Midicine: Using MIDI (Musical Instrument Digital Interface) in Medicine for Treating Patients who experienced a Stroke – Review article

JÁNOS KOLLÁR

Semmelweis University, Institute of Behavioural Sciences, Budapest

Correspondence: Dr. János Kollár, Semmelweis University, Institute of Behavioural Sciences, H-1089 Budapest, Hungary, Nagyvárad tér 4. E-mail: janoskollar@gmail.com

(Received: 26 October 2016, accepted: ... August 2017)

Theoretical background: MIDI (Musical Instrument Digital Interface) is a connectivity standard that musicians use to hook together musical instruments (such as keyboards and synthesizers) and computer equipment. By applying MIDI-technology the experience induced by different types of software can create an inner motivation for stroke patients to go on the successful healing process. Aim of the review: The aim of writing the review is to determine the relevance and importance of applying MIDI applications in treatment of stroke patients. The research questions were: 1) What kind of interventions can be accomplished by using MIDI applications in treatment of strokes patients? 2) What are the outcome and result of applying MIDI instruments during the treatment of stroke patients? 3) What type of MIDI applications proved to be effective in the treatment of stroke patients? Material and Methods: Three databases (PubMed, Scopus, Web of Science) were systematically searched for relevant data. The papers were selected by focusing on key words: midi, musical instrument digital interface, stroke, cerebral accident, seizure. Results: Finally ten articles were selected and represented by focusing mainly on the type of intervention, treatment duration, outcomes and instruments used with a total of n=219 treatment and n=147 control patients. Conclusions: The conclusion is that the range of possible improvements provided by proper application of MIDI instruments is rather wide: from hand rehabilitation through limb and gait movement optimization till improving overall quality of life of patients. MIDI technology can be suggested because of two main reasons: 1) adjustability and flexibility of instruments, 2) it can improve the motivation of patients by gamifying the treatments. Further research is needed to discover more possibilities by applying the opportunities offered by the wide range of MIDI applications. The suggested name for such intervention is Midicine.

Keywords: Midicine, stroke, MIDI, MST, Medicine

1. Introduction

Applying new tools in medical practice has been always an important aim of physicians. Sometimes instruments already existing and used on another field of life prove to be suitable for medical purposes. An example of it is Nintendo Wii that discovered to be very helpful in rehabilitation (Anderson, Annett, & Bischof, 2010; Loo & Gan, 2013). The creativity of medical experts has led to the use in medical care of a growing number of devices which were not initially planned for this purpose. One of such tools is MIDI (Musical Instrument Digital Interface).

MIDI (Musical Instrument Digital Interface) is a connectivity standard that musicians use to hook together musical instruments (such as keyboards and synthesizers) and computer equipment. Using MIDI, a musician can easily edit and create digital music tracks. The MIDI system can record the notes played, the length of the notes, the dynamics (volume alterations), the tempo, the instrument being played, and hundreds of other parameters, called control changes. Since MIDI records each note digitally, editing a track of MIDI music is much easier and more accurate than editing a track of audio. The musician can change the notes, dynamics, tempo, and even the instrument being played with the click of a single button.

MIDI-compatible hardware or software is needed to record and playback MIDI files. (Christensson, 2006). MIDI can be considered as an easy and ideal recording method for sounds because of its coding efficiency and high-quality sound reproduction capability. (Modegi, 2001)

The simplest structure of a MIDI instrument is connecting a MIDI keyboard to a PC (Figure 1).

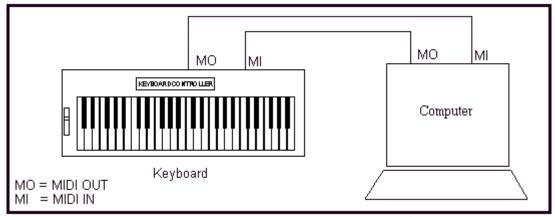


Figure 1. Connecting a keyboard to a PC¹

A definite advantage of using MIDI technology is that different software types can be used by the technology: sequencers, notation and scoring software, editors, auto-accompaniment, synthesis and sampling programs depending on the aim of application. In my review my objective was providing a picture about the different application possibilities of MIDI in treating stroke patients. The review is focusing on stroke patients because stroke can be considered as the leading cause of chronic adult disability in Western countries. After a long time of inpatient physiotherapy, stroke patients are forced to continue unguided and monotonous therapy at home. Consequently, these patients often lose their motivation to continue the therapy and therefore do not recover to their potential (Friedman, Reinkensmeyer, & Bachman, 2011). By applying MIDI-technology the experience induced by different types of software can create an inner motivation for patients to go on the successful healing process. Motor impairment of stroke patients are very common and motoric skills can be improved by music-supported therapies. MIDI instruments can be used either as a piano or as drum machine thus providing the opportunity for rhythmic stimulation of patients. Gross motor skills with respect to speed, precision, and smoothness of movements can also be improved by using MIDI technology (Altenmuller, Marco-Pallares, Munte, & Schneider, 2009).

