories over the music. Then, she fell asleep.

That night, I adhered to the music as care, convinced that there could be more than positive results, regardless of age or condition.

Thank you, Marie-Christine. See you soon and good luck in your future work,

Florence

Michele Durand, age 43 *Care Assistant in Orthopedic Surgery*

November 2001

To accompany a patient during his hospitalization is to bring him personal care, comforting care, and to listen to his pain. While in the hospital, the patient does not forget his problems from the outside world and for some, they amplify their discomfort during hospitalization.

To relieve pain, anguish, the means are now numerous. But does a tablet or an injection bring real relief? In some cases no, because the patient often needs someone to hold his hand, to talk with him, whether you are simply listening, not as a caregiver to a patient, but as one human facing another human.

I work at night in an orthopedic ward where the patient is highly demanding about his pain, his sleep, and many other things.

I worked a few nights with Marie-Christine at the time she was setting up a music therapy project. By mutual agreement, when a patient had difficulty falling asleep, Marie-Christine had him listen to music. I was surprised that after listening, the patients fell asleep. Some patients, after listening to music, did better with managing their pain. Personally I think that music can bring an addition to a medical team, as I found that the results were promising. Moreover, some physicians have adopted this approach in their waiting rooms. I wish Marie-Christine every success in her musical project and I hope her work will be recognized. I write this letter to tell her that I enjoyed working with her during those years.

Good luck, Marie-Christine,

Michèle

Michèle Hoffman, age 42 *Night Care Assistant at the retirement home of Pergolines*

November 2001

Marie-Christine, despite my skepticism at first, demonstrated the utility of the use of music to the elderly, and moreover the ill ones.

I refer in particular to the case of Mrs. P., age 82, suffering from early Alzheimer's. This is a lady carrying, after many fugues, a "Delta fugue monitor." In her behavior Mrs. P. in turn appears very timid – she is afraid, sees "things," often locking her up physically – and she is irritable, even aggressive, including towards her roommate.

One night around midnight, Mrs. P. was wandering the corridors, very upset. She was not tired and said it was not the time for bed, she had not had dinner, etc. It was impossible to make her see reason.

Marie-Christine suggested to me that I could try the music, which made me laugh because I could not believe it! To my surprise, Mrs. P. enjoyed the musical interlude. She calmed down and fell asleep. Her roommate was really relieved and everyone had a great night!

Michèle

Monique Genestar, age 54 *Night Care Assistant at the Short-Term Care Unit of Pergolines*

December 2001

I bring my testimony here of the real important and beneficial role of music, which I attended and participated in with patients affected with various pathologies.

Here, the case of a patient on oxygen with heavy breathing problems, anxious, unable to sleep. The nurse suggested that he might relax with some music. At first he was skeptical, but he then accepted. He relaxed and slept, and the next day asked if he could buy the disc because he himself was surprised at the result.

Another patient asked for a sleeping pill. After getting her the medication, listening to music was suggested to her and this lady, the day after, could not believe she slept and woke up so relaxed in the morning.

The most spectacular case is this lady for whom the Parkinson's treatment had not yet been adapted and who suffered from fits of trembling with disorderly movements, constantly shaking her body and her bed, depriving her of all sleep. It was a very painful state for her, and against which we felt quite powerless. My nurse suggested music to our patient, who replied, "If this does me no good, it won't hurt..." A moment later, I went to see how things were going and our patient was sleeping peacefully... no more shaking...

The next day that nurse was working in another department and we had to call her up, because our patient asked for her so she could listen to this music. She said that for her it was the best medicine, and this happened for several nights in a row, until her treatment was readapted.

For me, who witnessed and assessed the effects and results of listening to music at night, I think it would be very beneficial for both patients and caregivers to continue it in the institution.

Monique

José Azuara, age 48 *Night Care Assistant at the Short-Term Care Unit of Pergolines*

November 2001

Having worked for years in the Short-Term Care Unit on the day shift, I often had patients who, despite painkillers or tranquilizers, could not be calmed or reassured. One morning, I learned from one of them that the night had been soft and soothing thanks to the nurse who had him listen to the sea with a helmet. I remained skeptical...

Sometime later, several patients had told me of this famous music, but I was still skeptical. "What an UTOPIA!" I thought. "To calm or comfort or put patients to sleep with music!" Since May 2001, I worked on night shifts. I met Mrs. Plumejeaud, the famous nurse who uses music in her night work and what a surprise! I found myself one night facing a state of anxiety and crisis with a young patient with Parkinson's. The bed was moving because of her tremors and she was sweating. Marie-Christine offered her the music. After 10 minutes passed, the patient had stopped trembling and fell asleep.

From that night, I started to believe in the efficacy of music and often when a patient was unwell or distressed in the night, and when Mrs. Plumejeaud was in the Pergolines, I was able to witness a spontaneous relaxation, through music, of those patients who no longer expect anything from medications.

For more information on the effect of music, one night I took the headphones and put myself in the position of an anxious person. With this music I soon felt relaxed and happy. I can now understand why listening to a melodious sound that gives us a sense of joy and love can soothe us.

I think Mrs. Plumejeaud shall succeed in her quest to help patients and bring them to a near-total serenity. Today, for me, the music in the night care is no longer a utopia but a reality.

José

Amelie Martinez, age 53 *Night Care Assistant at the Palliative Care Unit of Pergolines*

December 2001

When listening to this music, I felt a peace, a quietness come over me. It is a very fine music, which propelled me into another, lighter world. At times I felt like crying, because I wanted it to be as beautiful in life.

For patients, their sleep is more peaceful because the music washes everything else out; it takes precedence over the rest.

I can say that in a team environment, and for patients, the music is very effective for relaxation and it has changed our human relationships while it has enriched them.

Amelie

Sylvie Benne, age 45

Day Nurse in Orthopedic Surgery

December 2001

The situation:

A young woman of 30, mentally retarded since birth, enters the Orthopedic Surgery unit for a fracture of the right ankle in the late afternoon. Her mother accompanies her. Anxious when arriving but calm, this young woman spent the evening without too much agitation or pain.

Her mother stayed as long as possible, but was forced to leave shortly before the night shift arrived. She was very concerned about leaving her daughter alone and feared that the night might be difficult. The young woman became agitated, crying, calling for her mother, anguished, stressed and more and more in pain.

The next morning by the shift change, the night nurse, Mrs. Plumejeaud, reported to us that she had been able to calm this anxiety through music listening, and it had not been necessary to warn the internist, the night having passed without any particular problems.

In the morning, the mother came to thank us for the care that we provided to her daughter, especially at night. She was delighted that we had used a soft method rather than increasing drug treatments (major analgesics, anxiolytics or even increased neuroleptics). The roommate of her daughter had informed her of what happened.

The next morning, the mother asked to meet the nurse who had helped her daughter. She wanted to thank her personally.

My feelings:

Listening to the mother expressing her gratitude helped me reflect on my way of thinking about the so-called “soft” medicines. In fact, I was surprised that this “therapeutic tool” could reduce the intensity and duration of pain by reducing anxiety without the help of any drug. This practice permitted the patient to avoid having her neuroleptics dosage increased by the night internist. She was able to achieve her natural way of sleeping rather than being “brutalized” by sleeping pills and narcotic analgesia.

As a caregiver, I think that music therapy can only improve the quality of care and strengthen the doctor-patient and family relationships.

It is very unfortunate that this “tool” is not used more to calm anxiety and stress. It is true that it is much easier and faster to give a pill, but it is really unfortunate!

This causes me to think that music could be used not only for the “treated” but also for the caregivers: the staff in the line of duty often face situations of stress and anxiety.

Sylvie

Marie-Luce Bayard, age 47

Senior Nurse on night duty

December 2001

I want to thank Marie-Christine Plumejeaud for showing so much determination in finding a quality relationship with patients.

She is part of this generation of nurses who, after 25 years on duty, still recognizes the importance of mastering the technical act and the assessment of a situation, but even more seeks to establish a quality relationship with the patient.

Marie-Christine, for her professional project, showed that she wanted to make this move. She introduced the use of music in her night duty. She met with ignorance, denial and ridicule, but she continued and received a lot of satisfaction from both patients and staff. Some found themselves, some surprised her by their response, and some have been reassured. Finally, each one found a little gentleness and comfort.

I wish her well in this process and especially that she gets the opportunity to do what she is passionate in.

Marie-Luce

***WHAT DO THE PATIENTS
HAVE TO SAY?***

KEY POINTS

- Physical relaxation and mental calming
- Sleep inducement
- Restoration of verbal communication
- Reduction or cessation of pain
- Termination of a shivering crisis (Parkinson's)
- Restoration of contact with the body through touch
- Aesthetic impact of music related to cultural, emotional, spiritual references
- Emotional return of previous experiences (mainly with Alzheimer's)
- Progression in the stages of grief (sadness, anger, loss, acceptance, serenity).

PASSAGE - 21'

PASSAGE

Music Duration: 21 minutes

Listening sessions with patients

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of December 15th-16th, 2000

Witness No. 1

Profile: Mr. R., age 97, Parkinson's, angina, severe bronchitis.

Significant attitudes observed during the night: generalized stiffness, face run through by tics, a sort of permanent grimace of the mouth. Currently, he coughs a lot. Communication is very difficult with Mr. R. who understands simple questions. Tonight, Mr. R. does not sleep, he moans a lot, is constantly pushing his bed sheets back. After having repositioned him, I suggest listening to music.

Reactions observed:

Mr. R. begins listening to the music with a prolonged cough, and he signs with his hand 4 or 5 times as though he was taking something off his nose.

After a few minutes, his expression subsides, the usual tics disappear, and a general relaxation begins as if the music, from his ears, was spreading down to other layers of his body. Breathing becomes fuller and regular. On three occasions while listening, Mr. R. nods positively. After dozing off, he says, "But I like it..." and then goes back to sleep.

The biggest change is that of his body. The usual stiffness is replaced by relaxing. The rest of the night shall be quiet.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of December 16th-17th, 2000

Witness No. 2

Profile: Mrs. C., age 83, blind, inoperable gastric tumor, at the end of her life.

Skeletal leanness, the only thing Mrs. C. requires is Evian water sprayed into her mouth. That night, she is agitated, says she is afraid, and asks me to stay near her. Great music lover, she went to all the festivals of Bayreuth, India, Mexico, and the suggestion to have her listen to music suits her perfectly.

Reactions observed:

"This is superbly aesthetic," said Mrs. C. while her face reflects an expression of delight. She puts her two hands on her chest and belly as if, now pacified, she resumed contact with these two regions. Her whole body surrenders. She is obviously fine. Mrs. C. will demand three times that I put the music back on, with which she falls soundly asleep.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of December 17th-18th, 2000

Witness No. 3

Profile: Mrs. S., age 77, chronic depressive syndrome, Parkinson's, blindness, difficulty swallowing.

No verbal communication is possible with this patient, whose mouth is constantly open with retraction of the neck muscles. She clears her throat constantly emitting a kind of quavering rattle. As like last night, Mrs. S. is agitated, and congested. After having aspirated impeding secretions and performed mouth care, faced with her persistent agitation, I suggest – even if no sign of understanding is given – that she listen to soft music.

