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The BAPNE Method: a New Approach and Treatment for Depressive Disorders

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Abstract

Depression is characterized by a decrease of the tone of the mood that is associated, as a rule, with a slowing down (hard or slight) of some cognitive functions (attention, perception, ideation) and with a decline of the psychomotricity. Recently some studies have shown that music and movement generate healthy effects to depressed patients. The aim of this research is to demonstrate that the method of body percussion BAPNE may be used as a possible means of rehabilitation for depression. This method, effective both at an interpersonal and an intrapersonal level, fosters the cognitive, social-emotional, psychomotor stimulation, and the start up of all the brain lobes. We expect the level of attention to be stimulated, as well as executive functions, ability to focus, self-confidence, visual-spatial abilities, with a consequent improvement of patient’s quality of life, decreasing of the stress, and suicidal risk.

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Keywords:

1. Introduction

Depression is a common mental disorder. The WHO estimates that more than 350 million people of all ages suffer from depression. The study conducted by the “European Study on the Epidemiology of Mental Disorders (ESEMeD, 2006) states that in Italy the Major Depression affects 11,2% of the population. Depression is characterized by a decrease of the tone of the mood that is associated, as a rule, with a slowing down (hard or slight) of some cognitive

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functions (attention, perception, ideation) and with a decline of the psychomotricity. The symptoms related to this disorder affect several boundaries of mental activity as mood, psychomotricity, thought and instinct. In its lighter forms, patients feel a continuous and pervasive feeling of bore, and they are not able to be involved in normal activities, and perceive a separation and an unsuitableness when they carry out a task during their everyday work. Their lowered concentration, the lack of initiative and the incapability to take decisions frustrate every try made to accomplish any task. In the acute phases, mood disorder is clear and it appears as deep sadness, moral pain, anguish, dismay associated with the loss of the usual *elan vital*; discouragement, nervousness and anxiety become pervasive and change into agony and internal tension. Psychologic pain is often so deep that it overcomes any other kind of pain. Even if depression could sometimes reveal itself with presence of agitation, psycho-motor slow down is to be considered the pivot-symptom and an effective predictor of the response to a somatic therapies' treatment. The slow down appears both with a slow down of spontaneous movements and a stiffening of gesturing that can configure a painfully unexpressive phase: language is not fluent anymore, variety of issues and contents becomes poor and answers are short, sometimes monosyllabic. In softer forms, the slow down can be hardly recognizable and be expressed just by a reduction of the motility and expressivity of the facial gesturing, by a slight weakening of the voice and a partial postural hypo-mobility. The slackening of higher psychologic functions can be so marked to provoke memory disorder to problems of attention and concentration that can generate problems of differential diagnosis with dementia. The notion of time is modified: its continuous flowing slows down until it stops: depressed people have the perception that the day is never-ending, and that it is impossible to reach the end of the day: "everything is still, stuck, with no possibility to be changed".

There are 3 types of therapy for the Depression's treatment, whose effectiveness has been proved: pharmacological therapy, psychotherapy, electroconvulsive therapy (Thase et al., 1997).

Among this different therapeutic approaches, Depression is one of the mental disorders for which are mostly used alternative therapies, as for example, music therapy and dance movement therapy (Ernst, Rand & Stevinson, 1998). The American Music Therapy Association (AMTA) defines Music Therapy as "an established health profession in which music is used within a therapeutic relationship to address physical, emotional, cognitive, and social needs of individuals", while the American Dance Therapy Association (ADTA) defines Dance Therapy as "the psychotherapeutic use of movement as the process that stimulates emotional, cognitive, social and physical integration of individuals" (ADTA, 2003).

Many researches have shown through the administration of evaluation test that the use of these therapies effects benefits at psychologic, emotional, neurological levels, as well as in relationships.

A pilot study revealed that "the DMT decreased the participants' measure of neuroticism and increased their levels of extraversion, secure attachment style and satisfaction with life. Significant, positive changes were also measured in the participants' ability to identify their feelings" (Punkanen, Saarikallio & Luck, 2014, p. 496).

The Music therapy," when added to standard care, has strong and significant effects on global state, general symptoms, negative symptoms, depression, anxiety, functioning, and musical engagement" (Solanki, Zafar & Rastogi, 2012, p. 196).