Based on the above scientific results the aim of this study was to determine the relevance and importance of applying MIDI instruments in treatment of stroke patients. The research questions were: What kind of interventions can be accomplished by using MIDI applications in treatment of strokes patients? What are the outcome and result of applying MIDI instruments during the treatment of stroke patients? What type of MIDI applications proved to be effective in the treatment of stroke patients?

¹ http://music-technology.tripod.com/connections.html

2. Material and Methods

The search strategy contained a systematic search of several medical databases (PubMed, Scopus, Web of Science). Searching were performed from the 31st August till 4th September 2015 using the terms: "musical instrument digital interface" [AND] cerebral accident, midi [AND] cerebral accident, "musical instrument digital interface" [AND] seizure, midi [AND] seizure, "musical instrument digital interface" [AND] stroke, midi [AND] stroke. There were no language restrictions. All databases were searched from their start date to September 4 2015. The results are shown in *Table 1*.

Table 1. The result of searching articles about using midi technology in treatment of stroke patients

Databases	Keywords							
	musical instrument digital interface AND cerebral accident	midi AND cerebral accident	musical instrument digital interface AND seizure	midi AND seizure	musical instrument digital interface AND stroke	midi AND stroke		
PubMed	0	0	0	7	3	18		
Scopus	0	0	0	1	4	23		
Web of Science	0	0	0	0	4	15		

The PRISMA guidelines were followed by making the review (Moher, Altman, Liberati, & Tetzlaff, 2011). The results are shown in *Figure 2*. Reasons for excluding documents in the screening phase were as follows: the word "stroke" was used in other sense than a medical problem, for e.g. keystroke or two-stroke engine (5), the word "midi" was used in other sense than Musical Instrument Digital Interface, for example size, MIDI ventriculography, midiclotting activity etc. (5), Midi was a name of a person or a company (7), Midi was a geographical place (Midi-Pyrenees) (14). In the eligibility phase 3 articles were excluded because they did not contain clinically controlled experiments.

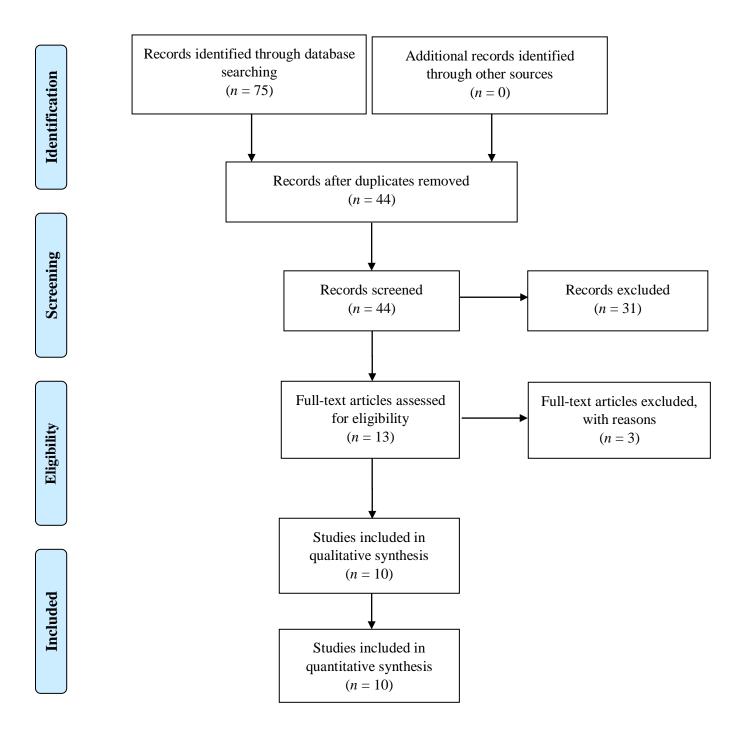


Figure 2. Study selection process based upon PRISMA guidelines (Moher et al., 2011)