Reactions observed:

From the beginning of the music, an expression of amazement appears on the face of Mrs. S., and then, an intense attention. Her face is changing significantly over the moment: the different stages are a kind of “reordering,” the most striking being that the lower jaw relaxes and loosens sensibly.

Mrs. S. makes the sign of touching something in front of her, before putting her hands on her chest. The usually noisy breathing frees itself and is amplified, no longer making any noise. Mrs. S. falls asleep and stays calm for the whole night.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of December 29th-30th, 2000

Witness No. 4

Profile: Mrs. C., age 80, hypertension, hearing loss, mental disturbance, fractured neck of right thighbone (intermediate prosthesis), intravenous nutrition.

Mrs. C. is, that night, very restless and suffers from intestinal problems. Softly, after having repositioned her, I put my hands on her belly. Her problem gradually subsides and I suggest that she listen to soft music.

Reactions observed:

After a few moments of listening to the music with her eyes closed, she has a very unique look and an intense attention and closes her eyes again. She seems to be very present.

Progressive relaxation of the body is seen, and her breathing becomes deep and slow. The nurse's aide enters quietly in the room and notices that the music “works” and that Mrs. C. fell asleep.

The rest of the night, there will be some groans and episodes related to her digestive problem, but Mrs. C. shall go back to sleep each time.

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of January 4th- 5th, 2001

Witness No. 5

Profile: Mr. S., age 30, is at the Pergolines for rehabilitation following an arthrodesis of the right ankle on aftereffects of poliomyelitis.

Mr. S. rings me because he is unable to fall asleep, despite a sleeping pill. I explain that I cannot give him a second one at 2:00 am in the morning and make the suggestion that he listen to music, which he accepts.

Reactions observed:

I find him asleep half an hour later: he snores!

Upon awakening, he says, "This music made me think of African dance, (I was born in Senegal), and of Beethoven. Very nice, very effective indeed, I forgot everything. I was then bothered by the shouting of a grand-mother who woke me up and I put on one of my songs but it did not have the same effect because I could not get back to sleep! I really liked this music. I am a musician. I play drums with friends and this music contains natural rhythms, quite complex. Thank you so much."

He gladly allows me to report his observations to the composer.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of January 4th-5th, 2001

Witness No. 6

Profile: Mrs. B., age 80, chronic obstructive pulmonary disease, hypertension, depression syndrome.

It is C., the caregiver, who suggests to me that I propose for Mrs. B to listen to some music because she is not sleeping. She is in her armchair facing the open window to "succeed in breathing," she says. She keeps saying she is dying and has had enough. Having ascertained the absence of respiratory distress in Mrs. B., I suggest listening to some music to soothe her moral distress. She accepts.

Reactions observed:

From the opening bars, astonishment is visible on the face of Mrs. B. as she says, "Beautiful! WON-DER-FUL! How immense!" I find her sleepy with her head on the bedside table after listening. So, the soothing effect was obtained.

She then says, "I lived 40 years in Paris. I saw many beautiful things in the opera, and listening to this music I found myself in an amphitheatre. I watched the opening of Carmen," and she starts to beat the tempo of the piece with her arms and sings the first bars, which is remarkable for someone with a breathing deficiency! The next day, she speaks again to C., the caregiver, of this beautiful music that helped her so much.

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of January 9th-10th, 2001

Witness No. 7

Profile: Mrs. V., age 91, time and space disorientation problems with repeated falls.

For several days – but especially at night – the patient had episodes of agitation and screaming, requiring that she be given sedative injections.

That night, around 2:00 am, Mrs. V. starts shouting and moving about. The caregiver, who hoped she would calm down and fall asleep again, alerts me at 3:00 am.

Before administering the sedative prescribed “in case of restlessness,” I offer her the music to listen to. Mrs. V., in her complaints, is constantly shouting “Ouch! Ouch!” She turns one way and another, apparently unconscious of the people around her. She does not answer my question about what hurts her. After verifying the correct fitting, I inform Mrs. V. that I’ll put headphones on her ears to have her listen to music.

Reactions observed:

Mrs. V. is less and less agitated. After several minutes of quiet listening, she starts to yell, “Ouch!” but this time while chanting with the rhythm of the music. She takes my hand and won’t let it go anymore. Later on, she will say several times, “My God,” then “Grandma come!”

Her complaints become less frequent; she still squeezes my hand and turns on her side and curls up. I wrap my arm gently around her shoulder while slightly rocking her body, now clearly more relaxed and receptive to this. Mrs. V. is totally relaxed. This time without screaming, she starts saying, “Ouch,” and to my request of what hurts her she replies, “I do not know what is happening,” and then “I do not know where it hurts,” and “It hurts in my throat,” (while showing it). I whisper to her that here she is safe and that she can fall asleep; she dozes. The temporary relief will last 2 hours.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of January 12th-13th, 2001

Witness No. 8

Profile: Mrs. G., age 84, ischemic stroke causing hemiplegia. The emergence of behavioral problems opens to the diagnosis of Alzheimer’s.

That night, like clockwork, Mrs. G. is agitated. The instruction in case of agitation is to administer a sedative injection. Mrs. G. shouts that she wants to get out of bed at all costs as she must, according to her, get money with her husband. Her general attitude reflects tension and anxiety. After helping her to refocus on reality and positioning her as comfortable as possible, I suggest she listen to music.

Reactions observed:

From the opening bars, Mrs. G. remains completely motionless with eyes wide open in the distance “as if she had seen the Baby Jesus,” says H., the caregiver present at that time.

While listening to the music, several times Mrs. G. reinitiates her first intent to leave and then, taken up by the thread of the music, calms down more and more.

She seems to continuously look for a good position and will report on several occasions, “I am not well.” Then, each time we found the right position, she nodded to my query, “Are you better now?” Twice, Mrs. G. tells me, “I cannot hear,” when one of the headphones had fallen down and tells me she hears good again when I replace it.

She ends up in the left lateral position, a position that reflects a relaxation of her whole body. Her breathing has become regular. Her head is now resting on her folded forearms; her eyes still wide open in the distance. Mrs. G. raises her hand on my shoulder; a profound gentleness in this act. The music stops and Mrs. G. wants to get up again, etc.

I explained clearly to her the options she can choose from:

- Either to rest for another 2 hours until toilet time,
- Or, if agitated, forcing me to give her a sedative injection.

Mrs. G. articulates, “I do not want the shot.” She lies down again while asking, “Where's the music?” and falls asleep. After her shift, the caregiver H. expressed, “I certify that the music really calmed Mrs. G. because she sleeps!”

My review after this experience:

- There is quality and continuity of presence manifested by Mrs. G. in her comments, in relation to reality,
- There is a confidence that has developed in the relationship,
- The recovery of a sense of reality occurred which allowed Mrs. G. to choose the best option for her.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of January 13th-14th, 2001

Witness No. 9

Profile: Mrs. E., age 78, congenital malformation with, among other things, a significant hump severely reducing her ability to breathe. This disability, though it has made her very physically dependent, has not altered her mental faculties and she is very present.

The aggravating factor in the present is that she is suffering from bronchitis that is creating a choking sensation coupled with a permanent state of anxiety, easily understandable, which is increased in the night. She rings every half hour, asks for a drink, expresses to the caregiver that she is afraid of death, and asks to be repositioned.

We believe that music could help Mrs. E., who accepts. Once adjusted as comfortably as possible, we get the music started. Another problem is that Mrs. E. hears only with the right ear and it is quite difficult to adjust the sound.

Reactions observed:

The verbal return is reduced given her state of fatigue, but twice Mrs. E. will ask to sleep after listening to the music and when the lights are turned out she says, "Okay, I'm not afraid." She will sleep about two hours in a row. She will ask several times during the night for the music. "Beautiful," she will say. In this case, a true team effort was necessary and, without the dexterity of the caregiver for positioning this patient, listening would not have been possible.

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of January 16th-17th, 2001

Witness No. 10

Profile: Mr. X., age 92, prostate cancer with bone metastases.

Confronted with the patient's agitated state along with incoherent (though he is sedated), the caregiver asks me to try the music.

Reactions observed:

After a few moments of listening, we hear Mr. X. say, "One cannot do better." Then, in Italian he remarks, "tutto va bene," with a tone whose calm and clarity amaze us. Being called to another patient, I ask the caregiver to remain with Mr. X. while he is listening. She will report later, "I was hiding myself behind the door so he could not see me. First, I heard Mr. X. sing. Yes, singing the music. Then he started clapping, and then straight on beating the tempo with an air... happy."

When I came back to remove from Mr. X. the audio equipment, he was sleeping soundly. Faced with this result, the caregiver intends to call me the following night if Mr. X. is agitated again.

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of January 16th-17th, 2001

Witness No. 11

Profile: Mrs. Y., age 62, diabetic and recovering from a car accident.

She calls for me because she thinks she has hypoglycemia, which is not confirmed by the control. Then she explains that she came here to rest and is not successful because of a neighbor who disturbs her. Waiting until the next day to change rooms, she agrees to listen to music.

Reactions observed:

Falling asleep happens very fast and Mrs. Y., when waking, expresses her satisfaction at being able to rest. She finds this music "beautiful and effective."

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of January 22nd-23rd, 2001

Witness No. 12

Profile: Mrs. S., age 82, heart failure, hypertension, now well stabilized by treatment, insomnia.

Mrs. S. says she normally does not sleep for a long time. The problem of her insomnia shall be debated during the visit the next day and I propose to her the idea of listening to music, which she accepts, "if it's classical music."

Reactions observed:

Mrs. S. falls quickly asleep and will not wake up when I come in to remove the headphones. She will sleep a total of 2 hours with the feeling, upon waking, of having just fallen asleep.

Location: Medical Care Unit, Sète Hospital, France

Date: Evening of January 31st to February 1st, 2001

Witness No. 13

Profile: Mr. X., age 65, uncontrolled diabetes, insomnia. Refuses to take sleeping pills, preferring gentler methods. He is interested in listening to music.

Reactions observed:

"I could not fall asleep but this beautiful music was really calming. Throughout the play I saw myself dancing with a woman; it was very beautiful. With this music, I had a good time and I am very sensitive and touched, thank you."

Location: Medical Care Unit, Sète Hospital, France

Date: Evening of January 31st to February 1st, 2001

Witness No. 14

Profile: Mrs. X., age 78, diabetic and arthritic, amputation today of her right leg. The pain persists despite the initiated treatment. My workload allows me to stay only a few minutes with Mrs. X. who, particularly agitated, moans and shouts at times, "but I'll go crazy," pointing to her amputated limb. She agrees to listen to some music.

Reactions observed:

While listening to the music, she holds my hands very tight against her chest and slowly relaxes. On several occasions she is about to fall asleep, but wakes up and starts to moan again. She eventually fell asleep at about 2:30 am. While listening to the music, she holds my hands very tight against her chest and slowly relaxes. On several occasions she is about to fall asleep, but wakes up and starts to moan again. She eventually fell asleep at about 2:30 am.

Location: Pneumology Care Unit, Sète Hospital, France

Date: Evening of February 1st-2nd, 2001

Witness No. 15

Profile: Mrs. V., age 92, suffering from hemoptysis with weight loss.

Mrs. V. cannot sleep tonight and keeps saying, "Why do they give me all these drugs? It makes me spit blood. It is not good." In her words, there is some anger that turns into despair when she says, "Why did misfortune pursue me all my life?"

