

Poetry therapeutic intervention in patients with postoperative cardio care

(scientific paper)

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Abstract: *The paper provides a description of options of the poetry therapeutic effective intervention in patients who have had myocardial infarction and staying within their rehabilitation at the spa. Author of this text himself after myocardial infarction had the opportunity to contact these clients in Teplice spa, the sanatorium Janacek. In the summer 2013 he realized a research in which he used his own poetic presentation to motivate and approach better personal contacts, and trust. Subsequently he held talks with individual clients, drafted, distributed and evaluated the questionnaire and he even motivated some clients to write their own poetic attempts.*

Keywords: *Myocardial infarction, coronary angioplasty, pacemaker, coronary arteries, implantable cardioverter-defibrillator, poetry therapy, coronary heart disease*

1 Introduction

The purpose of this paper is to introduce the professionals of special education and general public to the experience of the first poetry therapeutic intervention in patients after myocardial infarction. The aim of the author is also to organize the experience with regard to specifics of the clients. This specificity is determined not only “thanks to” surgical procedures, but also the senior age of most of the clients.

2 The clientele of the spa Teplice

The clientele of the spa sanatorium Janáček in Teplice consists of a large majority of patients who physically and mentally cope with the consequences of myocardial infarction. It is treated either conservatively in a smaller number of cases, or especially

in the last decades by interventional cardiology – coronary angioplasty. There are also patients who were treated with cardiac surgery for ischemic heart disease, or after surgery or prosthetic heart valves, or who have engaged in combined operations on the coronary vascular bed or flaps. Many patients physically and mentally cope with the necessary, but often initially negatively perceived intrusion into their body (life with a pacemaker, operations on the heart, implantable cardioverter-defibrillator...).

Fully healthy people do not go to “cardio spa” in the Czech Republic. This is due to lower capacity of spas and relatively little social awareness. This is surprising, because cardiovascular disease is also currently the leading cause of mortality of the inhabitants. A small percentage of relatively healthy clients use only the preventive educational visits, which are implemented in less lucrative winter months. A number of these patients have previously had heart problems (Špinar. J., Vítovec. J., 2007).

Some patients in the recovery period at the spa have occasional chest pain, the sweating, heart palpitations, shortness of breath sensations, tingling, numbness of teeth and more often atypical symptoms of disorders of the circulatory system. They are mostly elderly patients. Communication with them is difficult in some cases and reflects the specificities of social interaction occurring in verbal and non-verbal contact with the client with a disability or weakness at the senior age.

An important problem which this spa clientele faces is also a need for a permanent lifestyle change. Spa environment is an excellent training area for this change. A typical client should drop here their unwanted habits. They should get rid of smoking, excessive overeating, should regularly and responsibly take quite a considerable amount of medicine, should limit consumption of alcoholic beverages, should comply with certain procedural regimen. These are all factors to which the patient has to cope in the spa social environment.

In the sanatorium Janáček there are patients receiving a complete spa care which is covered by their health insurance company. The stay of these patients usually lasts for three weeks. There are also patients who pay for their spa treatments fully or partly. In addition to these clients, there are also users of relaxing hospital stay, which is fully paid by them. They usually accompany a relative who has significant health problems. These clients do not participate in further described poetry therapeutic investigation and intervention.

Most patients occupy twin rooms. For a fee (about 100 CZK) per day, however, the patient may benefit from luxuriously furnished room individually.

All clients are under constant medical supervision, undergo regular medical examinations, if necessary, they also have a psychologist and other professional spa staff, especially physiotherapists, dieticians and doctors specialists.

3 The realization of the research

The author has decided to implement his poetry therapeutic intervention in the second part of his three-week stay. First he had to arrange the necessary permits and other requirements and try to be known among patients. This required a certain amount of time. This initial entry phase could not be underestimated, as in the case of distrust and disinterest of the planned survey it would not be attended by the required number of clients. So the author for their easy identification of his person used the specific clothing (captain's hat + mostly striped sailor shirt) and soon achieved that the clientele of the sanatorium Janáček began to recognise him as "Captain".