3. Results

The literature search revealed 10 clinical controlled experiments with a total of n=219 treatment and n=147 control patients. All studies were carried out between 1996 and 2014. 4 of 10 articles applied MIDI keyboard and electric drum set 3 used MIDI keyboard with special software (Cubase and KM Player, DAT recorder) and 3 of 10 used only MIDI piano but one of them utilized the special feature of MIDI namely beat adjustment. All of the treatments can be considered as music-supported therapies (MST) where behavioral indices and electrophysiological measures were investigated either before and after the treatments or after the treatments comparing the results of a control group. The types of intervention differed by adapting the treatment to the special injuries and therapeutic aims. Thus 5 of the studies were focusing on hand movement rehabilitation (Altenmuller et al., 2009; Chong, Cho, & Kim, 2014; Chong, Han, Kim, Park, & Kim, 2014; Rojo et al., 2011; Villeneuve & Lamontagne, 2013) 2 of them aimed at improving gross motor skills by focusing on hand movement (Schneider, Munte, Rodriguez-Fornells, Sailer, & Altenmuller, 2010; Schneider, Schonle, Altenmuller, & Munte, 2007) 1 focused on improving gait performance (Cha, Kim, Hwang, & Chung, 2014) 1 on improving leg movements (Schauer, Steingruber, & Mauritz, 1996) and 1 was investigated the formation of new neural networks.in music perception (Schuppert, Munte, Wieringa, & Altenmuller, 2000).

The outcomes of the treatments support the application of MST by applying MIDI instruments. Marked improvement of motor function, better cortical connectivity, formation of new neural networks, improved activation of the motor cortex, improved balance and gait performance, improved hand function and movements, better leg function, improved emotional indices and thus better quality of life were the results of treatments. Since the characteristics of the injuries were individual the treatments had to accommodate to such circumstances namely MST could be applied only in individual sessions not as a group therapy. The results are shown in *Table 2*.

Table 2. Characteristic of the studies on applying MIDI-based technology for improving life quality of patients who experienced a stroke

First author	Year	Type of	Treatment	Outcomes	Instrument	N treatment	N control
		intervention	duration				
Altenmüller,	2009	Self-paced	3 weeks (15	Music-supported	MIDI piano	32	30
E.		index	sessions)	therapy leads to	and electronic		
		finger		marked	drum set		
		movements on a		improvements of			
		defined piano		motor function after			
		key or		stroke and these are			
		gross		accompanied by			
		movements with		electrophysiological			
		the whole arm		changes indicative			
		by hitting		of a better cortical			
		a defined drum		connectivity			
		pad each 3–5 s.		and improved			
				activation of the			
				motor cortex.			
Cha, Y.	2014	Rhythmic	6 weeks (30	Gait training with	MIDI Cubase	10	10
		auditory	min/day)	rhythmic auditory	musical		
		stimulation for		stimulation	instrument		
		improving gait		improves balance	digital		
		performance.		and gait	interface		
				performance as	program and		
				well as quality of	a KM Player		
				life, in individuals	version 3.3		
				with chronic			
				hemiparetic stroke			

Table 2. Characteristic of the studies on applying MIDI-based technology for improving life quality of patients who experienced a stroke (cont.)

First author	Year	Type of	Treatment	Outcomes	Instrument	N treatment	N control
		intervention	duration				
Chong, H.J.	2014	Piano playing	4-6 weeks	The results support	MIDI-	8	-
		(Simple melodic	(Two 25	using keyboard	connected		
		patterns were	minute training	playing for hand	keyboard		
		based	per week)	rehabilitation,			
		on repeated		especially in the			
		movements of a		pressing force of			
		single finger		individual			
		and successive		finger sequential			
		movements of		movements			
		adjacent fingers					
		Also, random					
		movements of					
		the fingers or					
		combinations					
		of more than					
		two finger					
		movements					
		were executed)					
Chong, H.J.	2014	Hand-function	3 trials with 30	MIDI-keyboard	Steinberg's	66	-
		test: sequential	seconds rest in	playing scores	Cubase 6		
		key pressing on	between them.	demonstrated	software,		
		a MIDI		moderate to high	MIDI		
		keyboard.		correlations with	program and		
				hand function tests	a Yamaha P-		
				except for	85 keyboard.		
				participants at the			
				chronic stage and			
				the JTHF.			

