Preventing and Soothing Agitation in Dementia with Individualized Music An Evidence-based Protocol of Dr. Linda Gerdner, PhD, RN, FAAN, Stanford Geriatric Education Center

Presented by

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Case Study - Mrs. T

- Mrs. T was a Czech-American living in Iowa, prior to moving in with daughter
- Attended a dull/ No stimulus Adult Day Center
- Paced to and from the door; "I want to go home, I want to go home."
- Mrs. T did not respond to communication
- She was a fan of Leo Greco, "Polka King of Cedar Rapids"
- Intervention: 2 day/week, 30 min session, 15 sessions, Polka music
 - Smiled immediately
 - Hummed exact melody; danced 11-14 min avg.
 - Would say "This is fun" "That was fun"
 - Also responded when offered Czech pastry

Tools Available to Staff & Care Partners In the Evidence-Based Guideline, 5th Edition

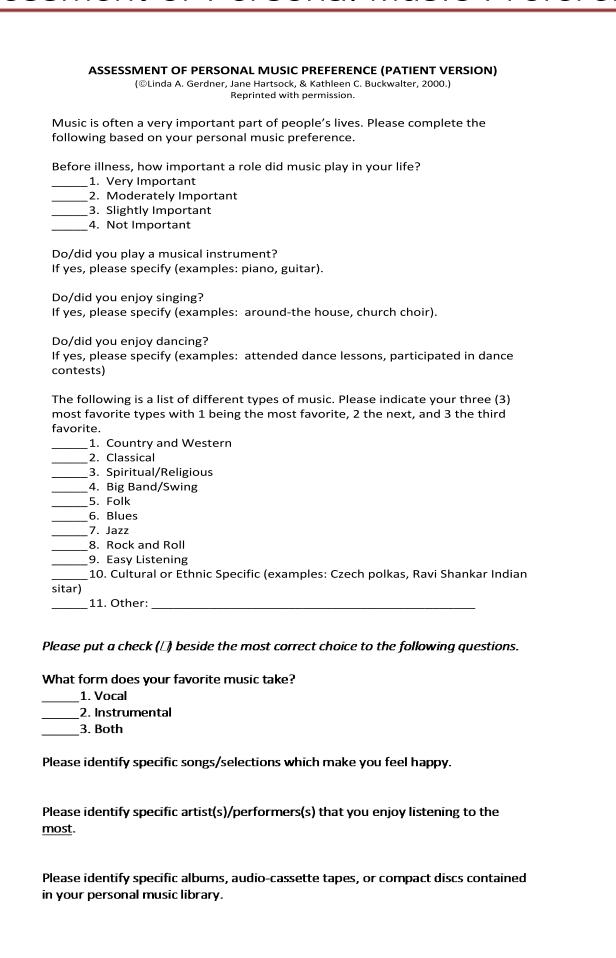
- Assessment of Personal Music Preference
 - Person with dementia edition (see below)
- Cohen-Mansfield Agitation Inventory
- Agitation Quality Improvement Monitor
- Individualized Music Intervention Knowledge Assessment Test

Family member edition

Process Evaluation Monitor

The above evidence-based tools are free from Stanford

Assessment of Personal Music Preference



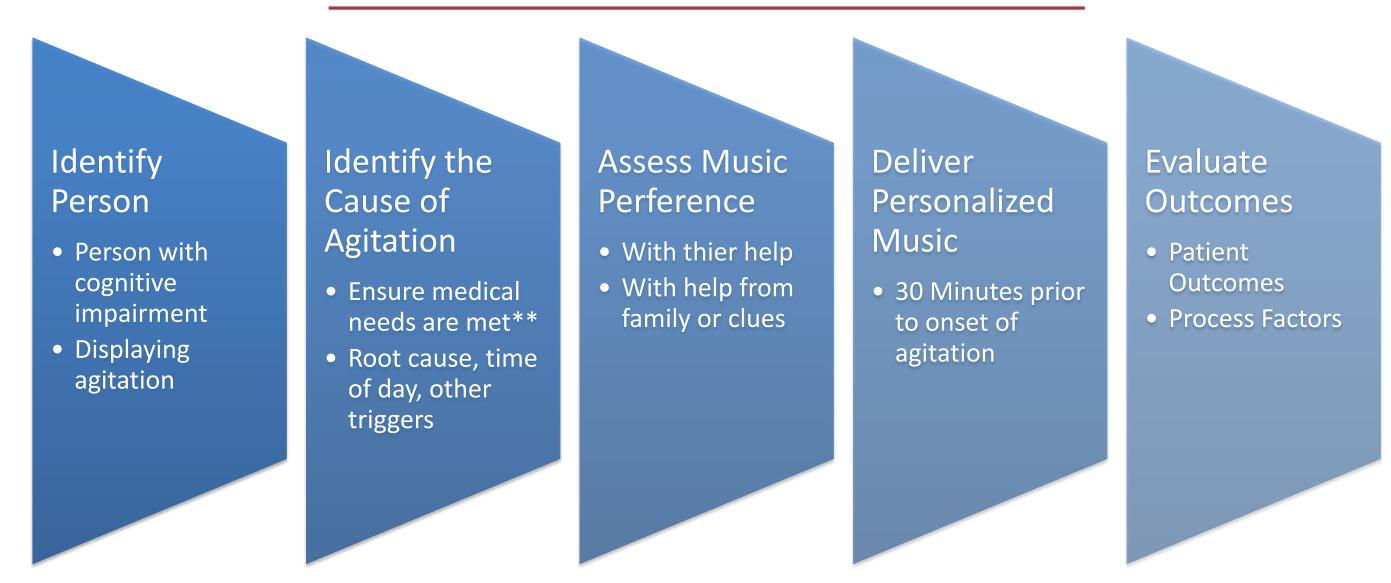
Key Points from Guidelines

- Most powerful when music has been important in person's life
- This intervention is not a substitute for medical care of a physiological issue which may be causing the agitation. Music can be use along with medical care, but not replace medical care
- Not simply classical music, want to invoke specific joyful memories
- Especially strong with ethnic groups (see case study)
- Assess if music is best offered with speaker ("freefilled") or privately with headphones
- Monitor volume of music for safety & comfort
- Monitor all participants if music is offered freefilled