2. Aim

The aim of this research is to use BAPNE Method as a new approach and a new treatment for the depressive disorder.

2.1. The Body percussion in BAPNE method

The Body Percussion used in BAPNE Method takes from music therapy the link between music and emotions using chant, melody, and percussion, while it takes from dance therapy the link between movement and emotions, so that he integrates dance, movement, and choreography. This means that it is the patient himself to produce music by his own body, maintaining the pulse, moving in the space, and singing. Body percussion at a physical level stimulates a deeper consciousness of the body; at a psychologic level it stimulates the cognitive functions of memory, attention, concentration; at a social level it fosters relationship and it lowers the stress level of interaction.

3. Method

This method is based upon the Howard Gardner's "Multiple intelligences" theory, and it is supported by 5 disciplines: *biomechanics*, that is used to work on sagittal, horizontal and longitudinal planes; *anatomy*, used to develop dissociation of lower and upper extremities; *psychology*, used to understand thoughts and emotions involved in the learning process and in workgroup; *neurosciences*, used to switch on all the brain lobes, and finally *ethnomusicology*, used to explore all the different body sounds belonging to different cultures.

The BAPNE Method's aim is the individual's cognitive, socio-emotional and psycho-motor stimulation.

This study is intended as a pilot study; below is described the research protocol.

Patients will be randomly divided into two homogeneous groups: 30 patients will be treated with the BAPNE method and 30 patients belong to the group control. The activities will take place weekly (2 hours per week), for at least three months.

Selection criteria

Patient selection will take place according to these criteria:

1. certified diagnosis of depressive disorders
2. age (≥ 18)
3. consent given to join the BAPNE procedure

Rejection criteria:

1. presence of other psychiatric disorders
2. age (< 18)
3. consent not given
4. depressive disorders due to substance use or general medical condition

Test suggested

In agreement to doctors, it involves the administration of the following tests:

1. Batteria WS - Abilità visuo-spaziali nell'arco della vita adulta
2. d2-R Test di attenzione concentrata
3. BDI-II Beck Depression Inventory-II
4. Esame neuropsicologico breve 2
5. Wechsler Memory Scale

Team work

1. two trainers
2. doctors and psychologists
3. nurses and possible health care staff
4. volunteers

Objectives

1. *Therapeutic*: quality of life, mood, psychomotor skills, self-esteem, pleasure in activities, circadian rhythm
2. *Psychic*: attention, memory, motivation, flow
3. *Perceptual*: the perception of time and space
4. *Socio-affective*: intrapersonal and interpersonal communication, expression and body language, creativity
5. *Sensory*: body-consciousness, senses, motor control and body weight
6. *Physical*: coordination, dissociation, biomechanics, laterality, endurance, strength, breathing, balance, stretching.

4. Discussion

What is peculiar to a depressed patient is sadness, constraint, feel of guilt, apathy, inhibition of emotions and

narrow-mindedness. Through this method the person develops the ability to relate to others and to cooperate with them, as well as a sense of belonging to a group. The learning method creates an enjoyable situation where participants don't feel judged: this fosters the achieving of purposes, self-esteem and a greater consciousness of his own body. BAPNE method's exercises that we propose, use as a rule circle and double-circle settings since this generates confidence, acceptance, safety and it lowers competitiveness by a permanent visual-physical contact; at a cerebral level it favours the production of oxytocin, that is an affiliative hormone of social relationships, that has got antidepressive and anxiolytic action.

Working together to reach a common goal favours complicity and empathy among participants, and it gives the chance to feel bodily what it is being learned, and hence the main factors of depression are the strengths of BAPNE Method.

5. Conclusion

The results we expect to achieve, after at least an eight-weeks period of practice of the BAPNE Method are: an improvement of communication and body language, and of interpersonal relationships; a rise of the tone of his mood and psychomotricity; a renewed interest and pleasure in activities; a reduction of the level of stress and of suicidary risk with a consequent improvement in patient's quality of life.

We expect cognitive stimulation that is implicit in each exercise to forest a recovery of the performance and self-esteem of the person, improving his level of attention, memory, executive functions and visual-spatial abilities.

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