Table 2. Characteristic of the studies on applying MIDI-based technology for improving life quality of patients who experienced a stroke (cont.)

First author	Year	Type of	Treatment	Outcomes	Instrument	N treatment	N control
		intervention	duration				
Rojo, N.	2011	Hand function test: the patient proceeded from playing single notes to playing sequences of notes and beginnings of children's songs.	4 weeks (20 sessions, 30 minutes per each).	Music-supported therapy led to a clinical improvement and to an increased quality of rapidly alternating movements.	Midi piano and an electronic drum set	1	-
Schauer, M.	1996	Rhythmic auditory stimulation for improving motor performance of the leg.	One session per patient.	Synchronizing the beat of the music and the motor performance in terms of recognizing the movements of the legs to the music of stroke patients with mild leg paresis.proved to be successful.	MIDI music system with beat adjustment.	12	12

Table 2. Characteristic of the studies on applying MIDI-based technology for improving life quality of patients who experienced a stroke (cont.)

First author	Year	Type of intervention	Treatment	Outcomes	Instrument	N treatment	N control
Schneider, S.	2007	Finger tapping and hand tapping aiming at improving gross motor skills.	duration 3 weeks (15 sessions, 30 minutes per each).	Patients showed significant improvement after treatment in gross motor skills with respect to speed, precision and smoothness of movements and motor control in everyday activities improved significantly.	MIDI piano and electronic drum pad.	20	20
Schneider, S.	2010	Producing tones, scales, and simple melodies aiming at improving gross motor skills.	3 weeks (15 sessions, 30 minutes per each).	Music-supported training is efficient and seems to be more efficient in improving gross motor skills than functional motor training because of motivational and emotional factors.	MIDI piano and electronic drum pad.	32 +15	30

Table 2. Characteristic of the studies on applying MIDI-based technology for improving life quality of patients who experienced a stroke (cont.)

First author	Year	Type of	Treatment	Outcomes	Instrument	N treatment	N control
		intervention	duration				
Schuppert, M.	2000	Recognition of	One session	Individual aspects	Midi-piano	20	45
		familiar song	per patient.	of musicality and	and Sony		
		melodies,		musical behaviour	DAT		
		testing		very likely	recorder.		
		discrimination		contribute to the			
		of pitch, testing		definite formation			
		discrimination		of new neural			
		of interval and		networks.in music			
		rhythm, testing		perception.			
		discrimination					
		of sound					
		contour					
		and metre.					
Villeneuve, M.	2013	Step-by-step	3 weeks (9	All participants	Midi-piano	3	-
		musical training.	sessions, 1	showed	(Yamaha		
			hour per	improvements in	P155)		
			session) +	note accuracy and			
			home program:	timing accuracy			
			biweekly piano	within and across			
			exercises of	the training			
			30min.	sessions with			
				improvements in			
				manual dexterity,			
				finger movement			
				coordination, and			
				functional use			
				of upper extremity.			

4. Discussion

The review focused at collecting studies on applying MIDI-based technology for improving life quality of stroke patients. As far as we know this is the first study on this field focusing on the relevance and importance of applying MIDI technology in treatment of stroke patients. The findings clearly support the application of MIDI instruments in music supported therapies even if the patients have little or no musical training and can be considered as musically inactive (Schuppert et al., 2000). The range of possible improvements is rather wide: from hand rehabilitation through limb and gait movement optimization till improving overall quality of life of patients. MIDI technology can be suggested because of two main reasons: 1) adjustability and flexibility of instruments, 2) it can improve the motivation of patients by gamifying the treatments. Most of the patients enjoy playing on MIDI instruments and thus the healing team working with them will be able to build an inner motivation in the patients instead of urging them to do exercises time to time.

MIDI keyboards were used in all of the treatments with or without different other applications. MIDI keyboard has several advantages like "Midification, versatility, reproduction sound quality and creative credibility (Writing, 2015). The meaning of "Midification" is allowing keyboard keys to function as various instrument samples or to act as a channel to control a previously recorded and programmed instrument sound. Such samples are available in wide spectrum on the music market from different companies like Best Service, East-West, Native Instruments Sony etc. Versatility is one of the greatest advantages of MIDI keyboard since with a proper interface it can produce the sounding of a whole live orchestra by using synchronized patches and sound banks. The user needs only a small amount of time investment and a minimal musical knowledge for reaching motivating result. Sound quality depends on the instrument samples and distortion ability of the system but even with a limited amount of financial background good result can be reached. Creative credibility is one of the most important and inspiring quality of the system since it allows the user to have complete control to the millisecond during recordings and gives inspirations for trying other instrument samples as well. By pushing a single key the user is capable of creating whole melodies and for a stroke patient who needs to learn how to use again the fingers for example it gives the experience of great success thus building inner motivation for continuing the therapy.

