

A systematic review of the effect of music therapy on agitation in people with dementia in long-term care settings

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Abstract

Overview: Around 57 million people worldwide live with dementia (WHO, 2025), where agitation is a frequent and challenging behavioural disturbance.

Summary: This review systematically evaluated the effect of music therapy on agitation in people with dementia in long-term care settings. Findings are mixed but promising results for this low-risk, person-centred approach.

Introduction

The Problem: Agitation is common and highly distressing; pharmacological interventions such as antipsychotics carry severe risks like increased Mortality and falls.

The Aim: To systematically review evidence on the effect of music therapy (Including structured music-based interventions) on agitation in people with dementia in long-term care settings.

Methodology

Approach: Quantitative systematic review using the PICO framework, analysed via narrative synthesis.

Data: 5 Randomised Controlled Trials conducted strictly within institutional long-term care facilities.

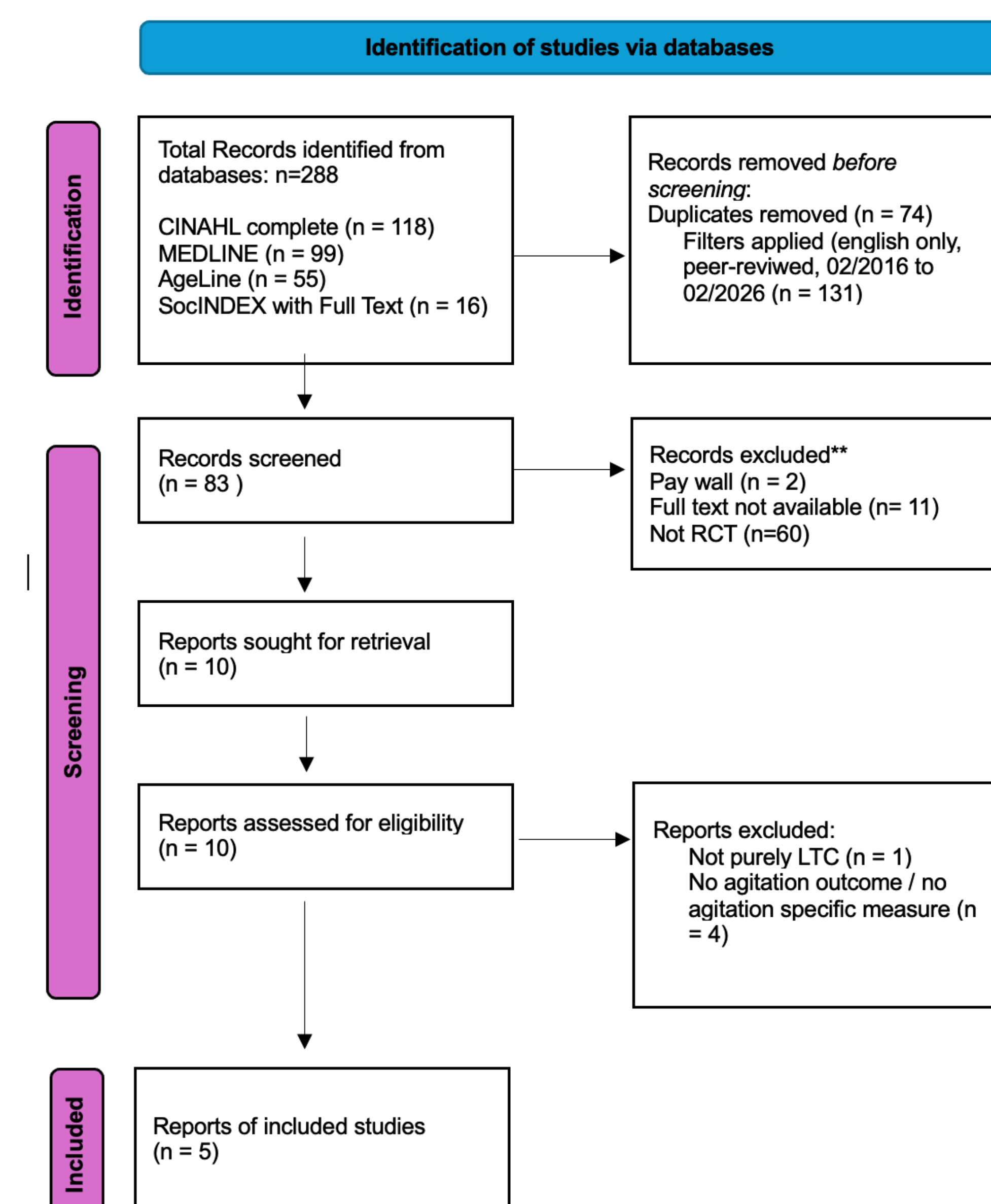
Search Strategy

Sources: The search was conducted across 4 major databases: CINAHL Complete, AGEline, MEDLINE, and SocINDEX FullText via EBSCOhost

Scope and Yield: Limited to peer-reviewed English articles published between February 2016 and February 2026, yielding 288 records and resulting in 5 eligible RCTs after PRISMA screening (Page *et al.*, 2021)

Measurement: Agitation measured using validated observational tools such as CMAI and ABMI.

Figure 3.1 PRISMA Flow Diagram (Page *et al.*, 2021)



Results

Mixed Efficacy: A promising approach, but not universally effective for all residents.

- Personalised music significantly reduced verbal agitation and increased pleasure but had no significant effect on physical agitation (Sisti *et al.*, 2024).

- Agitation decreased in all three groups, music with movement, music listening and social activity with no significant difference, suggesting that structured activity and social interaction may also contribute (Cheung *et al.*, 2020).

- Personalised music yielded mixed agitation outcomes, along side observational mood improvements and select analyses suggesting lower antipsychotic or antianxiety medication use (Inoue *et al.*, 2024).

- Individualised recorded music in a pilot trial showed a statistically significant improvement in sleep quality, alongside positive pre-to-post trends for agitation (Weise *et al.*, 2020).

- Evaluated 'Music & Memory' playlists via crossover design, finding no statistically significant reduction in overall agitation or psychotropic medication use (Kwak *et al.*, 2020).

Conclusion

Music-based interventions may be a useful non-pharmacological option on some residents experiencing agitation.

Advancing Practice: Clinical leadership supports leading care teams away from an over-reliance on pharmacological management alone.

Clinical Assesment: Music should be personalized to resident's life history and should never replace clinical assessment.

Jersey Context: Findings align with person-centred goals of the Jersey Dementia Strategy, requiring careful local implementation that accounts for resource pressures (Government of Jersey & Dementia Jersey, 2024).

Recommendations

Practice: Document in careplans for specific triggers; provide staff training on delivery and monitoring.

Policy and Context: Align with the person-cenred goals of the Government Jersey Dementia Strategy (2024), realistically accounting for local staffing and resource pressures.

Future research: Future Randomised Controlled Trials must report verbal and physical agitation separately and rigorously evaluate real-word implementation fidelity.