After telling Mrs. V. that I understand her suffering and hear her questions, I suggest that she listen to music and it suits her. Meanwhile, her neighbor beckons me to come near and explains, "She is unfortunate, this grandmother. She has suffered much in her life and when she lost her husband she wanted to leave with him. She says she no longer wants to live..."

Reactions observed:

Very quickly, the face of Mrs. V. subsides and she closes her eyes. She falls asleep while listening to the music and says upon waking that she was able to sleep and felt really well while listening to it.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of February 5th-6th, 2001

Witness No. 16

Profile: Mrs. C., age 72, re-operation of hip prosthesis, severe breathing deficiency.

It is 2:00 am and Mrs. C. cannot sleep and hopes we can do something.

A suggestion to listen to music is accepted by her. "I prefer the gentle methods," she says.

Reactions observed:

After a few moments, Mrs. C. says, "But you know it is doing good!" with a real expression of contentment and relief. She will also later say, "You know, I've lived. My nerves are completely worn out."

There was a relaxation of her whole face, which seems to expand, and her breathing becomes deeper and wide.

Mrs. C. finds this music very beautiful and asks to hear it again. She sleeps soundly until 5:00 am.

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of February 9th-10th, 2001

Witness No. 17

Profile: Mr. X., age 88, profound depression syndrome.

Mr. X. refuses to eat and the decision was made to infuse him. That night Mr. X. does not sleep, but says he feels better after being repositioned and agrees to listen to some music.

Reactions observed:

"This music is very beautiful and very sweet," says Mr. X. from the beginning. When I go a little later to remove the headphones, Mr. X. will say, "But what did I do wrong for that to happen to me?" with a sudden movement significant of a certain degree of anger.

When I questioned about this point, Mr. X. replies, "Yes, I am angry because my decision is not respected." "Your decision?" I asked. "Yes, my decision to end my days at home," he said.

Location: Orthopedic Chirurgy Care Unit, Sète Hospital, France

Date: Evening of February 10th-11th, 2001

Witness No. 18

Profile: Mrs. C., age 86, fracture of the left femur with postoperative episodes of confusion. Mrs. C. is unable to sleep tonight and the suggestion to listen to music suits her perfectly. "I love music," she says.

Reactions observed:

From the outset of hearing it, her face lights up with a smile and she starts talking over the music. "I was raised in a musical family," she says, "my mother was a violinist, my father a pianist. I was not raised like other children because I was taught music. I learned piano and mandolin. Every Sunday, we had the teacher coming from Vias to Beziers to give me a piano lesson."

While smiling, she beats. A little later, I find her fast asleep.

Location: Orthopedic Chirurgy Care Unit, Sète Hospital, France

Date: Evening of February 10th-11th, 2001

Witness No. 19

Profile: Mrs. N., age 57, bone graft on the tibia and fibula with placement of an external adhesive after an accident 8 years ago, causing a subsequent spontaneous fracture with multiple surgeries. Mrs. N. knows that this is the last operation on her leg before amputation. Poly medicated patient, sleepless, Mrs. N. is permanently requiring care.

At 2:00 am, Mrs. N. smokes. She asked the caregiver for hot water in order to prepare coffee while watching TV. After an exchange with her to see how we could modify some of her “bad habits” (her words), I suggest to Mrs. N. the idea of listening to music, which she accepts with a “why not?”

Her analgesic treatment was increased yesterday, and as foreseen in the protocol, I practice an evaluation of her general state and note 6/10.

Reactions observed:

Around the 13th minute of play, I go check on Mrs. N., who does not hear me coming. Eyes closed, a slight smile on her lips, her face reflects a deep relaxation, while her head begins to fall on the side, as if falling asleep. Moments later, she wakes up saying, “It’s a shame to interrupt the music, but I really need the toilet.” After the toilet, Mrs. N. notices that her digestive system is restored. We help her lie down again and she asks to hear the music again.

To our amazement, Mrs. N. did not call nor ask for her injection of morphine overnight. We went to see her and noticed several times that she was fast asleep, with a peaceful face, contrasting the usual “painful grimace.” In the morning, Mrs. N. called to give the Walkman back and expressed her experience with the “extraordinary” song saying, “I saw myself running in a field full of flowers... It was summer... colors, warm sun on my whole body... Perfumes of nature... I was immersed in a bath of life. Not the slightest pain. I was happy. Wonderful... Thank you. It’s been a long time since I slept like that.”

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of February 20th-21st, 2001

Witness No. 20

Profile: Mr. F., age 68, recovering from the third heart failure from pneumonia.

Mr. F. is anxious at night. He feels reassured because I arrived shortly after he called. He actually needs the conversation and the idea of listening to music suits him.

Reactions observed:

Mr. F. falls asleep while listening to the music. He will wake up 3 hours later and say that this music has calmed him; he no longer feels anxious.

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of February 20th-21st, 2001

Witness No. 21

Profile: Mrs. B., age 78, left supracondylar fracture due to a fall at home, after which she painfully lived through her loss of autonomy. She was very independent in nature. With the coming of the night, Mrs. B. feels very anxious stating, “I’m making black films, I imagine the worst.” After some exchange, Mrs. B. agrees with the idea of listening to music.

Reactions observed:

After listening to the music, Mrs. B. said she felt soothed by it; she no longer feels anxiety and is ready to sleep.

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of February 20th-21st, 2001

Witness No. 22

Profile: Mr. D., age 75, recovering from a sepsis after a urinary tract infection.
Unable to sleep that night, Mr. D. is willing to listen to music.

Reactions observed:

After listening to the music, Mr. D. says he is much more relaxed. He will sleep.

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of December 20th-21st, 2001

Witness No. 23

Profile: Mrs. S., age 82, severe heart failure decompensation, repeated acute pulmonary edema on a bronchial infection. Currently there is a significant problem of anxiety when it is time to sleep. Mrs. S. wakes up suddenly with a feeling of impending death. After several nights of this and our impossibility to administer medication due to her history of drug hepatitis, Mrs. S. is very tired. She agrees to listen to music.

Reactions observed:

Through listening to the music, she subsides. Her breathing becomes regular and general relaxation begins. She can fall asleep without suddenly waking, and sleep for three hours without interruption. We will restart the music to help her sleep for two more hours.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of February 26th-27th, 2001

Witness No. 24

Profile: Mrs. T., age 77, mammary cancer operation, lower limb venous insufficiency, hypertension, Alzheimer's.

Mrs. T. gets up several times during the night and disturbs her roommate and other residents when she sometimes wanders. She is willing to listen to music.

Reactions observed:

Through listening to the music, she subsides. Her breathing becomes regular and general relaxation begins. She can fall asleep without suddenly waking, and sleep for three hours without interruption. We will restart the music to help her sleep for two more hours.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of February 26th-27th, 2001

Witness No. 25

Profile: Mrs. D., age 75, repeated falls and disorientation.

That night, Mrs. D. is experiencing a burst of anxiety. She cries and expresses, "Everything scares me." She says she is reassured by our presence and willingly accepts to listen to music.

Reactions observed:

Mrs. D. begins to smile saying, "This music is very beautiful; it is delicate." She rapidly falls asleep and stays asleep until morning.

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of March 6th-7th, 2001

Witness No. 26

Profile: Mrs. T., age 68, recovering from a right hip operation, the pain in the lower limbs is resistant to conventional analgesic treatments.

Newly arriving at the unit, Mrs. T. is very distressed by her loss of independence and fear of not finding, as she says, "the form I had before the operation." She said it "was a real test." She is concerned with her leg pain and possibly spending a sleepless night asking, "Until when will I...?" After some exchange, she agrees to listen to the music, as she herself is very musical.

Reactions observed:

Mrs. T. will listen to the song 4 times during the night, with intervals of sleep. In the morning she expresses that this music has something religious in the positive direction and has awakened many memories. "Too much remained confined there," she says as she points to her chest. After the interview, Mrs. T. agrees to take care of herself during her stay in view of a fresh start.

Location: Medical Care Unit, Sète Hospital, France

Date: Evening of June 11th-12th, 2001

Witness No. 27

Profile: Mrs. M., age 66, metastatic breast cancer in terminal phase.

I note that Mrs. M. does not sleep at night. In her relationship with others, she remains far away and communicates very little. At 5:00 am, Mrs. M. explains that she does not suffer, but fails to sleep. I suggest listening to music, which she accepts.

Reactions observed:

At the end of the piece, Mrs. M. says that this music is helping her (with a gesture of release at her chest). She says other things I cannot understand, given her very low timbre and her painful speech, but her expression is very much alive with gestures of her hands, head, and eyes. Then, she falls asleep very quickly.

ENLIGHTENED HEARD - 25'

ENLIGHTENED HEART

Music Duration: 25 minutes

Listening sessions with patients

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of March 9th-10th, 2001

Witness No. 1

Profile: Mrs. T., age 77, mammary cancer operation, lower limbs venous insufficiency, hypertension, Alzheimer's. She got up several times in the night, and at 2:00 am she still was not able to sleep.

Reactions observed:

Mrs. T. starts smiling at the outset of hearing the music and says, "I've heard that," (she heard the "Passage" song a week ago), "it's beautiful, beautiful!"

She places her hands over her heart and settles comfortably flat on her back in bed. She yawns and closes her eyes. There is an expression of profound serenity on her face. After listening to the music she says, "This music is something beautiful, it is a wonder. It makes you think about things, you cannot say them so beautiful it is, you see, the tears flow of themselves. It makes me feel good. Thank you."

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of March 10th-11th, 2001

Witness No. 2

Profile: Mrs. G., age 78, Alzheimer's evolving since 1993, pacemaker in 1998, chronic migraine, depression with episodes of self-aggressiveness. She tells me at 1:15 am that she has headaches and cannot sleep. She is willing to listen to music.

Reactions observed:

From the outset of listening, Mrs. G. begins to smile saying, "It is beautiful." While she is listening, she keeps her eyes closed, hands folded on her chest.

After listening she says, "It's funny, the music cleared my head, I have no pain anymore. There is a noise all the time in my right ear. It did go, I'm better now." She makes a gesture with both hands, starting from the top of the head and going down along the body. "This music speaks to my heart," she says, not knowing the title, "of things, memories, people I love. It cleared my heart. Now I feel well. Thank you." Her whole face reflects serenity.

Location: Short-Care Unit, Les Pergolines - Sète, France

Date: Evening of March 20th-21st, 2001

Witness No. 3

Profile: Mrs. F., age 78, recovering from a fractured right hip operation, chronic leukemia, and heart failure. The team noted that since her arrival 5 days prior, Mrs. F. does not sleep at night and stays awake for hours with her eyes wide open.

Reactions observed:

"This music is beautiful, it makes me think of opera music. I would not go to sleep, but it relieved me," she says. "It has relieved you?" asks the caregiver. "Yes, from the emptiness I feel," says Mrs. F. "From the void?" asks the caregiver. "Yes, there is no feeling in my life," she replies as she places her hands over her heart.