Electric drum set were used in 3 of the treatments. An electric drum set connected to a MIDI instrument is capable of creating wide variety of sounds (even piano sounds) by allowing to measure the exact beat rate and rhythm the user produces. It proved to be extremely advantageous in those treatments where movement rhythm of a defined finger or arm was in the focus of the treatment.

3 studies reported about applying special types of software (Cubase, KM Player DAT recorder). Cubase is a music software product developed for music recording arranging and editing. KM Player is a flexible multimedia player and DAT (Digital Audio Tape) recorder is a signal recording and playback medium. All of such software types can be applied for processing data provided by MIDI instruments.

By applying MIDI devices patients will be able to discover their inner strength and creativity thus helping themselves to recover as fast as they can. Such technology makes even home practicing is feasible and leads to further, sustainable and significant improvement. The choice offered by the wide range of MIDI applications (sequencers, notation and scoring software, editors, auto-accompaniment, synthesis and sampling programs) can provide much wider possibilities for applying them on the field of rehabilitation.

5. Conclusions

Most of the stroke patients lose the two most important elements of their life: rhythm and harmony. Music supported therapies have already proven undoubtedly beneficial in treatment of stroke patients. By applying the flexibility and gamification characteristic of MIDI applications both the patients and the healing team can enjoy significant benefit. It can be considered as a revolutionary way of treatment. The aim of this review is giving a short introduction to the possibilities of using MIDI instruments in treatment of stroke patients. Making a comparison between the different methods and their results can be the topic of another article. Overall, the option of utilizing MIDI technology for treating stroke patients and discovering new possibilities on this field. I suggest to name this special application as Midicine.

References

- Altenmuller, E., Marco-Pallares, J., Munte, T.F., & Schneider, S. (2009). Neural reorganization underlies improvement in stroke-induced motor dysfunction by music-supported therapy. *Annals of the New York Academy of Sciences*, 1169, 395–405.
- Anderson, F., Annett, M., & Bischof, W.F. (2010). Lean on Wii: physical rehabilitation with virtual reality Wii peripherals. *Studies in Health Technology and Informatics*, *154*, 229–234.
- Cha, Y., Kim, Y., Hwang, S., & Chung, Y. (2014). Intensive gait training with rhythmic auditory stimulation in individuals with chronic hemiparetic stroke: A pilot randomized controlled study. *Neurorehabilitation*, 35(4), 681–688.
- Chong, H.J., Cho, S.R., & Kim, S.J. (2014). Hand rehabilitation using MIDI keyboard playing in adolescents with brain damage: A preliminary study. *Neurorehabilitation*, *34*(1), 147–155.
- Chong, H.J., Han, S.J., Kim, Y.J., Park, H.Y., & Kim, S.J. (2014). Relationship between output from MIDI-keyboard playing and hand function assessments on affected hand after stroke. *Neurorehabilitation*, *35*(4), 673–680.
- Christensson, P. (2006). MIDI Definition. Retrieved from: http://techterms.com 04.09.2015.
- Friedman, N., Reinkensmeyer, D., & Bachman, M. (2011). A real-time interactive MIDI glove for domicile stroke rehabilitation. *Human-Computer Interaction: Users and Applications, Pt Iv, 6764*, 151–158.
- Loo, K.W., & Gan, S.H. (2013). Burden of stroke in the Philippines. *International Journal of Stroke*, 8(2), 131–134.
- Modegi, T. (2001). XML transcription method for biomedical acoustic signals. *Studies in Health Technology and Informatics*, 84(Pt 1), 366–370.
- Moher, D., Altman, D. G., Liberati, A., & Tetzlaff, J. (2011). PRISMA statement. Epidemiology, 22(1), 128.
- Rojo, N., Amengual, J., Juncadella, M., Rubio, F., Camara, E., Marco-Pallares, J., . . . Rodriguez-Fornells, A. (2011). Music-Supported Therapy induces plasticity in the sensorimotor cortex in chronic stroke: A single-case study using multimodal imaging (fMRI-TMS). *Brain Injury*, 25(7–8), 787–793.
- Schauer, M., Steingruber, W., & Mauritz, K.H. (1996). The effect of music on gait symmetry in stroke patients walking on the treadmill. *Biomedizinische Technik*, 41(10), 291–296.
- Schneider, S., Munte, T., Rodriguez-Fornells, A., Sailer, M., & Altenmuller, E. (2010). Music-supported training is more efficient than functional motor training for recovery of fine motor skills in stroke patients. *Music Perception*, 27(4), 271–280.
- Schneider, S., Schonle, P.W., Altenmuller, E., & Munte, T.F. (2007). Using musical instruments to improve motor skill recovery following a stroke. *Journal of Neurology*, 254(10), 1339–1346.
- Schuppert, M., Munte, T.F., Wieringa, B.M., & Altenmuller, E. (2000). Receptive amusia: evidence for cross-hemispheric neural networks underlying music processing strategies. *Brain*, *123*, 546–559.
- Villeneuve, M., & Lamontagne, A. (2013). Playing piano can improve upper extremity function after stroke: Case studies. *Stroke Research and Treatment*, 2013, 159105. http://doi.org/10.1155/2013/159105
- Writing, A. (2015). *Advantages and Disadvantages of a MIDI keyboard*. Retrieved from http://www.ehow.com/list_6028161_advantages-disadvantages-midi-keyboard.html 04.09.2015.

