

## THE BENEFIT OF MEDICAL DANCE-MOVEMENT THERAPY IN A MULTIPLE SCLEROSIS PATIENT WITH DEPRESSION

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### Abstract

**Objective.** Our aim was to demonstrate the postential beneficial results that medical dance-movement therapy has in the neurological diseases, here in multiple sclerosis. Dance-movement therapy is a resourceful type of therapy based on the concept that motion and emotion are complementary associated.

**Methods.** We examined, both physically and mentally, a patient with multiple sclerosis associated with depression both before and after practicing for 6 months of individual dance-movement therapy sessions together with a therapist.

**Results.** After the 6 months of practice of dance-movement therapy, the patient obtained better results in the interview about the quality of life and depression, specifically for patients with multiple sclerosis.

**Conclusions.** Dance- movement therapy offers the patients the opportunity to perform changes from the 'inside out' and the 'outside in' at the same moment. The patient can express his/her way of thinking and emotions. The patient can accept and access by the use of perceptions and practices other feeling responses related to the movement and also can improve his/her sense of self in action in the benefit of self.

**Keywords:** multiple sclerosis, dance-movement therapy, quality of life.

### Introduction

Dance-movement therapy is an interdisciplinary technique: a mixture between the dynamic of dance and the erudition of psychology accustomed for the benefits of the human nature. The technique carries an experience of adopting hypothesis and judgements from different other areas counting sociology, applied kinesiology, traditional healing systems and a variety of other mind/body applications. This technique also develops to assimilate the scientific data from medical science, and readjusts clinical procedures to the necessities of medical patients. The members recognised DMT to be a source of power and a boost of energy in their lives.

The variables of optimism, confidence, awareness, content with social support, personal accomplishments and future plans were also associated with a better quality of life.

It is probable to observe the potential effect of DMT and alternative psychosocial or mind/body procedures from a quality of life belief, particularly for the medically sick. DMT generally targets the goals such as the improvement of the emotional state.

Another background of DMT is related to other dance and movement types. The dancing aactivity appears to offer some health advantages, involving the decrease of anxiety. Other studies have analyzed dance as an expression of the society that defines the physiological methods causes in traditional dance healing ceremonies. Dance curative rituals represent a venerable and universal hypothesis for the examination of dance assistances such as DMT in modern health

care.

As DMT takes its place in the universal health care system amongst the bundle of mind/body approaches and inventive/expressive procedures, it is advantageous to recognize the elemental and specific features of DMT that transforms a appropriate treatment alternative for medically include patients. Studies recognized the appropriateness of DMT with medical communities, and expressed five basic features of DMT as follows:

- the combination of mind, body, emotions, creativity and spirituality
- the involvement of relaxation, breathwork and imagery within the therapeutic process
- the manage of touch, mirroring, synchrony and body empathy
- the assistance of work towards new ways of physical and emotional coping
- the buildup of emotional healing

Qualities and objectives of DMT that make it remarkable from another psychosocial support instruments in typical biomedical health care follows:

- the existance of the body in the psychotherapeutic process
- the contruction of a relationship with the body of the patient
- the encourage of the establishment or re-establishment of a beneficial relationship between the patient and his or her body
- the use of creative movement expression to promote the expression of health

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In comparison with other mind/body trainings that are used in the health care system, DMT might be particularly adapted to the purpose of developing self-competence and intrinsic health attitude of discipline for medical patients who require help in these areas.

Compared to different methods as meditation, music-assisted guided imagery or visualization techniques, DMT prepares the patient to physical activity in the session. This requires one constituent of self-effectiveness: activity.

DMT, is a type of moderate exercise, that offers physical benefits. The reduction of stress and a decreased fight-flight response in daily-basis activities is observed.

In other medical applications, DMT may aim to:

1. reduce anxiety related to hospitalization and procedures
2. help the adaptation to brief and durable modifications in the body and in functional capacity, and to declare the positive aspects of the body image
3. supply an active rather than passive experience with one's body
4. supply an environment in which emotions related to the illness and/or hospitalization can be reasonable expressed.

To these, studies includes the following goals:

5. to reinforce the movement impulse; and to stimulate
  6. to support play, out of a relaxed state, to express emotional pain while maintaining essential defenses.
- DMT assessment techniques have unified the idea of coaction.

A health related quality of life (HRQOL) tool is used in acute and chronic disease and in terminal illness; for patients, family members and caregivers. In the case of DMT and other psychosocial services in health care, quality of life is an important part and in the same time an aim.

### Methods

To observe the physical and mental differences of dance-movement therapy, we chose a patient with multiple sclerosis, with recurrent-remission form. The patient practiced dance-movement therapy every day for 6 months with a therapist. The dance and movement happened in silence and stillness in the first phase and after one week, the patient experienced the dance-movement therapy sessions with music and rhythmic phrases.

The first patient, HM, male, aged 27, was diagnosed with multiple sclerosis 3 years ago, currently having pyramidal rigidity in the right limb, more pronounced in the lower limb, being quantified by 4/5 in the lower limb and with 4.5 / 5 at the upper limb.

### Results

At the Multiple Sclerosis Quality of Life (MSQOL)-54 Instrument, in general, he would say his health is good and compared to last year his health is worse now. He is slightly limited in performing vigorous activities, but in moderate activities, he is not limited. He has no limitations in walking one and several blocks and in performing activities like bathing and dressing. He has slight limitations in walking more than a mile. He had no limitations in lifting or carrying groceries and climbing stairs.