"What is happening to you now?" the caregiver asks. Mrs. F. replies, "My daughter and my son-in-law are charming to me. My husband comes to see me, my family is very nice, but I cannot live at home anymore. I can no longer return home, the doctor told me. I am 80. It is very hard for me. This is a great emptiness, a great loss." She fell asleep for a few hours after expressing that.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of April 3rd-4th, 2001

Witness No. 4

Profile: Mrs. L., age 68, brain tumor operated on twice with right hemiplegia in the second intervention, localized seizures, depression. My colleague tells me that Mrs. L. is very depressed tonight because of a family problem and is indeed unable to sleep. After speaking with her she agrees to listen to music.

Reactions observed:

Mrs. L. will later say that this listening time has calmed her down and that, feeling more serene; she was able to sleep afterwards.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of April 5th-6th, 2001

Witness No. 5

Profile: Mrs. H., age 95, Parkinsonism syndrome, repetitive acute pulmonary edema.

Around 5:00 am, the usual time when Mrs. H. rings to indicate that she is not well, Mrs. H. says she feels oppressed. After repositioning her and checking her constants, I suggest listening to music. I had some difficulty adjusting the volume due to her partial deafness.

Reactions observed:

An hour later, I find Mrs. H. much less oppressed. She notes that the sound was too loud and the caregiver came in to lower it. She is about to fall asleep.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of January 4th- 5th, 2001

Witness No. 6

Profile: Mrs. S., age 83, syndrome of deterioration of her intellectual functions, with fugues.

Tonight Mrs. S., confused and agitated, runs from room to room while calling her mother with a stentorian voice that wakes the entire center. I manage to soothe her and take her back to her room where I suggest she listen to music for a moment.

Reactions observed:

After listening to the song the first time, I find Mrs. S. quite calm. She doesn't call her mother anymore and says, "I do not sleep," and "Shall I stay like that all day?"

After resetting the Walkman for a second time, I indicate to Mrs. S. that she can sleep. She smiles and takes my hand and places it on her heart. A few minutes later, her eyes close. In that time, her gaze had become serene, confident. She will sleep until morning. The day shift will say it is usually very difficult to calm her in her phases of agitation.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of April 10th-11th, 2001

Witness No. 7

Profile: Mr. O., age 80, depression, Alzheimer's, recent septic shock from infection and from that moment, in vigil coma.

After changing and repositioning Mr. O, and confronted with his moaning, I decide to have him listen to music.

Reactions observed:

While listening to the music, there was phasing of the generalized tremor and a regulation of breathing. Three minutes before the end of the song, his lower jaw relaxes and he falls asleep. There is no trembling anymore.

The caregiver finds him in the morning, asleep with the Walkman on. We pull out the headphones without waking him!

Location: General Chir. Care Unit, Sète Hospital, France

Date: Evening of April 11th-12th, 2001

Witness No. 8

Profile: Mrs. P., age 79, gastric cancer in terminal stage.

Tonight Mrs. P. is incoherent in her speech, aggressive with her neighbor and with us, turning against her and all saying, "You don't give a damn about me. You do not believe me. She (her neighbor) prevented me from sleeping and I'm here to rest or I will die." Mrs. P. accepts the idea of listening to music after a preamble to connect with her.

Reactions observed:

The caregiver is concerned that she would throw the Walkman out of the bed, but Mrs. P. remains calm while listening, her head on the pillow. After listening, Mrs. P. says "I do not sleep," but she is serene.

At the time of administering her injection, we find that Mrs. P. has completely changed her tune. She says music is good to her. She apologizes to her neighbor. She takes off her sleeve for the injection saying, "I put myself at your disposal." Smiling, she thanks us and says she will fall asleep, which she does.

Location: Short-Care Unit, Les Pergolines - Sète, France

Date: Evening of May 13th-14th, 2001

Witness No. 9

Profile: Mr. P., age 50, severe chronic obstructive broncho pulmonary disease, awaiting lung transplant.

Mr. P. on the eve of his departure to a specialized center is particularly breathless and anxious tonight. His face and his lips are blue and his speech slurred. He says he is tense in his head and his body and suffering from headaches.

The proposition of listening to music suits him. He says, "You had already proposed to me and this time I accept because I'm really bad tonight and I did not sleep well the last 2 nights."

Reactions observed:

After the first time listening to it, he says, "This is great music. I felt at the beginning how it could free my solar plexus. There was a kind of click in this place here then it spread to the rest of the body." He makes the gesture of tensions letting go from head to feet. "It's when the music stops that one notices what happened," Mr. P. says, "My whole body now is relaxed, and the muscles are relaxed." The face of Mr. P. is now at peace, the color became normal, breathing is not spasmodic anymore and the speech returned to normal. Mr. P. demands a second time listening to the music in order to fall asleep. He does not speak anymore of his headache. The next day, the caregiver team contacted me for Mr. P. who was discharged, asking where he could obtain this music that has done him so much good.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of May 16th-17th, 2001

Witness No. 10

Profile: Mrs. D. C., age 87, diffuse bone demineralization, impaired intellectual function, disorientation in time and space. Following her difficulty with falling asleep, I suggest to Mrs. D. C. that she could listen to music, which she accepts.

Reactions observed:

From the outset of hearing it, Mrs. D. C. says, "If my mother were here, she would be happy." After listening, she says, "This music makes me think of my life, it is beautiful, I felt good while listening to it." She is smiling. Sleep will come rapidly.

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of January 16th-17th, 2001

Witness No. 11

Profile: Mrs. D., age 82, time and space disorientation, memory impairment and behavioral problems. Mrs. D. displays unusual restlessness this evening attempting to cross over the bed barriers. Her body is covered with jerky movements with a facial grin. I advise Mrs. D. that I'll be having her listen to music and she does not oppose me when I equip the earphones.

Reactions observed:

While listening, her jerky movements diminish and the face of Mrs. D. is freed from her grin. She starts talking saying, "It's awful, my husband, when I call him on the phone, he doesn't answer me. He is there and I'm here. What am I doing here? I should never have come." At 2 minutes from the end of the song, she gently removes the headphones, saying, "It is fine, this music."

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of May 25th-26th, 2001

Witness No. 12

Profile: Mrs. E., age 77, Alzheimer's, ischemic stroke with epilepsy. Mrs. E. is unable to sleep tonight. A great lover of music, she is delighted when listening to the music is offered to her.

Reactions observed:

"Music very beautiful and very sweet. It's absolutely wonderful, music like that! I'm well," Mrs. E. remarks. She starts singing to the music, with a look of rapture on her face.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of May 25th-26th, 2001

Witness No. 13

Profile: Mr. F., age 82, Alzheimer's with depression and suicidal talk.

Tonight Mr. F. is very melancholic and cannot sleep. He refuses us as we approach him, feeling attacked. After a long exchange between us, he says he loves music and agrees to listen.

Reactions observed:

From his usual state of stiffness and tension, Mr. F. moves to a gradual state of relaxation of the body. He closes his eyes and his lower jaw relaxes completely. He adopts a relaxed position and is murmuring voices we cannot hear. He will say after listening that this music has done much good to him.

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of June 6th-7th, 2001

Witness No. 14

Profile: Mr. D., age 80, cardiac rhythm disorders and uneven behavior with aggressive episodes towards the staff and his wife.

Tonight, Mr. D. does not sleep. He says he is suffering "in the stomach." He is again aggressive in his words and begins to calm down when I tell him that I understand his suffering. While waiting for his pain medication to take effect, the proposition of listening to music surprises him a little, but he accepts it.

Reactions observed:

The sudden change is fast with Mr. D. who expresses at first, "I do not usually listen to music, but this is very beautiful. It does much good."

His aggressiveness is completely dropped. Mr. D. smiles and falls deeply asleep while listening. He will sleep until morning.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of June 10th-11th, 2001

Witness No. 15

Profile: Mr. F., age 85, Parkinson's, prostate cancer, loss of physical autonomy (repeated falls) and psychic behavioral disorders.

MUSIC LISTENING SESSIONS in a hospital setting

Mr. F. has been in this unit for a week. He does not sleep at all at night. Because of his condition at night, he wakes his exasperated neighbor who says, "Do something or I'll knock him out." I try having Mr. F. listen to music under these conditions.

Reactions observed:

Mr. F. remains remarkably calm throughout hearing it, repeating several times, "I like it," and moves from his usual stiff position to an attitude of true relaxation. After listening, he is about to fall asleep, but it is the aggressive words of his neighbor that wakes him up again and stresses him visibly. I will explain the next day to the team this problem with the neighbor.

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of June 16th-17th, 2001

Witness No. 16

Profile: Mr. P., age 90, recovering from bronchitis and a severe cardiac history with urinary retention. Mr. P. has demonstrated some episodes of agitation during which he tears the vesical catheter off. For this night, his sedative treatment was increased in order for him to sleep. He slept until 1:00 am and started to get restless again. After being repositioned, Mr. P. agrees to listen to music.

Reactions observed:

At the start of the song, Mr. P. says, "It looks like a romance." He closes his eyes and his whole body relaxes while listening. He falls asleep until the morning.

Location: Orthopedic Surgery Care Unit, Sète Hospital, France

Date: Evening of June 20th-21st, 2001

Witness No. 17

Profile: Miss C., age 32, fractured left tibia and fibula, debility after resuscitation at birth, epilepsy, living with her mother. She is on the eve of her return to the Lyon region. Miss C. makes me aware that she suffers a lot tonight. Her eyes are full of tears. After starting the analgesic treatment and repositioning her, she is quite happy to listen to music.

Reactions observed:

When the music starts, Miss C. makes a gesture from her heart saying, "It's beautiful, beautiful!" She takes my hand and holds it. After listening to the music, her face has changed dramatically, partially attributable to the analgesics. It is lit up with a nice smile. She asks to hear the music again and with it she falls asleep. Her roommate, a retired Belgian nurse, says, "You have found what could really reassure her in the absence of her mother who could not stay with her that night." The next morning, on waking, Miss C. kissed me hard because of "this great music," and this followed the next day by a message of thanks from her mother, forwarded by the team.

Location: Orthopedic Chirurgy Care Unit, Sète Hospital, France

Date: Evening of June 20th-21st, 2001

Witness No. 18

Profile: Mrs. C., age 79, is hospitalized for a fracture of the right femur and also suffers from Alzheimer's.

Tonight, Mrs. C. is not sleeping and addresses incoherent words to a certain "Simone." Mrs. C. accepts listening to music without difficulty.

Reactions observed:

Mrs. C. begins to smile as she begins to listen and, with an expression of delight, murmurs, "Did you see how he says the things, this man, gently? How beautiful! He is good. Listen to what he says. Oh, I see the little children coming near, they hold hands. There's something in their hair...garlands of flowers. How beautiful they are! You see them?"

Mrs. C. begins to sing to the music, swaying on tempo, still with a smile. She falls deep asleep until morning.

Location: Orthopedic Chirurgy Care Unit, Sète Hospital, France

Date: Evening of June 26th-27th, 2001

Witness No. 19

Profile: Mrs. K., age 74, suffering from a broken wrist, very painful despite analgesics.

She is willing to listen to music saying, "It can help me let go a little. I love music and I also write poems." In her interactions with others, Mrs. K. is highly demanding and authoritarian. In fact, she does not accept easily any situation of dependency.

Reactions observed:

After first hearing the music, Mrs. K. twice expresses, "I saw myself swimming in the water where I feel good because I am complete."

"But at the end of the song, the brain starts up again," she continues as she makes a gesture as if her head would explode.

