

Bright spots: music in the ICU





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The intensive care unit (ICU) is a rather obscure place for many people. It is a place where you are exposed to the fragility of existence, where you have to deal with the fine line between life and death. Every day I desperately try to illuminate this dark place, with a conversation, with a joke, with trying to facilitate the patients' or families' wishes.

I am truly delighted when I see the announcement for MusIC; the Haarlem-based violin duo 'The Divas' are going to play at our intensive care unit. What a great initiative, and what beautiful gesture to bring live music to a place where some people spent days, if not weeks, sometimes in a coma, sometimes kept asleep, or awake but linked to breathing apparatus or other devices. To a place where there is so much fear, pain and worries. It immediately reminds me of Harry Sacksioni, who spent days sitting next to his gravely ill mother, playing his guitar. Although this happened more than 18 years ago, it is a vivid image that has not faded from my memory.

During my lunch break a colleague tells me that the two violinists will play for her patient—a man who is suffering from a severe neuro trauma caused by a high-level fall—and who will never regain consciousness. My sandwich is suddenly stuck in my throat, and my arms are covered in goose bumps. The family had asked for the violin duo to come and play on the day that treatment would be terminated, like a sign of God. How special!

My own patient had already asked me in the morning whether it would be possible to hear the violinists play. He has been in intensive care for 38 days now. During this time we have recovered him from death a couple of times. Whilst awake, he is on ventilation through a tracheostoma, has various infusions and undergoes continuous kidney dialysis. I communicate with him by reading his lips, which works well, and I promise to arrange a session with the violin Divas for him.

He calls me when I am coming back from my lunch break, ensuring that the violonists are not forgetting to visit him. He probably doesn't realise that my expectations are as high as his. I put him upright in his bed and gently move his bit of chaotic curls out of his face. His daughter is sitting next to him, eagerly awaiting what is to come. In the distance I can hear the violin sounds. They may be at the bedside of my colleagues'

terminally ill patient. In a way I am relieved I am not there as I may have needed tissues.

Finally the two violinists arrive at my ward. When they enter, sparkles appear in my patients' eyes to temporarily conceal the fears and tensions of the past month. The bows start moving effortlessly and harmoniously across the strings, and a piece of Dvorák fills the place. Whilst he closes his eyes, a large smile starts to cover his face. A wonderful moment of distraction, of being touched, a moment of not having to worry about the future. I swallow a lump of emotion —music is such a beautiful and connecting medium! This should happen more often in intensive care! I would have loved to listen to this music for hours, whilst enjoying the sheer joy on the face of my patient, but more patients are waiting for this duo to come and play for them.

I follow the violinists to the next ward, joining a steady procession of nurses and clinicians who are keen to see the effect this new and amazing initiative has on their patients. The next patient is a famous concert pianist, who has been in intensive care as long as my own patient. As soon as Mozart's music starts playing, the patients' once so agile, but now very weak fingers, start to gently move along the bed sheet. Both the patients' carer and I try to stem a gentle flood of tears whilst watching this emotional scene. It is truly amazing to be able to join the patient's appreciation of the music, and the light and relief this brings to a very worrisome setting. MusIC, let's make this a recurring event! For the patients, for their families, but also for the staff.

Learn more about the muzlC project (Dutch).

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