About limiting his work or other regular daily activities as a result of his physical health, in the last 4 weeks, he did not cut down on the amount of time he could spend on work or other activities, he did not accomplished less than he would like, he was not limited in his work and had difficulties in performing his work and other activities.

About limiting his work or other regular daily activities as a result of his emotional problems, he cut down on the amount of time he could spend on work or other activities, accomplished less than he would like, he was limited in his work and had difficulties and was more careful in performing his work and other activities.

During the past four weeks before the DMT, his physical health or emotional problems slightly interfered with his normal social activities with his family, friends, neighbors, or groups.

He had mild bodily pain during the past 4 weeks.

During the past 4 weeks, pain interfered moderately with his normal work (including both work outside the home and housework).

In the last four weeks he had been a very nervous person some of the time and he felt depressed some of the time too. He felt calm and peaceful a little of the time and he had energy a little of the time.

He felt worn out and tired a good bit of the time. He has been a happy person a little of the time in the last 4 weeks. He felt rested on waking in the morning a good bit of the time.

During the past four weeks, some of the time he had his physical health or emotional problems interfered with his social activities.

He seemed to get sick a little easier than other people. He stated that he was not as healthy as anybody he knows. He had expectations of his health to get worse. He thought that his health was not excellent.

In the last four weeks, he felt discouraged, worried, weighed down and frustrated by his health problems a good bit of the time.

Related to his cognitive function, in the last four weeks, he had difficulties in concentrating and thinking a good bit of the time and trouble keeping his attention on an activity for long and had trouble with his memory (observed by himself and his family) for a good bit of the time.

In the last 4 weeks bowel or bladder function interfered slightly with his normal social activities with family, friends, neighbors, or groups.

In the last month pain interfered moderately with his enjoyment of life.

He rated his own quality-of-life with 6 in a 0-10 points scale.

He described that he felt mostly dissatisfied with his life as whole.

After the six months, the patient's physical state was the same, but the results that he gave on the Multiple Sclerosis Quality of Life (MSQOL)-54 Instrument were changed in a beneficial way.

He is slightly limited in performing vigorous activities, but in moderate activities, he is not limited. He has no limitations in walking one and several blocks and in performing activities like bathing and dressing. He has slight limitations in walking more than a mile. He had no limitations in lifting or carrying groceries and climbing stairs.

About limiting his work or other regular daily activities as a result of his physical health, in the last 4 weeks, he did not cut down on the amount of time he could spend on work or other activities, he did not accomplish less than he would like, he was not limited in his work and had difficulties in performing his work and other activities.

About limiting his work or other regular daily activities as a result of his emotional problems, he cut down less time he could spend on work or other activities than 6 months ago. He accomplished less than he would like, but more than he accomplished 6 months ago. He was less limited in his work and had less difficulties in performing his work and other activities.

During the past four weeks, his physical health or emotional problems did not interfere with his normal social activities with his family, friends, neighbors, or groups.

He had slightly mild bodily pain during the past 4 weeks.

During the past 4 weeks, pain interfered slightly with his normal work (including both work outside the home and housework).

In the last four weeks he had been a nervous person a bit of the time and he felt depressed a bit of the time too. He felt calm and peaceful more time and he had more energy than 6 weeks before.

He felt worn out and tired less of the time, compared with six months ago. He has been a happy person more time than usual in the last 4 weeks. He felt rested on waking in the morning a good bit of the time.

During the past four weeks, a bit of the time he had his physical health or emotional problems interfered with his social activities.

He seemed to get sick a little easier than other people. He stated that he was not as healthy as anybody he knows, but he had expectations of his health to get

better. He thought that his health was not excellent, but he had hopes for a better health.

In the last four weeks, he felt discouraged, worried, weighed down and frustrated by his health problems less time than 6 months ago.

Related to his cognitive function, in the last four weeks, he had difficulties in concentrating and thinking a bit of the time and a slight trouble in keeping his attention on an activity for long and had trouble with his memory (observed by himself and his family) for a bit of the time.

In the last 4 weeks bowel or bladder function interfered slightly with his normal social activities with family, friends, neighbors, or groups.

In the last month pain interfered a good bit with his enjoyment of life.

He rated his own quality-of-life with 8 in a 0-10 points scale.

He described that he felt only a bit dissatisfied with his life as whole.

His thoughts and ideas were spoken, as well as he embraced the emotions being expressed in the session, he understood himself, his situation, emotions, way of thinking better so that he could manage his life in a more beneficial way. The vitality of the patient was restored. His coping self-efficacy and his body image of illness were improved.

## Discussions

In DMT, the patient has the involvement of taking the lead, compared to other methods in which the patient receives tasks. These components of DMT, patient-centered-lead of physical activity and attention and feed-back between the therapist and patient to the patient's own sensations of the implications of the body, associate to imitate the circumstances required for boosting self-effectiveness.

Different studies on the theme of dance/movement therapies have related improvements in the mood of the patients for various populations.

## Conclusions

Dance/movement therapy aims to provide the attention on the body, increasing the attention on sensations. For the patients with medical problems, this attention is vitally correlated with an increased attention on the symptoms.

The dance/movement condition conducted to a lower intensity of the symptoms and dance alone conducted to a decreased frequency in negative states. The patient had constructive interpretations of the study, although he firstly had difficulties in the practice of the moves. The psychological benefits of self-expressive action and expressing troubling emotions changed his perception of life and implicitly changed his quality of life. A heightened self-understanding and constructive impacts on self-value and insight from the experience.

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