Mrs. K. demands a second chance to listen to the music. When the music restarts, she asks, "What is that music?" She starts crying suddenly, as if a large dam has cracked under pressure. She talks while the music goes on saying, "I see all my life flashing in front of me. I lost my husband last July; I have not loved him enough. When I lost my mother, who was a very tough, authoritarian woman – I suffered greatly as a child because of her lack of affection – when she died in the hospital, I was not able to take her in my arms. I blame myself terribly." Mrs. K. continues the film of her life and talks about her present loneliness because her children and grandchildren have moved away. She is much more peaceful at the end of this review of the music. She does not speak anymore of pain related to her fracture and asks for a third chance to listen to the music and falls asleep.

Location: Orthopedic Chirurgy Care Unit, Sète Hospital, France

Date: Evening of June 27th-28th, 2001

Witness No. 20

Profile: Mrs. D., age 80, fracture of the left femur neck, bladder incontinence after surgery. The loss of her autonomy causes her much anxiety. She must return the next day to a rehabilitation center, which increases her stress, and the sleeping pill does not help her fall asleep. After an exchange to help her consider her rehabilitation stay precisely in terms of the recovery of independence, Mrs. D. thinks that listening to music can help her relax.

Reactions observed:

Mrs. D. finds this song beautiful saying, "...as if it had helped me take a step back to what I experienced." She feels soothed and ready to sleep.

Location: Orthopedic Chirurgy Care Unit, Sète Hospital, France

Date: Evening of June 27th-28th, 2001

Witness No. 21

Profile: Mrs. C., age 84, femur fracture, very distressed by her state of fatigue and whether she will again become "as before."

"You see, I'd have to get sleep. I took my pill, but I still cannot get to sleep," Mrs. C. says. She welcomes listening to music.

Reactions observed:

Mrs. C. immediately feels the softness of the music and notes its "symphonic character." After hearing it, she expresses, "I felt the music like a caress, it released me," which shows as well in the relaxing of her face. She gives thanks and falls asleep quickly.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of June 30th-July 1st, 2001

Witness No. 22

Profile: Mrs. F., age 79, Alzheimer's with episodes of agitation and anxiety. Tonight, my colleague tells me of her complete refusal to take her treatment. The night before, Mrs. F. had walked through every room, awakening residents.

Reactions observed:

I find Mrs. F. very anxious telling me, "They're going to hit me. I am very scared. I do not feel well." She accepts my presence and wants to come sit and talk. She asks me whether I like the pied-noirs saying, "...because I'm a pied-noir and I was born in Algiers. I miss my family very much and I am very anxious not to have them with me."

When I ask if she loves music, Mrs. F. answers affirmatively and adds, "But I cannot listen now. I'm too anxious." After a while she is willing to lie on her bed with the request, "if you sit next to me." Then she accepts the idea of listening to music.

At the beginning of hearing it, Mrs. F. says, "Pierrette said to listen to you, you were nice. She is beautiful, the music, but I'm not very clever for... But it is beautiful... Is it going to put me to sleep?"

"You know, I am pure Algerian," she says, "...and Arabs – there are good ones and bad ones. And the French – there are good ones and bad ones. In Algiers, nobody ever hurt me; everyone knows each other. I love my family. It worries me terribly to not be with them. I don't feel well because I'm afraid. It is beautiful, this music..."

At the end of listening to it, Mrs. F. agrees to take her treatment and says, "Well, we'll turn the light off, you can stop the music. I'll take you back to the door," which she does, and then goes back to bed. She falls asleep until morning.

Location: Orthopedic Chirurgy Care Unit, Sète Hospital, France

Date: Evening of June 30th-July 1st, 2001

Witness No. 23

Profile: Mr. M., age 84, chronic respiratory failure with colon cancer in terminal phase.

At 1:00 am, Mr. M. suffers and has a strong hiccup, which causes him to be very fatigued. After giving him the prescribed treatment, he accepts the idea of listening to music.

Reactions observed:

There was noticeable regulation of his breathing, termination of his hiccups, and drowsiness. After hearing the music, Mr. M. expresses that it was good to him. Falling asleep was fast.

Location: Orthopedic Chirurgy Care Unit, Sète Hospital, France

Date: Evening of July 4th-5th, 2001

Witness No. 24

Profile: Mrs. H., age 81, left hip operated on today.

At 10:00 pm, we find Mrs. H. trembling in every limb. She says that she feels very anxious. After checking all of the parameters, we position her comfortably, and after a lengthy exchange, Mrs. H. feels willing to listen to music.

Reactions observed:

In a moment, her tremor stops, she smiles indicating that she appreciates this music, closes her eyes, and visibly relaxes. When she wakes up in the morning, she tells us about the high quality of this music, the calming feeling, saying, "I did not have this anxiety anymore, and I could sleep. Thanks for your help."

Location: Orthopedic Chirurgy Care Unit, Sète Hospital, France

Date: Evening of July 5th-6th, 2001

Witness No. 25

Profile: Mr. A., age 44, operation that day of a compound fracture of left tibia and fibula. The intervention was conducted under spinal anesthesia that causes post-operative problems in urinary retention. Indeed, at 10:00 pm, Mr. A. has not yet urinated, and the anesthesiologist explains to him that if he has not succeeded by midnight, we will have to place a urinary catheter.

This perspective makes Mr. A. anxious. He still feels the growing urge to urinate, but without success. At the time of the expected placing of the catheter, Mr. A. says, "I'm pretty close to it, but I'm so tense about going that I block all. It needs just a little click..."

The caregiver proposes the idea of listening to music saying, "And if that little click would be to allow you a quarter of an hour or twenty minutes of relaxation, listening to music, what do you think?" The idea delights Mr. A. who responds with, "In fact, I am a musician."

Reactions observed:

From the beginning of hearing the music, Mr. A. expresses that he finds this music "downright beautiful." He closes his eyes - clearly entering the music - and we tiptoe out of his room.

Fifteen minutes later, he calls us back, happy and really relieved. "I'm urinating," he says to us, "I was so relaxed listening to this beautiful music, it came all by itself. And when, I stopped the music to call you, I stopped urinating. I had to put it back again to go on urinating. I would not have believed it if I had been told this would happen!" We laughed heartily.

Location: Orthopedic Chirurgy Care Unit, Sète Hospital, France

Date: Evening of July 16th-17th, 2001

Witness No. 26

Profile: Mrs. L., age 44, double fracture of the right ankle, insomnia since her intervention despite the treatment given.

Mrs. L. is willing to try listening to music saying, "Why not?"

Reactions observed:

"I really liked this music," she says, "it was like a balm to the heart. I felt bad to have left my little son - who was sleeping like an angel in the tent where we camped - to go dancing. A stampede made me fall and here I am. But the hardest was my husband who was absent and on his return complained a lot to me saying, "Do you realize, the little one, what could have happened to him..." I said, "do you not believe that heaven sufficiently punished me for my negligence?" By listening to this music, I felt forgiven, I am much better..."

Location: Orthopedic Chirurgy Care Unit, Sète Hospital, France

Date: Evening of July 17th-18th, 2001

Witness No. 27

Profile: Mr. C., age 31, recently subject to a serious operation of the right leg following an armed assault in his professional practice.

This patient, since the accident, suffers from a psychological trauma that makes him cyclically relive the sudden and brutal aggression he experienced. Psychological treatment and drug therapies were introduced. Tonight, Mr. C. is in trouble again and feeling very anxious. After a period of exchange, while his treatment takes control, he accepts the idea of listening to music.

Reactions observed:

Mr. C. shall listen 5 or 6 times to the song (I left the Walkman for the night) and shall express how the music helped him relax and spend the night appeased. He was able to sleep. Upon awakening, he says he feels better.

RESONANCE - 21'

RESONANCE

Music Duration: 31 minutes

Listening sessions with patients

Location: Medecine Care Unit, Sète Hospital, France

Date: Evening of April 24th-25th, 2001

Witness No. 1

Profile: Mr. V., age 77, operation about ten days ago on a right lumbar canal, intense low back pain despite his analgesic medication, insomnia. He demands painkillers before schedule. To help him wait, I propose listening to music. At first he was surprised, but then Mr. V. finds it a great idea, especially since at home he was surrounded by music. His two children love India and bring him music regularly to help him relax.

Reactions observed:

"This music is really nice. I'm totally surprised because I have no bad back any more!" Mr. V. says. He then falls quickly asleep for 3 hours, without needing any pain relief.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of August 20th-21st, 2001

Witness No. 2

Profile: Mr. B., age 42, AIDS at the end-stage (likely encephalitis). Mr. B. is very aggressive against the staff, refused his medication and screams in his room. He agrees to talk with us, and then he agrees to listen to music.

Reactions observed:

Mr. B. calms down and falls asleep quickly. Upon waking he says he liked the music.

Location: Location: Medecine Care Unit, Sète Hospital, France

Date: Evening of August 31st-September 1st, 2001

Witness No. 3

Profile: Mrs. R., age 60, suspected Creutzfeldt Jacob's disease, shrinkage in the upper and lower limbs.

She does not sleep at night. At any time she can be seen keeping her eyes open. At the suggestion of listening to music, she says, "I love the music."

Reactions observed:

While listening to the music, despite the muscle contraction, it is striking to observe how relaxation settles in. The constant painful facial expression, with continuous wrinkling between the eyebrows, gives way to a “heavenly smile.” She falls asleep quickly.

Location: Medecine Care Unit, Sète Hospital, France

Date: Evening of September 1st-2nd, 2001

Witness No. 4

Profile: Mrs. Z., age 90, confusion and agitation, seizures. Again restless tonight, Mrs. Z. “accepts” listening to music, despite her state of confusion.

Reactions observed:

Mrs. Z. does not fall asleep while listening, but calms down. She will remain quiet throughout the night. She does not express anything about music.

Location: Medecine Care Unit, Sète Hospital, France

Date: Evening of September 2nd-3rd, 2001

Witness No. 5

Profile: Mrs. M., age 77, entered the day before after a transient ischemic attack that caused a left hemiplegia.

Mrs. M. is in a state of high anxiety and repeats, “What is happening to me? Help me, I implore you.” There is constant verbal flow. She agrees to listen to music, saying that she likes it a lot.

Reactions observed:

After 20 minutes, Mrs. M. calms down and falls asleep. She says when waking up that this music helped her a lot, stating, “It calmed me down, soothed me,” and adds that she feels better this morning. She is very grateful for this “real care” and says she will talk about it to her husband, her family.

Location: Medecine Care Unit, Sète Hospital, France

Date: Evening of September 2nd-3rd, 2001

Witness No. 6

Profile: Mrs. L., age 87, spatiotemporal disorientation, fatigue and severe anemia (Hgb 4.5). This patient does not sleep at night. She accepts the idea of listening to music.

Reactions observed:

No verbalization, but Mrs. L. sleeps until dawn.

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of September 7th-8th, 2001

Witness No. 7

Profile: Mrs. T., age 73, history of bladder cancer, bronchopneumonia, depression. Although properly relieved by her treatment and not suffering, Mrs. T. cannot sleep.

Reactions observed:

After listening to the music, Mrs. T. says she felt soothed. She will fall asleep an hour later.

