Today’s piece was prepared by Meagan Dodge, MD based on a story in the New York Times, “The Effects of Music Therapy on Vital Signs, Feeding, and Sleep in Premature Infants.” 4/15/2013 [www.nytimes.com/2013/04/15/health/live-music-soothes-premature-babies-a-new-study-finds.html](http://www.nytimes.com/2013/04/15/health/live-music-soothes-premature-babies-a-new-study-finds.html)

This newspaper article references a *Pediatrics* study and well summarizes that live music can improve physiologic markers (lower heart and respiratory rates, improved oxygenation, and increased quiet alert states) and behavioral outcomes (improved sucking ability, improved caloric intake, and improved sleep) in premature infants. Intervention (6 singing or instrumental sessions over 2 weeks by music therapists) and control (no music therapy) were performed in 272 patients at 11 NICUs in infants >32 weeks gestation with specified medical problems. The article summarizes correctly that all music had some measured behavioral or developmental outcome benefit to the infants.

The importance of adjusting live music elements catered to the infant vital signs is central to the “entrainment” concept of music therapy, which is not mentioned extensively in the *NY Times*. At home, parents would be less able to track an infant’s physiologic signs “in real time” or access a music therapist. Music intervention is performed with specific instruments (gato, ocean disc) not commonly available, and though it is claimed that parents can be taught to mimic the instruments, this is not a measured outcome. The article also describes potentially confounded behavioral outcomes since parent-preferred lullabies improve parental stress, parental parenting ability, and impact infant feeding (like sucking and caloric intake). The *Times* correctly acknowledges the limitation that improved heart and respiratory rates are not alone developmental markers and may or may not correlate to more direct measures of growth and development like oxygen or feeding tube requirement. It is also unclear that music therapy would be beneficial for the NICU infants less than 32 weeks or those who have more severe clinical course.

Families reading this article may benefit from learning about optimization of child development in the Birth to Three period, as well as music therapy resources and research.

**RESOURCES ON MUSIC THERAPY AND NICU OUTCOMES:**

**American Music Therapy Association** *Purpose: progressive development of the therapeutic use of music in rehabilitation, special education, and community* [www.musictherapy.org](http://www.musictherapy.org)

**Zero to Three** *Early Childhood Development Resources:* [www.zerotothree.org/child-development](http://www.zerotothree.org/child-development)

And that’s today’s Developmental & Behavioral Pediatrics: IN THE NEWS!