

Sounds of Life: Using Internal Sounds to Connect with the External World

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Often the first sound of human life occurs in prenatal care when a Doppler ultrasound device detects the baby's heartbeat. At Cincinnati Children's Hospital Medical Center, I have piloted an innovative music therapy intervention that involves recording internal sounds of a patient's life to create music with patients and their families. I have used Doppler ultrasound devices, iPad apps, a constructed stethoscope microphone, and an electronic stethoscope with Bluetooth to record patients' heart beating and lungs breathing. This, like many of the recording interventions our music therapy team facilitates aim to capture moments in time which can be preserved for future connection with the patient and family.

In our perinatal hospice program, this intervention is offered to expectant mothers who have learned their baby has an incurable diagnosis. Some mothers agree for me to accompany them to an OB visit and record the baby's heartbeat during their appointment. The baby's rhythm is used to create a piece of music which the family and I design in tandem. If the family has other children, I have offered that the sibling's heartbeats are recorded and added to the initial recording, connecting all of their rhythms.

This intervention has also become a meaningful offering in our neonatal, cardiac, and pediatric intensive care units serving our neonatal patients up to young adults as well as our pediatric palliative care and hospice called StarShine. This intervention is not only for palliative care patients and/or patients at the end-of-life- it can be useful to create music with and connect with patients of all ages who are intubated and sedated, or are non-verbal. However, this innovation is also useful to build rapport with non-palliative patients who may be resistant to engage in other interventions. Consider a teenager who may not want to write a song with a music therapist initially, but may spark interest in knowing that a beat could be created using their own internal rhythm.

In one particular PICU case (<https://www.youtube.com/watch?v=jbTrbySS3fU>) this intervention was facilitated with a 14-year-old and his family. This intervention has been a thread of ongoing support with this patient's family, as the song has continued to grow over the past 11 months from the initial two songs chosen by the family while in the PICU to an almost 18 minute composition comprised of 5 meaningful melodies and a song of kin that the patient's father sang on the patient's birthday almost two years post mortem. The continuous positive feedback from this family illuminated a possible need for further bereavement support/care with the acutely ill who may die suddenly in intensive care. Often in chronic illness many other support systems are put into place via palliative and hospice care.

This is not the case in the sudden accidental/trauma group of patients and families that are served in intensive care.

The video has continued to receive coverage locally, nationally and internationally. It began with a post on our blog on May 1, 2014, and continued with stories on the Cincinnati