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of September 14th-15th, 2001

Witness No. 8

Profile: Mrs. C., age 61, Parkinson's. The treatment for Mrs. C. has changed. She agreed to let us know if she is taken over again by her shaking.

Mrs. C. calls around 1:00 am due to experiencing a recurrence of tremors. She expresses that she can stand it no more and that her nerves crack.

She knows we cannot give her anything else to sooth her since we must observe the effect of the new treatment, but she accepts the idea of listening to music saying, "Even if I do not think too much of it."

Reactions observed:

After listening to the music, Mrs. C. is talking about a wonderful music, asking who the author is. She says, "I was in a world of images, my whole body bathed in water. I felt my whole body and my muscles relax. It is so rare for me to talk about a moment of fulfillment and that's what I experienced... when I felt like a piece of wood on a rough sea. Thank the musician. Tell him to continue."

The nurse's aide, M., cannot believe the relaxed state of Mrs. C. that she observes. Mrs. C. does not tremble anymore and falls asleep.

The next day, Mrs. C. will talk to the day shift of this "sound care" experience.

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of September 20th-21st, 2001

Witness No. 9

Profile: Mrs. R., age 79, alteration of general health with weight loss, fatigue, anorexia, cognitive impairment suggesting the beginning of dementia.

At about 1:30 am, Mrs. R. expresses that she cannot sleep. She accepts the idea of "trying" to listen to music.

Reactions observed:

Mrs. R. calls back towards the end of the song saying, "I rang because I was going to sleep!"

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of September 20th-21st, 2001

Witness No. 10

Profile: Mrs. R., age 79, fracture of the right femoral neck.

Mrs. R. is disturbed in her sleep by the fact that she urinates very often. A little anxious, the suggestion of listening to music suits her.

Reactions observed:

Mrs. R. calls us just before falling asleep so that the headphones can be removed. She sleeps for two hours before calling (to urinate) and goes back to sleep without difficulty.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of October 5th-6th, 2001

Witness No. 11

Profile: Mrs. E., age 79, Alzheimer's in a de-compensated stage with dementia and hyperthermia related to a pulmonary focus.

Around 2:00 am, Mrs. E., who was sleeping when the night began, is agitated and incoherent. Taking her temperature shows a recurrence of fever. After administering the prescribed treatment we decide, with the caregiver on duty, to propose the idea to Mrs. E. of listening to the music that she had much appreciated on previous occasions.

She does not react to this proposal but, while continuing her monologue, accepts the placing of the headphones.

Reactions observed:

For about 25 minutes, Mrs. E., who is Canadian, issues with a vehement force a succession of phrases interspersed with sung passages. In her speech, four elements come back repeatedly, "It's mine," "It's my love," "It's me," and "Yes," and are accompanied by a striking of both hands on the belly.

She often put her hand to her nose as if something troubled her there. She also shakes her head, eventually knocking off the headphones. I won't try to replace them as they slid and are against the occipital region on both sides of the neck of Mrs. E., which means that the music continues to spread, even attenuated so.

In the last five minutes of the 30-minute piece, there was a change in the behavior of Mrs. E. that was most remarkable: Her speech is less frequent and loses its strength and so do her jerky gestures.

Reactions observed:

From the outset of hearing it, Mrs. D. C. says, "If my mother were here, she would be happy." After listening, she says, "This music makes me think of my life, it is beautiful, I felt good while listening to it." She is smiling. Sleep will come rapidly.

Location: Orthopedic Chirurgy Unit, Sète Hospital, France

Date: Evening of October 14th-15th, 2001

Witness No. 12

Profile: Mrs. G., age 81, broken left hip, operation in the morning under spinal anesthesia with postoperative agitation.

In the evening, Mrs. G. gets over the barriers of her bed and falls. When I arrive in the room, she just came up on the radio where the video showed no damage to the operation performed on her hip. Despite analgesics and tranquillizer treatment, due to her history of depression, Mrs. G. is increasingly agitated. Notwithstanding the workload, we must remain constantly with her to avoid the risk of another fall. In desperation, the caregiver suggests to Mrs. G. listening to music. She is very surprised when the seemingly inconsistent patient does agree to hear the music!

Reactions observed:

While listening, the behavior of Mrs. G. does not change. She is very turbulent; her body covered with tremors and spasms. Blood pressure rose to 20, the pulse to 110 beats/min. I'll have to call the doctor.

Beyond the "tension" of the moment, I feel that we must listen to what is happening with this patient. Gently I put my hand on her chest and, for the first time, she looks at me and "connects" with what I say. I invite her to breathe deeply, which she does. She begins to relax and gradually, the relationship takes form. I take up again with her the development of events since her fall that prompted her hospitalization, and all that happened.

Her fixed gaze comes back to normal with the resumption of this contact with reality. She understands that she is safe and begins to yawn. At the end of listening to the music, perfectly calm and coherent, she smiles. A new test of her blood pressure shows 13/7 and 82 beats/min. Mrs. G. will remain quiet for the rest of the night.

The assessment done with the caregiver brings us to conclude that the agitation of Mrs. G. was simply related to what she lived since her fall, with the whole chain of events that were attached thereto and formed a major stress for her.

Location: Orthopedic Chirurgy Unit, Sète Hospital, France

Date: Evening of October 14th-15th, 2001

Witness No. 13

Profile: Mrs. D., age 83, fracture of femoral neck, in the 3rd postoperative day, Alzheimer's.

Mrs. D. is again completely confused tonight with incoherent speech. Very comical and talkative, she accepts willingly the idea of listening to music.

Reactions observed:

Mrs. D. remains completely calm throughout the time the music was playing, and then resumes her usual speech. As I leave the room after having removed the headphones, she says in between two phrases, "It's very nice, your music, it is so beautiful!"

Location: Short-Term Care Unit, Les Pergolines - Sète, France

Date: Evening of October 16th-17th, 2001

Witness No. 14

Profile: Mr. M., age 86, ischemic stroke, with head trauma that caused a subdural bruise and secondary agitation.

He is very agitated again at the beginning of the night, and has entirely unmade his bed. He is unclean and incoherent.

The caregiver proposes that I have him listen to music saying, "You never know!" While we wash Mr. M., he starts to cry, in a brief moment of lucidity realizing his condition and saying, "Why are you caring for an old wreck like me? Take care of the young."

After being repositioned and comforted, Mr. M. is somewhat surprised by the idea of listening to music and says, "You know, me, music..." but does not reject it.

Reactions observed:

After a few moments, Mr. M. sits upright in bed, so much that he reminds us of someone lying and standing at the same time.

The second change is that of his face. There is an expression of surprise at first, and then more and more serene. It gives him a certain look of nobility in contrast with his rather heavy features.

The third thing is his hand position. He crossed his hands over his chest as if praying. He falls deeply asleep in this position and will sleep until morning.

Location: Medical Care Unit, Les Pergolines - Sète, France

Date: Evening of October 23rd-24th, 2001

Witness No. 15

Profile: Mrs. E., age 79, angina pectoris, depression and diabetes.

Mrs. E. expresses in the middle of the night that she does not feel well. After checking her constants, which are normal, a rapid exchange between Mrs. E and the caregiver allows Mrs. E. to say she actually feels very anxious. The suggestion of listening to music suits her perfectly.

Reactions observed:

Mrs. E. will report to the team that the music did well and she could sleep thanks to it.

Location: Medical Unit, Sète Hospital, France

Date: Evening of October 31st-November 1st, 2001

Witness No. 16

Profile: Mrs. B., age 80, pneumonia and depressive syndrome.

She is unable to sleep despite the sleeping pill and is in despair about it saying, "I am so tired and I have to sleep." She agrees to listen to music, and says, "You never know."

Reactions observed:

Gradually the face of Mrs. B. lights up with a smile. She takes a relaxed position and falls asleep. She will express her thanks the next day by saying, "...for the music that soothed me and with which I could sleep."

Location: Medical Unit, Sète Hospital, France

Date: Evening of October 31st-November 1st, 2001

Witness No. 17

Profile: Mrs. S., age 73, massive stroke with right flaccid hemiplegia and purulent parotitis. Despite analgesics Mrs. S. is not sleeping. She does not react to the suggestion of listening to music.

Reactions observed:

After a while, a look of surprise appears on her face. She falls asleep at the 18th minute and this lasts for two hours.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of December 12th-13th, 2001

Witness No. 18

Profile: Mrs. S., age 79, hypertension, chronic depressive syndrome, loss of autonomy, tube-feeding.

As is common, Mrs. S. screams early in the night and is agitated. Even if she does not seem to understand, I suggest listening to music and put the headphones in place.

Reactions observed:

Gradually, the screams become less frequent. She calms down and falls asleep at the 20th minute. She will sleep all night.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of December 13th-14th, 2001

Witness No. 19

Profile: Mrs. B., age 88, loss of autonomy and senile dementia. Mrs. B. is continuously screaming. I suggest listening to music and despite some gestures bordering on aggression she accepts the headphones.

Reactions observed:

At 11:00 pm, Mrs. B. keeps saying, "I'm sick. I have a headache. My eyes hurt. Do not move your head; do not move your eyes. Do not poop; do not pee. I have a headache, my eyes hurt."

Regularly while listening to the music, she raises her hand to her eyes and from the 11th minute on, her speech is interrupted. For the first time, she turns her head toward me and says, "Give care to me!" Then a draft dialog appears with her own body: she brings her hands in turn to her belly and her pubis, saying, "It hurts." Then she says, "My feet hurt, it hurts all over."

Gradually her speech wears and loses its strength. She starts to fall asleep. She is unfortunately awakened by a scream in an adjoining room. She takes her monologue back up and does not fall asleep until about 5:00 am.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of December 13th-14th, 2001

Witness No. 20

Profile: Mrs. B., age 82, gastric ulcer, heart failure, recently developing Parkinson's disease, cirrhosis with ascites causing significant cough reflex, puncture of ascites today.

Mrs. B. complains that night of feeling abandoned by her children and grandchildren saying, "The last of my grandchildren, I still have his Christmas present from last year in the closet. So you see..." with an expression that means, "What good is life?" Again she speaks to me, "Blessed be God, you are here, that He protect you always, I'm glad you're here." She willingly accepts listening to music.

Reactions observed:

Mrs. B. smiles and falls asleep quickly. She will sleep for four hours before her cough takes her again. She will express the next morning to the day nurse that she was delighted with the music.

Location: Palliative Care Unit, Les Pergolines - Sète, France

Date: Evening of December 19th-20th, 2001

Witness No. 21

Profile: Mrs. G., age 87, stroke with right hemiparesis, confusion, dementia, anxiety and depressive behavior, aggression towards staff and other patients, tearing at the curtains, the electrical outlets etc.

Tonight, Mrs. G. tries to jump over the barriers of her bed and speaks incoherently. However, I find it possible to establish a “normal” communication with her and she accepts without difficulty the idea of listening to music. She is very receptive to music.

Reactions observed:

While she usually breaks the hardware, (she has an amazing grip!), Mrs. G. shows a great softness in her movements, by putting the headphones in place several times. Being called away, I take the risk of giving her the Walkman.

Upon my return at the 12th minute, her eyes are open and she is perfectly quiet. An hour later, the caregiver finds her sound asleep. She has removed the headphones and holds them, intact, in her hands.

She will remain in that position until morning.