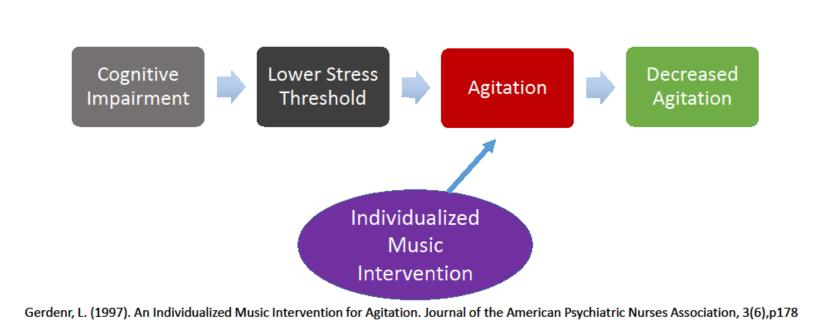
Why Addressing Agitation is Important

- As high as 90% in persons with dementia (Fernandez, Gobartt, & the COOPERA Study Group, 2010)
- Approximately 67.5% in community-dwelling persons (Tractenberg, Weiner, & Thal, 2002)
- Interferes with delivery of care (Legar et al., 2002, Samus, et al., Sloane, et al., 2004)
- Impacts quality of life for the PWD and Care Partners (Legar et al., 2002, Samus, et al., Sloane, et al., 2004)
- Increases fall risk (Marx, Cohen-Mansfield, & Werner, 1990)
- Interferes with onset and duration of sleep (Cohen-Mansfield & Marx, 1990, Cohen-Mansfield, Werner, & Freedman, 1995; McCurry, Gibbons, Logsdon, & Teri, 2004; Rose et al., 2011)
- A source of family caregiver stress (Fauth, Zarit, Femia, Hoffer, & Stephens, 2006)
- A major source of stress for staff members (Brodaty et al., 2003)

The Process



Mid-Range Theory of Individualized Music Intervention



What Staff CNAs & Families Have Said About Music

- CNA: "It [music] calmed her down."
- CNA: "They were more cooperative instead of fighting."
- CNA: "She just loves to listen to that music."
- Family: "She listened to the music and it relaxed her."
- Family: "When I turn the music on, she pretty well gets rid of the anxiety."
- Family: "...there seem to be less incidents in which she is agitated."

Source: Gerdner, L.A. (2005) Use of Individualized Music by Trained Staff and Family: Translating Research into Practice. *Journal of Gerontological Nursing*, 31 (6), 22-30.quiz 55-56.

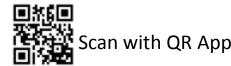
Dr. Linda Gerdner, PhD, RN, FAAN

Linda A. Gerdner PhD, RN, FAAN is currently an ethnogeriatric specialist at the Geriatric Education (Center for Education in Family and Community Medicine) at Stanford University and has served as a visiting scholar at Sweden's Göteborg Universitet. She was the first to develop and test a protocol for individualized music in persons with dementia. Dr. Gerdner advanced this work by developing and testing the mid-range theory of individualized music intervention for agitation. Her cutting edge research won the International Psychogeriatric Association / Bayer Research Award. The seminal study was published in *International Psychogeriatrics* and was identified as the 4th most highly cited article in the journal's history. This work has led to the development of an evidence-based protocol for the use of individualized music as an alternative intervention for the management of dysfunctional behaviors in persons with dementia. This theory-based intervention is the impetus for further testing by researchers in Taiwan, Sweden, Canada, Japan, Great Britain, and the U.S. In addition, Dr. Gerdner has written a story, Musical Memories, that introduces an innovative model for the translation of evidence-based practice into an engaging story for children and their family. This children's picture book is currently in press by Pizzicato Press [an imprint of Shen's Books]. The book is also intended to serve as a valuable resource to health care professionals and educators.

Acknowledgements

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Contact Information for Poster



Matt Estrade, MBA, CAPS, is the Founder and Chief Mentor of Care Partner Mentoring, LLC. CPM is a for-profit education and consulting company dedicated to helping families, friends, and professionals create **Peace with Dementia**. CPM provides in-person and electronic courses.

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Please also visit our site www.CarePartnerMentoring.com for free articles and other available services that are geared towards taking action.



Evidence-based guideline: Individualized Music for Persons with Dementia was originally developed in 1996 and has been refined over time based on an expanding body of evidence. The protocol is currently in its 5th edition. The purpose is to use individualized music as an alternative non-pharmacological intervention to reduce agitation in persons with dementia, such as Alzheimer's disease. This guideline is accompanied by an evidence grade schema that is used to assign a specific grade based on the strength and type of evidence for each recommendation. To facilitate implementation, assessment criteria for the use of pre-recorded music for the purpose of alleviating agitation in persons with dementia. The guideline also contains recommendation for assessing the temporal patterning of agitation so that the timing of the intervention can be tailored to maximize the effects and benefits of the intervention. The last link to successful implementation includes a monitoring system that encompasses outcome and process factors. Therefore, evaluation and outcome monitors, specifically tailored to this intervention, are included to support the use of individualized music.