Acknowledgement. The author wishes to acknowledge on this article the valuable comments and help from Edit Czeglédi.

Conflict of Interest Statement

The author declares that he has no conflict of interest.

Midicine: MIDI (Musical Instrument Digital Interface) eszközök alkalmazása orvosi célokra, sztrók-betegek kezelése során – áttekintő cikk

KOLLÁR JÁNOS

Elméleti háttér: A MIDI (a Musical Instrument Digital Interface rövidítése) billentyűs hangszerek és számítógép összekapcsolása révén keletkező elektronikus hangszerek összefoglaló neve. A MIDI-technológia alkalmazása segítségével, különböző szoftverek használata révén a gyógyulás iránti belső motiváció kiépíthető, illetve erősíthető sztrókon átesett betegek esetében. Célkitűzés: A tanulmány célja rávilágítani a MIDI-technológia alkalmazásának lehetőségeire és jelentőségére sztrókos betegek kezelése során. A szakirodalmi kutatás során feltett kérdések a következők voltak. 1. MIDI-alkalmazások segítségével milyen beavatkozások végezhetőek el sztrókos betegek esetében? 2. Milyen eredménnyel alkalmaznak MIDI-technológiát sztrókos betegek kezelése során? 3. Milyen MIDI-alkalmazások bizonyultak hatékonyaknak sztrókos betegek terápiája esetén? Módszerek: A kutatáshoz szükséges adatokat három adatbázis (PubMed, Scopus, Web of Science) szisztematikus átvizsgálása segítségével sikerült megszerezni. A keresés során alkalmazott kulcsszavak a következőek voltak: midi, musical instrument digital interface, stroke, cerebral accident, seizure. Eredmények: Összesen tíz olyan publikációt sikerült találni, amelyek megfeleltek a keresési feltételeknek. Ezek vizsgálata a beavatkozás típusa, a kezelés hossza, az eredmények, valamint az alkalmazott MIDI-eszközök szerint történt. Összesen 219 vizsgálati és 147 kontroll személy vett részt a kezelésekben. Következtetések: A kutatás eredményei szerint a MIDIeszközök sztrókos betegek kezelése során történő alkalmazásának skálája meglehetősen széles: a végtagrehabilitációtól kezdve a testtartásjavításon át a betegek életminőségének javításáig. A MIDI-technológia alkalmazása két fő ok miatt ajánlható; 1. az eszközök széles skálája és rugalmasságuk miatt, 2. a kezelések "gamifikációja" (játékossá tétele) révén a gyógyulás iránti belső motiváció építhető ki a betegekben. A MIDIalkalmazások további felhasználási lehetőségeinek felderítése további kutatások tárgyát képezheti. A MIDItechnológia orvosi alkalmazási lehetőségeinek közös elnevezésére a Midicine nevet javaslom.

Kulcsszavak: Midicine, sztrók, MIDI, MST, gyógyítás.