

Abstract

Background

This study is the first controlled research study undertaken in the early phase of rehabilitation after cardiac surgery investigating the effect of a receptive music therapy method. Various forms of music therapy interventions including both active and receptive methods were reported to be significantly more effective than music treatment with music medicine. Music listening and receptive music therapy (such as Guided Imagery and Music) have been proposed to help patients both before heart surgery and during the recovery phase. This study therefore intended to explore both a music therapy and a music medicine intervention. Guided Relaxation with Music was considered potentially helpful for post operative cardiac patients in order to induce relaxation and facilitate recovery involving listening to relaxing music as a background while systematically guiding patients through a process of bodily relaxation.

Method

Participants were 68 patients (following randomization the operation was cancelled for five of these participants), age range from 40 to 80 years, who had a heart valve operation as a single procedure, or as part of a double procedure including a concurrent coronary artery bypass surgery (CABG). The participants were randomly assigned to one of three groups: Guided Relaxation with Music (GRM), Music Listening (ML), or a control group of rest with No Music (NM). Participants in the GRM and ML groups chose their preferred music style using four examples from which they could choose: (1) easy listening, (2) classical, (3) specially composed (MusiCure) and (4) jazz. The participants were given one session before and three after their operation, while they were still hospitalized in the heart-lung surgical unit. Each session lasted 35 minutes. Repeated measurements were made of participants' self-reporting of anxiety, pain and mood before and after surgery. Data were also collected on length of hospital stay, participants' satisfaction with the hospitalisation, and on participants' intake of analgesic medication. Participants self-reported through questionnaires on the importance of rest/ relaxation, music and the guiding procedure. Participants in the GRM and ML groups prioritized which elements of music and the guiding procedure had an impact on their benefits of the rest/ relaxation.

Results

There were quite variable results, lacking significance when comparing between groups, at different time points. Some significant results were found when looking at change over time. During hospitalization the GRM group reported the importance of their sessions with a higher mean score than did the other two groups (ML and NM). Participants in both intervention groups, GRM and ML, prioritized 'melody' and 'tempo' as important elements in choosing their preferred style of music. Voice quality was of high priority for participants to benefit from the GRM intervention. Attrition in the study was caused partly by difficulties participants experienced postoperatively in supplying data before and after treatment.

Conclusion

The sample was relatively small reducing the statistical power. However, the results tend to support findings from previous studies that have involved interventions with post-operative patients. Future research should investigate whether GRM would prove beneficial for wider populations. GRM is non-invasive, relatively economical, and may be an attractive and non-demanding procedure for

patients. In future research the potential of this intervention could be considered as a preventive therapy to reduce the stress factors that can lead to heart disease.