10ο Πανελλήνιο Συνέδριο Νόσου Alzheimer (PICAD) & 2ο Μεσογειακό Συνέδριο Νευροεκφυλιστικών Νοσήματων (MeCoND)

2-5 Φεβρουαρίου 2017
Grand Hotel Palace Θεσσαλονίκη

10th Panhellenic Conference on Alzheimer's Disease (PICAD) & 2nd Mediterranean Conference on Neurodegenerative Diseases (MeCoND)

2-5 February 2017
Grand Hotel Palace Thessaloniki, Greece

Χορηγούνται 21 ώρες Συνεχιζόμενης Εκπαίδευσης από τον Π.Ι.Σ.

ΠΑΝΕΛΛΗΝΙΟ ΙΝΣТИΤΟΥΤΟ ΝΕΥΡΟΕΚΦΥΛΙΣΤΙΚΩΝ ΝΟΣΗΜΑΤΩΝ
PANHELLENIC INSTITUTE OF NEURODEGENERATIVE DISEASES (P.I.N.Dis.)

ΕΛΛΗΝΙΚΗ ΕΤΑΙΡΕΙΑ ΝΟΣΟΥ ΑΛΖΗΕΙΜΕΡ ΚΑΙ ΣΥΓΓΕΝΩΝ ΔΙΑΤΑΡΑΧΩΝ
GREEK ASSOCIATION OF ALZHEIMER'S DISEASE AND RELATED DISORDERS
“The Influence of Interpersonal and Transpersonal Group Analytic Relationship in AD: Group Analysis & Music/Psycho- Therapy As a Therapeutic Method in Alzheimer’s Disease Treatment.”

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These are the words of many patients suffering from Alzheimer disease. We introduce the goals of music therapy with Alzheimer’s patients and caregiver individual or group session. At autopsy, her brain was observed to have unusually abnormal nerve cells. It has been estimated that a complete neurological psychiatric, and medical profile may reveal a diagnosis of “probable” or “possible” Alzheimer’s disease with 90% accuracy.
Recent memory is vastly impaired as time goes on, and learning new material becomes unrealistic. The speed with which the eyes and ears take in information slows, and the messages processed by the brain are significantly delayed.

Also, depression and delusions are not uncommon, and problem behaviors such as agitation and wandering often pose challenging concerns in managing the individual.
FUNCTIONS
of the
MUSIC-GROUP PSYCHOTHERAPIST

• To be a nodal point.
• To be a sympathetic string.
• To investigate inner music with the client.
• To receive and hold treasures and feed them back as necessary.
• To offer, where appropriate, his genuine responses and convictions.
• To stimulate growth.
• To survive, with amiable integrity, the client’s shadow side.
It may be useful to suggest some of the changes from my experience, might be expected to take place in some of the patients taken for individual or group-analytic music therapy

- Free verbal communication.
- More constructive use of aggression, both internally for self-development and externally in useful end-gaining processes.
- Some reduction in psychosomatic systems.
- Better human relations.
- More motivated and purposeful approach to life.
- More creative approach to life.
- More awareness of emotions but less unconsciously driven by them.
- Better toleration of frustration of emotional expression until suitable outlets can be used (not if treatment is stopped early)
- Better sleep.
- Some reduction in observations.
- Better toleration of negative emotion in others
The SKILLS of THE MUSIC THERAPY

1. The client’s philosophy on these issues.
2. What the present illness, disability, weakness means to the client.
3. What the probable outcome is for the client.
4. How the illness/disability, etc. affects the client’s life and relationships.
5. Our own philosophy on illness, disability, dying and death.
6. How it affects those with whom he or she shares life.
Under "MUSIC SKILLS" we should include

- Appropriate practice music skills in our instrument.
- Ability to play a portable instrument, which can be taken to the bedside when necessary.
- Knowledge of the repertoire, which is appropriate for the people with whom we work.
- Ability to select items which will fit the total therapeutic aims of the intervention.
- Ability to improvise and to help the clients develop their own ability to improvise in order to express feelings, which are verbally inexpressible etc.
- Ability to transpose at sight and on paper.
Investigating the use of music and art as complementary we have seen how sounds, notes, melodies, forms, colors or words can be the vehicles that convey feelings within the deeper dialogue that is the essence of therapy.

