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Authors	Fitzpatrick, Katie;Moss, Hilary
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THE USE OF MUSIC THERAPY IN THE CHRONIC PAIN EXPERIENCE

Fitzpatrick, K. & Moss, H.

katie.fitzpatrick@ul.ie

Introduction

This mixed methods research was undertaken in collaboration with Chronic Pain Ireland and supported by the Irish Research Council. Interest in music therapy (MT) for this population was discovered via survey research on personal use of music (Fitzpatrick et al., 2019).

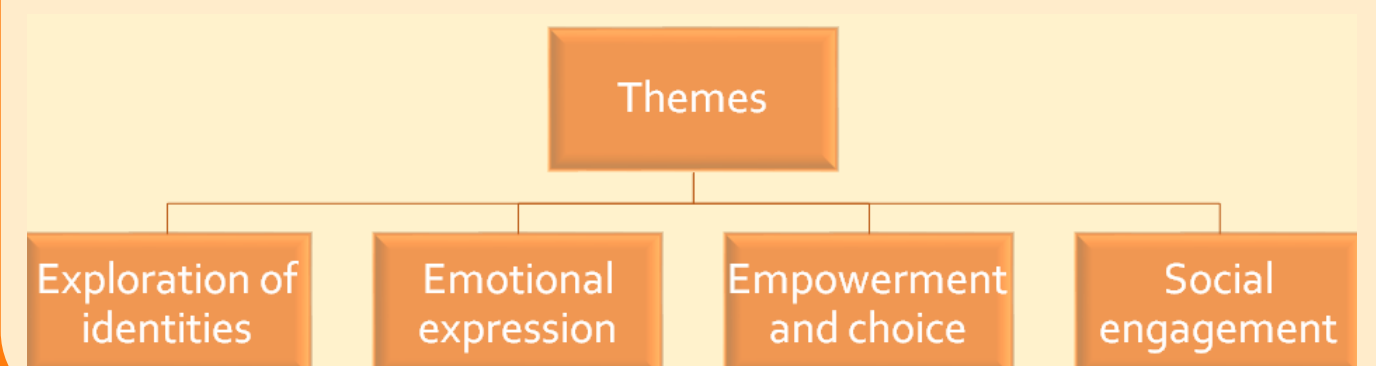
Suggested best practice for chronic pain treatment is a combination of psychological and pharmacological interventions (Turk et al., 2008). Few studies have been conducted on the use of MT in chronic pain management (none in Ireland). MT can positively affect pain perception and improve psycho-social health and well-being (Bradt et al., 2016). Music and MT techniques are well placed to assist in the areas of self- and psychological management in those living with chronic pain.

Method

- Mixed methods convergent parallel design
- 8 sessions MT for 10 people with chronic pain
- Quantitative data: questionnaires and weekly pain ratings. Measures used included the Hospital Anxiety and Depression Scale (HADS), Adult Hope Scale (AHS) and the Mindful Attention Awareness Scale (MAAS).
- Qualitative data: semi-structured interviews

Results

- 3/10 completed 8 sessions
- Average sessions attended: 5
- Many unable to attend due to ill health
- Pain decreased by 26% post session
- Anxiety & depression scores both decreased by 6% (HADS)
- Increased importance of music
- No notable differences in ratings of hope, mindful awareness, health satisfaction or quality of life



Conclusion

Initial findings show potential for MT to be supportive for adults with chronic pain. Further study with longer intervention and focus on psycho-social benefits recommended. Potential for group intervention for further social engagement should be investigated.

References

- Bradt et al. (2016). Vocal music therapy for chronic pain management in inner-city African Americans: A mixed methods feasibility study. *Journal of Music Therapy*, 53(2), 178-208.
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- Turk et al. (2008). Psychological approaches in the treatment of chronic pain patients—when pills, scalpels, and needles are not enough. *The Canadian Journal of Psychiatry*, 53(4), 213-223.