Location: Medical Unit, Sète Hospital, France

Date: Evening of December 27th-28th, 2001

Witness No. 22

Profile: Mrs. L., age 62, barbiturate poisoning.

Tonight Mrs. L. is unable to sleep and feels oppressed despite treatment. She says she loves music and poetry a lot. The suggestion of listening to music suits her perfectly.

Reactions observed:

“It's beautiful music, very cosmic and referring to the four elements: earth, air, water, fire... it evokes the film “Green Sun” with Charlton Heston where you realize that there is a future world with so much dirt that there is nothing left to eat. People were led to believe they were eating normal foods while those came from the old ones who were put to death on a cosmic music like this. This film touched me deeply. This music touches all the senses: very soothing and beautiful. Really, thank you for these moments.”

Reactions observed:

I find Mrs. F. very anxious telling me, "They're going to hit me. I am very scared. I do not feel well." She accepts my presence and wants to come sit and talk. She asks me whether I like the pied-noirs saying, "...because I'm a pied-noir and I was born in Algiers. I miss my family very much and I am very anxious not to have them with me."

When I ask if she loves music, Mrs. F. answers affirmatively and adds, "But I cannot listen now. I'm too anxious." After a while she is willing to lie on her bed with the request, "if you sit next to me." Then she accepts the idea of listening to music.

At the beginning of hearing it, Mrs. F. says, "Pierrette said to listen to you, you were nice. She is beautiful, the music, but I'm not very clever for... But it is beautiful... Is it going to put me to sleep?"

"You know, I am pure Algerian," she says, "...and Arabs – there are good ones and bad ones. And the French – there are good ones and bad ones. In Algiers, nobody ever hurt me; everyone knows each other. I love my family. It worries me terribly to not be with them. I don't feel well because I'm afraid. It is beautiful, this music..."

At the end of listening to it, Mrs. F. agrees to take her treatment and says, "Well, we'll turn the light off, you can stop the music. I'll take you back to the door," which she does, and then goes back to bed. She falls asleep until morning.

Location: Orthopedic Chirurgy Care Unit, Sète Hospital, France

Date: Evening of June 30th-July 1st, 2001

Witness No. 23

Profile: Mr. M., age 84, chronic respiratory failure with colon cancer in terminal phase.

At 1:00 am, Mr. M. suffers and has a strong hiccup, which causes him to be very fatigued. After giving him the prescribed treatment, he accepts the idea of listening to music.

Reactions observed:

There was noticeable regulation of his breathing, termination of his hiccups, and drowsiness. After hearing the music, Mr. M. expresses that it was good to him. Falling asleep was fast.

Location: Orthopedic Chirurgy Care Unit, Sète Hospital, France

Date: Evening of July 4th-5th, 2001

Witness No. 24

Profile: Mrs. H., age 81, left hip operated on today.

At 10:00 pm, we find Mrs. H. trembling in every limb. She says that she feels very anxious. After checking all of the parameters, we position her comfortably, and after a lengthy exchange, Mrs. H. feels willing to listen to music.

Reactions observed:

In a moment, her tremor stops, she smiles indicating that she appreciates this music, closes her eyes, and visibly relaxes. When she wakes up in the morning, she tells us about the high quality of this music, the calming feeling, saying, "I did not have this anxiety anymore, and I could sleep. Thanks for your help."

Location: Orthopedic Chirurgy Care Unit, Sète Hospital, France

Date: Evening of July 5th-6th, 2001

Witness No. 25

Profile: Mr. A., age 44, operation that day of a compound fracture of left tibia and fibula. The intervention was conducted under spinal anesthesia that causes post-operative problems in urinary retention. Indeed, at 10:00 pm, Mr. A. has not yet urinated, and the anesthesiologist explains to him that if he has not succeeded by midnight, we will have to place a urinary catheter.

This perspective makes Mr. A. anxious. He still feels the growing urge to urinate, but without success. At the time of the expected placing of the catheter, Mr. A. says, "I'm pretty close to it, but I'm so tense about going that I block all. It needs just a little click..."

The caregiver proposes the idea of listening to music saying, "And if that little click would be to allow you a quarter of an hour or twenty minutes of relaxation, listening to music, what do you think?" The idea delights Mr. A. who responds with, "In fact, I am a musician."

Reactions observed:

From the beginning of hearing the music, Mr. A. expresses that he finds this music "downright beautiful." He closes his eyes - clearly entering the music - and we tiptoe out of his room.

Fifteen minutes later, he calls us back, happy and really relieved. "I'm urinating," he says to us, "I was so relaxed listening to this beautiful music, it came all by itself. And when, I stopped the music to call you, I stopped urinating. I had to put it back again to go on urinating. I would not have believed it if I had been told this would happen!" We laughed heartily.

Location: Orthopedic Chirurgy Care Unit, Sète Hospital, France

Date: Evening of July 16th-17th, 2001

Witness No. 26

Profile: Mrs. L., age 44, double fracture of the right ankle, insomnia since her intervention despite the treatment given.

Mrs. L. is willing to try listening to music saying, "Why not?"

Reactions observed:

"I really liked this music," she says, "it was like a balm to the heart. I felt bad to have left my little son - who was sleeping like an angel in the tent where we camped - to go dancing. A stampede made me fall and here I am. But the hardest was my husband who was absent and on his return complained a lot to me saying, "Do you realize, the little one, what could have happened to him..." I said, "do you not believe that heaven sufficiently punished me for my negligence?" By listening to this music, I felt forgiven, I am much better..."

Location: Orthopedic Chirurgy Care Unit, Sète Hospital, France

Date: Evening of July 17th-18th, 2001

Witness No. 27

Profile: Mr. C., age 31, recently subject to a serious operation of the right leg following an armed assault in his professional practice.

This patient, since the accident, suffers from a psychological trauma that makes him cyclically relive the sudden and brutal aggression he experienced. Psychological treatment and drug therapies were introduced. Tonight, Mr. C. is in trouble again and feeling very anxious. After a period of exchange, while his treatment takes control, he accepts the idea of listening to music.

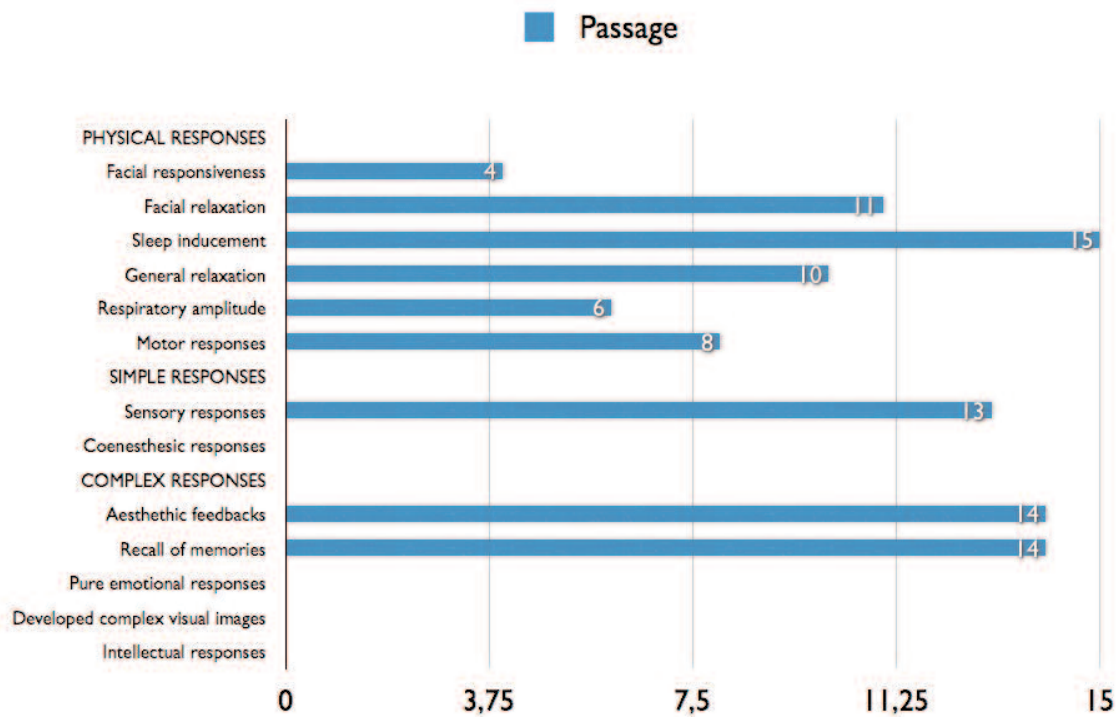
Reactions observed:

Mr. C. shall listen 5 or 6 times to the song (I left the Walkman for the night) and shall express how the music helped him relax and spend the night appeased. He was able to sleep. Upon awakening, he says he feels better.