The links between feeling and physical movement and sensation are explored in a way that is just as important as the investigation of the connections between feelings and words via sound, rhythms, melodies and organs in analytical music therapy. This is reminiscent of the vital role that ballet has played in music complementing the music or art forms of lieder and opera.
ANALYTIC - MUSIC GROUP PSYCHOTHERAPY

Part I: Music - facilitated Stress Reduction.
Part II: Familiar Songs - Singing.
Part III: Improvisation - Rhythm Participation.
Part IV: Closure.
Each session began with a spoken greeting to each patient as the music-group analytic psychotherapists found him or her on the unit.
Following the greeting song, two or three songs were sung by the music-group analytic psychotherapist and all group members were encouraged to sing. While the music-group analytic psychotherapist sang, they moved about seated on roller chairs.
Part III: Improvisation - Rhythm Participation

The initiate this portion of the session, each individual group member was presented a choice of two rhythm instruments and asked to choose one.

During the course of the session, each participant was requested to play an instrument in imitation of simple rhythm patterns were presented to each individual before going on the next person. The following patterns among others were successful: e.g.
# Rhythm Participation

<table>
<thead>
<tr>
<th>Pattern 1st</th>
<th>1st Rhythm</th>
<th>2nd Rhythm</th>
<th>3rd Rhythm</th>
<th>4th Rhythm</th>
</tr>
</thead>
<tbody>
<tr>
<td>Music-group Psychotherapist</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Pattern 2nd</th>
<th>1st Rhythm</th>
<th>2nd Rhythm</th>
<th>3rd Rhythm</th>
<th>4th Rhythm</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alzheimer’s patient</td>
<td>●</td>
<td></td>
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<td>●</td>
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</table>

<table>
<thead>
<tr>
<th>Pattern 3rd</th>
<th>1st Rhythm</th>
<th>2nd Rhythm</th>
<th>3rd Rhythm</th>
<th>4th Rhythm</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caregiver</td>
<td>●</td>
<td></td>
<td>●</td>
<td>●</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Pattern 4th</th>
<th>1st Rhythm</th>
<th>2nd Rhythm</th>
<th>3rd Rhythm</th>
<th>4th Rhythm</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caregiver / organs etc.</td>
<td>● ●</td>
<td>● ●</td>
<td>● ●</td>
<td>● ●</td>
</tr>
</tbody>
</table>
Throughout the music therapy session, participants’ responses and subsequent successful experiences were facilitated repetitious presentations and adequate time allowed for them to respond.

Along with repetition and adequate response time, appropriate structure and support were integral through the structured routine seemed to contribute to the participants; comfort, and the music – group analytic psychotherapists’ attitudes of acceptance and kind respect encouraged participants to tap their residual abilities and skills.
1. Music — Group Psychotherapist
2. Alzheimer’s patient.
3. Caregiver A.
4. Caregiver B (Fam. P.)

INTER - and - TRANS Personal RELATIONSHIPS
Based on the observations and the data collected from the group analysis and music clinical researchers presented here, it is clear that music therapy is a viable approach with persons who have a possible or probable diagnosis of dementia of Alzheimer’s type and for their caregivers.

These clinical evaluations offer convincing evidence that music therapy is flexible in providing therapeutic accomplishments individual or group (Inter-Trans/personal relationships), a variety of goals for both victims and caregivers coping with Alzheimer’s disease, making it a treatment of choice for the population.
Music therapy may provide one of the only ways that those afflicted with Alzheimer’s disease and their caregivers may retrieve some of the many losses associated with this devastating degenerative condition.
Thank you for your kind interest