



UNIVERSITY OF CALIFORNIA PRESS  
JOURNALS + DIGITAL PUBLISHING

---

Introduction to Special Issue: Dementia and Music

Author(s): Andrea R. Halpern, Isabelle Peretz, Lola L. Cuddy

Source: *Music Perception: An Interdisciplinary Journal*, Vol. 29, No. 5 (June 2012), pp. 465-466

Published by: [University of California Press](#)

Stable URL: <http://www.jstor.org/stable/10.1525/mp.2012.29.5.465>

Accessed: 25/03/2013 10:49

---

Your use of the JSTOR archive indicates your acceptance of the Terms & Conditions of Use, available at  
<http://www.jstor.org/page/info/about/policies/terms.jsp>

JSTOR is a not-for-profit service that helps scholars, researchers, and students discover, use, and build upon a wide range of content in a trusted digital archive. We use information technology and tools to increase productivity and facilitate new forms of scholarship. For more information about JSTOR, please contact support@jstor.org.



University of California Press is collaborating with JSTOR to digitize, preserve and extend access to *Music Perception: An Interdisciplinary Journal*.

<http://www.jstor.org>

## INTRODUCTION TO SPECIAL ISSUE: DEMENTIA AND MUSIC

ANDREA R. HALPERN  
*Bucknell University*

ISABELLE PERETZ  
*Université de Montréal*

LOLA L. CUDDY  
*Queen's University*

THIS SPECIAL ISSUE FOLLOWS TWO PREVIOUS SPECIAL issues on music and neurological disorders (April 2008, Volume 23/Issue 4 and April 2010, Volume 25/Issue 4). Like its predecessors, the issue presents studies employing a patient-based approach to music perception, cognition, and emotion. Whereas the earlier issues dealt with acquired and congenital disorders and impairments, the present issue focuses on dementia, primarily on its most common form, Alzheimer's disease (AD).

The term dementia collectively refers to progressive degenerative brain syndromes, for which no effective cure is known. The prevalence and incidence of dementia are both increasing at an alarming rate. It is estimated that 36 million people worldwide are living with dementia, with numbers doubling every 20 years. Costs of treatment and care were US \$604 billion in 2010 and are expected to escalate accordingly.<sup>1</sup> Yet, although music is a rich resource for studies of dementia and dementia care, very little evidence-based research has been conducted with the aim of documenting the musical perceptions and memories of people with dementia. As well, little evidence-based research on musical interventions is available. Such evidence, however, has tremendous promise for understanding brain function and dysfunction. It is also sorely needed to develop and evaluate care management techniques for alleviating the distress and anxiety surrounding brain dysfunction (Seitz et al., 2012).

The most frequent early symptom of AD is memory dysfunction, often accompanied by language difficulties, difficulties with activities of daily living,

and personality changes. Different aspects of memory may break down separately with different time courses (e.g., Stopford, Snowden, Thompson, & Neary, 2007). Four articles in this issue deal with memory for music. One article (Omar et al., p. 467) presents a theoretical review of semantic memory for music in dementia. Three others (Cuddy et al., p. 479; Samson et al., p. 493; Vanstone et al., p. 501) present empirical studies. Notably, these authors stress the importance of distinguishing between different memory systems that may be involved in patterns of loss and sparing of musical memory, respectively.

Other articles report preserved emotional judgments in AD (Gagnon et al., p. 509), successful learning of new verbal information with music as an aid (Moussard et al., p. 521), and positive effects of a musical intervention in severe AD (Clément et al., p. 533). Throughout the issue, both the paradigm of comparing a group or groups of AD participants with matched control groups and the case study approach are exemplified.

In addition to the challenges and risks of working with special populations, research on dementia carries special constraints. Recruitment is difficult as care partners are often too burdened with daily care to accept one more task—that of arranging test participation. Moreover, they may feel that their family member may be embarrassed or distressed by having to undergo yet another cognitive test. (Fortunately, many music tests tend to be pleasurable.) The length, timing, and response measures for the tests must be tailored to the AD participant's personal situation and compliance, while experimental procedures must be kept rigorous and capable of replication. Finally, unlike research with disabilities that remain relatively stable for considerable time, AD research must be carried out within a narrow time window for each participant. The participant's abilities may be subject to rapid further decline and attrition is of course a real possibility.

We are very appreciative of the authors, collaborators, and participants who have all risen to these challenges. We also gratefully acknowledge the editorial contributions of our reviewers. Lastly, we thank the funding agencies that made this research possible.

<sup>1</sup>World Alzheimer Report, Alzheimer's Disease International, <http://www.alz.co.uk>

## References

---

SEITZ, D. P., BRISBIN, S., HERRMANN, N., RAPOPORT, M., WILSON, K., GILL, S. S. ET AL. (in press). Efficacy and feasibility of non-pharmacological interventions for neuropsychiatric symptoms of dementia in long-term care: A systematic review. *Journal of the American Medical Directors Association*.

Available online February 17, 2012 <http://dx.doi.org/10.1016/j.jamda.2011.12.059>

STOPFORD, C. L., SNOWDEN, J. S., THOMPSON, J. C., & NEARY D. (2007). Distinct memory profiles in Alzheimer's disease. *Cortex*, 41, 846–857.