GRAPHIC CHARTS
PATIENTS

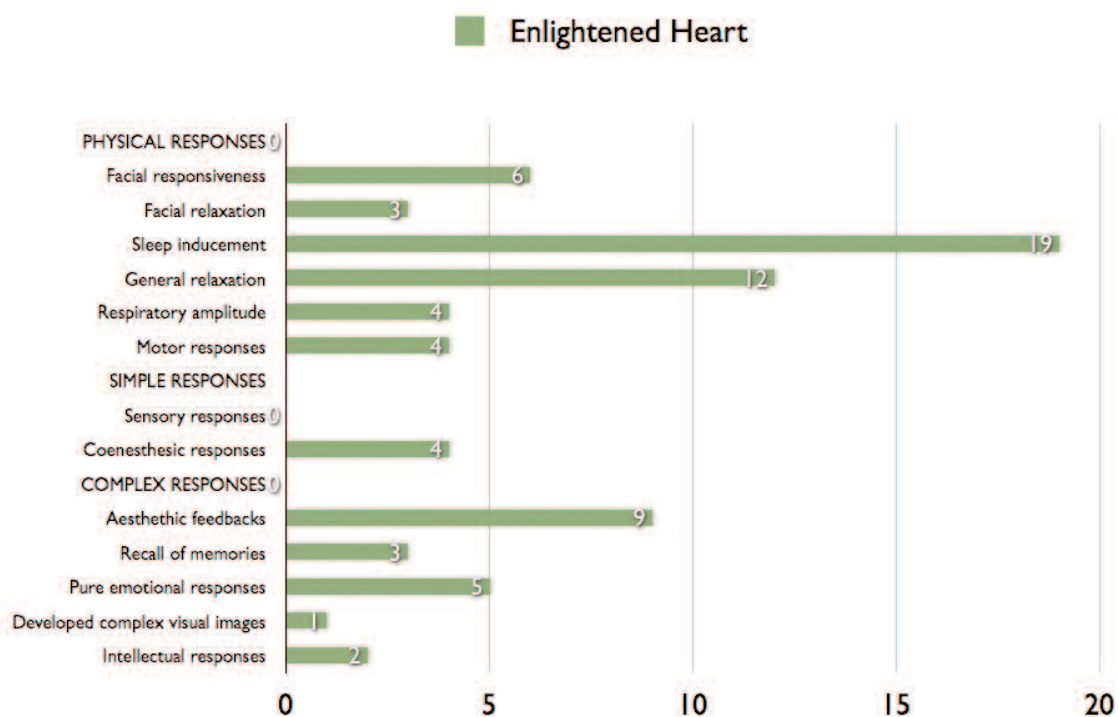
PASSAGE

OBSERVATIONS of 27 PATIENTS



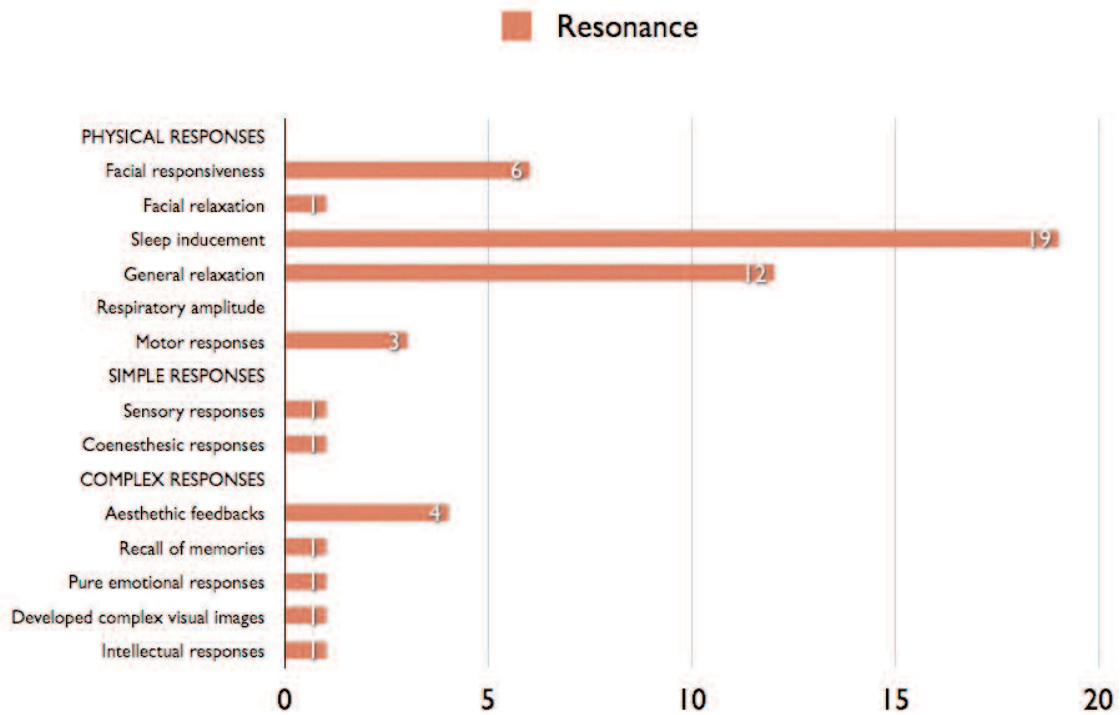
ENLIGHTENED HEART

OBSERVATIONS of 27 PATIENTS

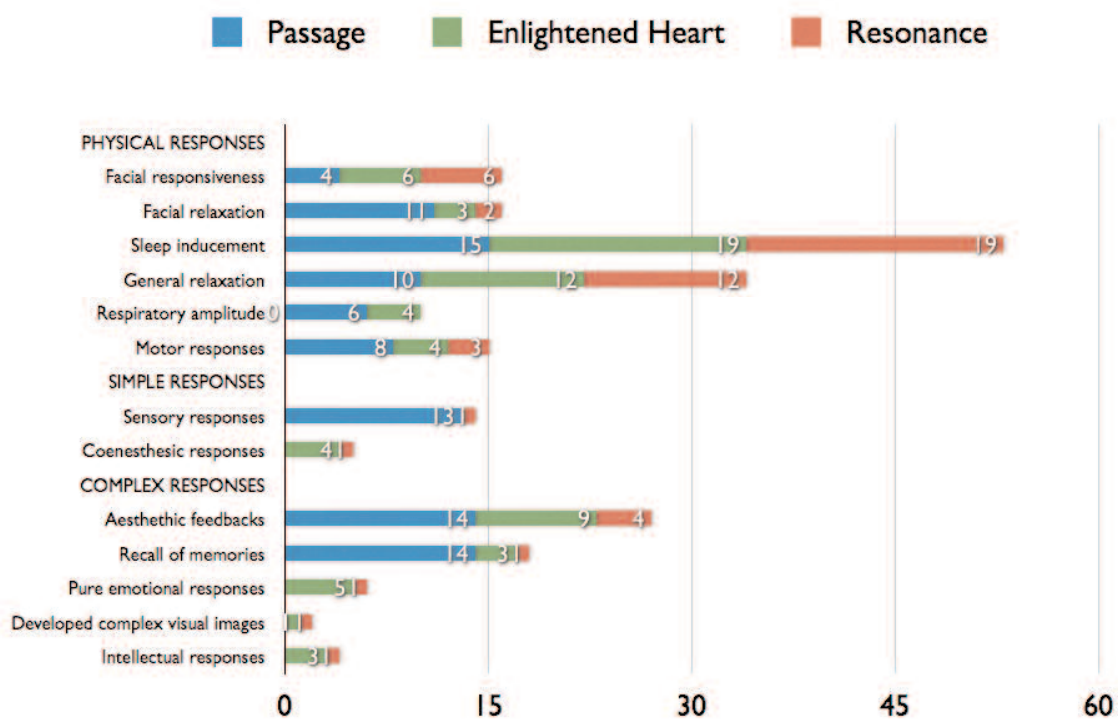


RESONANCE

OBSERVATIONS of 22 PATIENTS



COMPARISON of the 3 Themes of Music



SUMMARY & CONCLUSION

Following the suggestion of Dr. Alain Amouyal offering three of his musical pieces with durations between 20 to 30 minutes, Marie-Christine Plumejeaud, Night Nurse in Palliative and Short-Term Care Units at the Hospital in Sète, proposed music listening to a population of 76 patients from ages 30 to 100 years. The most affected were between 70-90 years old.

The five main pathologies were, in descending order:

- Respiratory ailments
- Alzheimer's disease
- Hypertension
- Depressive states
- Cancer and heart failure

What can we gain from this experience?

For caregivers, the main effects reported in the testimonies and assessments of nurses and nurses' aides include:

Physically:

- Calming, relaxing in stages, deep relaxation inducing sleep
- Lowering the threshold of pain

Psychologically:

- Stimulating the imagination
- Evoking memories, steps in sequence and projections into the future
- Facilitation of self-evaluation and assessment of life, when the negative is placed in context

Environmentally:

- Changing the atmosphere
- Improving and enriching the communication between patient, caregiver and family.

This music has fully responded to the urgent request to humanize and improve care by providing simple and accessible techniques.

For patients, their reactions have explained well the beneficial impact of this music:

- Physical relaxation and mental calming
- Sleep
- Restoration of verbal communication
- Reduction or cessation of pain

- Termination of a crisis of tremors (Parkinson's)
- Restoration of the contact with the body through touch
- Aesthetic impact of music connected with cultural, emotional, spiritual references
- Return of previous emotional experiences (especially in patients with Alzheimer's)
- Progressive acceptance of stages of grief (sadness, anger, loss, acceptance, serenity).

Dr. Amouyal's music seems, in this experiment, to act as a true mediator, especially among patients with Alzheimer's disease suffering from deterioration in their cognitive and relationship functions.

There has been a resumption of contact with near or distant memories, as if the music had brought to the surface and "rearranged" some elements of memory, allowing the restoration of a relationship, even partially, but full of hope for the person suffering from isolation: "This music speaks to my heart of things, memories, people I love. It cleared my heart. Now I feel well." (Testimony of patient # 2 - ENLIGHTENED HEART)

Among patients with respiratory ailments, particularly anxious at night, some have found happy events in their experience, so a "positive charge" turned away the anxiety of the moment: "...Listening to this music I found myself in an amphitheatre. I watched the opening of Carmen," and she starts to beat the tempo of the piece with her arms and sings the first bars. (Testimony of patient # 6 - PASSAGE). Others expressed their anger of not being listened to.

This moment of musical intimacy echoed their grief. There are many of these moments when faculties decline with age, and when loved ones have gone. It allowed them to put into words their distress and feel listened to, until they found peace in restful sleep: "I can no longer return home, the doctor told me. I am 80. It is very hard for me. This is a great emptiness, a great loss." (Testimony of patient # 3 - ENLIGHTENED HEART)

In some cases of senile dementia, listening to music helped to defuse an episode of agitation, which would have required a sedative injection.

In orthopedic surgery, where postoperative recovery is often painful and debilitating, this music has proven to be a valuable adjunct to analgesics.

Specific effects of each of the musical themes offered:

- *PASSAGE* seems conducive to the emergence of images, often as an existential framework that is:

Put into words:

"I thought of memories from my past, and of my future, as if the music was connecting them to each other," (Testimony of caregiver #11)

"I saw my entire life pass by: my childhood, my adolescence, all my years passing one by one, and ahead it was the future," (Testimony of caregiver #13)

Or into gestures:

"She puts her two hands on her chest and belly as if, now pacified, she resumed contact with these two regions. Her whole body surrenders. She is obviously fine." (Testimony of caregiver of patient #2)

Effect obtained: relaxation, tension eased.

- **ENLIGHTENED HEART** seems to echo the emotional sphere more, specifically that of the heart (although neither patients nor caregivers are informed of the title before listening to the song): “This music evokes passion for me, in the sense of the “heart’s energy,” – it opens the heart. It affects the meridian of the heart.” (Testimony of caregiver # 5)

It seemed very interesting in how it supported the grieving process:
“There is no feeling in my life,” she replies as she places her hands over her heart, “I can no longer return home” (Testimony of patient # 3)
One patient, after a painful experience, expresses: “By listening to this music, I felt forgiven, I am much better...” (Testimony of patient # 26)

- **RESONANCE** seems more directly to address the patients’ preparation for sleep. The testimonies of caregivers have a more “dreamy” and abstract character.

As for Marie-Christine Plumejeaud, her expectation was fulfilled. Particularly affected by the authenticity of the testimonies, she has found here the opportunity to meet the increasingly urgent demand for care that respects and takes into account all aspects of the individual coping with a disease or going through the end of life process.

It echoes what the psychiatrist Dr Marie-Françoise Bouthier Rochard said at the 5th National Meeting About Alzheimer's Disease in January 2001: “To hear...hear their desires. To distinguish them from each other and meet their need to belong, and for spirituality.”

PERSPECTIVES

In terms of research

It would be really interesting to further investigate the uses of this music in the geriatric sector, as well as other areas, using a rigorous methodology and the support of a technical plateau for validating the specific effects of the music.

In Art Therapy

The experiments in schools and the educational, hospital or geriatric sectors, like those of the Dr. Duclaud, Dr. Verdeau-Paillès, Dr. Mouret, and Mrs. Leneveu (retirement home director), point to the cathartic power of this music. They showed that it has the ability to stimulate the transition from a static state to a dynamic state, and the creativity that results from that. This music appears as an ideal support for many creative activities.

In a broader context, the music of Dr. Alain Amouyal is about to become the support of a major project for a Multimedia Show with therapeutic aims, where several art forms will be combined together.

In Marketing

A laboratory could incorporate into its business strategy the distribution of such a product to its customers, adjoining the quality of its drugs with an original and effective music.

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