Music Therapy Defined

One complementary therapy that can be of value to decrease psychosocial distress in the oncology setting is music therapy. Incorporating music therapy in oncology is not a new idea. In 1992, Deforia Lane described the power and positive impact that music therapy can have for patients with cancer and their families (Lane, 1992). Music therapy is a science that uses clinical and evidence-based music interventions to accomplish individualized goals (see Figure 1). Those goals are attained in the context of a therapeutic relationship by a credentialed professional who has completed an approved music therapy program (American Music Therapy Association [AMTA], 2010) (see Figure 2). Music therapy also provides avenues for communication that can be helpful to those who find it difficult to express themselves in words. Music therapists encounter patients with cancer and their families in all phases of the disease trajectory and the therapeutic aim varies according to individual needs and goals (Clair & Memmott, 2008).

Music therapy can be active or passive (see Table 1). Active music therapy is based on improvisation between the therapist and the patient or group of patients, and it requires the patient’s direct participation in creating sounds, lyrics, or other music; no music talent or experience is needed. In passive music therapy, patients, individually or in a group, listen to recorded music or to sounds made with musical instruments by a therapist.

Patients do not need any music ability to benefit from music therapy (Clair & Memmott, 2008). Almost all types of.

M.S., a 37-year-old single mother of two grade-school children, recently was diagnosed with stage III Hodgkin disease. She was scheduled to begin her first course of chemotherapy, consisting of cyclophosphamide, vincristine, procarbazine, prednisone, doxorubicin, bleomycin, vinblastine, and dacarbazine (COPP/ABVD). At the chemotherapy clinic, M.S. reported feeling completely overwhelmed by the diagnosis and the planned course of therapy. She was worried about side effects, particularly nausea.

In response to her reports of feeling very anxious and overwhelmed, the nurse decided to assess M.S.’s level of distress. After being provided instructions about the Distress Thermometer (National Comprehensive Cancer Network, 2011), M.S. was asked to rate her current feeling of distress. She rated her distress as an 8 on a scale of 0 (not at all) to 10 (the worst). M.S. also had difficulty remembering much of the information that she had been given regarding the proposed treatment schedule.

Music therapy is the supervised and therapeutic use of music by a credentialed therapist to promote positive clinical outcomes. It can be a valuable form of complementary medicine in the oncology setting to decrease patient stress and anxiety, relieve pain and nausea, provide distraction, alleviate depression, and promote the expression of feelings. The music therapist assesses the patient and consults other members of the multidisciplinary team to create a therapeutic treatment plan. Music therapists design music sessions based on patients’ needs and their intended therapeutic goals. Patients can participate actively or passively in individual or group sessions. Only a credentialed music therapist can provide safe and beneficial music therapy interventions.