In addition to the selected image, the captain also tried to familiarize himself with the greatest number of patients and used the regular dance parties, participated in numerous cultural events, and he also held quite often common singing with a guitar at the Colonnade. Before poetry therapeutic performance he prepared with cultural worker of the sanatorium color posters that contained a clear indication of all necessary information, including information that "musically poetic" Evening with the Captain will be free.

The actual poetry therapeutic show was conceived as primarily receptive, approximately one hour poetry therapeutic lesson. At the end of the 'lesson' the clients were asked to fill out a short questionnaire and write a poem themselves with a spa theme. Musical and poetic show with the captain was attended by approximately 40 clients of the sanatorium Janáček. Of those, only 27 were willing to fill out the questionnaire (16 men and 11 women). The average age of respondents was 68.4 years (men 67.2 years, women 69.3 years).

The concept of the musically poetic show has the traditional standard classification of individual parts. It means that the "lighter" and entertaining introduction was followed by a presentation of poems more complex, lyrically and symbolically challenging. The conclusion was again conducted in entertaining, playful spirit.

Creative poems of traditional concepts of poetry were used. It means melodic verses with frequent onomatopoeic color and rhyme. Some poems were accompanied by guitar and balalaika, the author also used expressively accented speech. At some stages of the performance he stepped on the chair, walked around the room and used various random objects, further emphasizing the effects of individual poems.

4 The evaluation of the questionnaire

The questionnaire items are mostly related to music and poetic show that patients just heard and saw. The regular contact and filter items were followed by questions that focused on acquiring the desired information and opinions. The following is

a summary of the most frequent and the most interesting answers, which the author received in the questionnaire survey.

- The survey showed that less than half of participants can recall from memory a poem of two or more stanzas. (10:15) (2× answer absent)
- The most popular poets are Wolker J., J. Seifert, K. J. Erben, J. V. Sládek
- The speech of the poet in the show was liked by a total of 15 respondents, only 10 liked the text of verses, 14 liked the rhymes of verses, 10 onomatopoeia, and 16 clients liked music
- The speech of the poet was not liked by a total of 1 patient, the text of verse 7 patients, rhymes of verse 3, and 1 onomatopoeia, music 0
- The question of whether the patient thinks their relationship to poetry after today's date changed positively, a total of 13 patients responded positively and 12 negatively.
- When asked whether they think that today's poetic show could be of rehabilitation assistance, 5 patients responded positively, 17 did not know and 4 responses were negative.

The most surprising fact for the author arising from the questionnaire responses was that the patients did not like the text of his poems. A more detailed analysis of the texts based on additional interviews with some of the patients revealed that they were not very optimistic poems with the theme of death. In these cases it did not help to lighten certain topics and the use of black humor. See, for example, the following used poem.

The death

*When the bells ring behind the white wall
When in the dome of the bed the bouquet will be added
In funnels of sins Holy See desulphurize
A people with incense on the roost of the ceremony
Nod their heads above the casket lid
Open your eyes and twist it into an arc
At the end of the undershot see mountain meadow!*

Smrt

*Až zvonky za bílou zdí zazvoní
Až v báni postele přibude kytice
V trychtýřích hříchů se odsíří svatá stolice
A lid s kadidly na hřadech obrádu
Zakývá hlavami nad víkem truhlice
Otevři oči a stoč je do oblouku
Na konci předkusu uvidíš horskou louku!*

Texts about the age did not get too much positive response. See the following example:

The time of houseleek

*Mated old woman fumitory in the common room
Cooked the old man gouged kohlrabi
Quenching thirst and spindle of life
Churned in the floor a solitary radish
Stooping under the hump grumbled at the fireplace
Wooden spoon into goo to make conversation
With crutches hobbled ... sl ... ow ... ly
From the prosthesis he created a loud willow*

Čas netřesku

*Spařila stařena zemědým v sednici
Vařil si stařeček vylouplou kedlubnu
Zhašena žízní a životem břemenem
Kvedlal si v podlaze ředkvičku samotku
Shrbena pod hrbem brumlala u krbu
Vařečku do břechy aby řeč nestála
S berlí se belhala...po...ma...lu
Z protězy utvořil hlasitou vrbu*

It has been shown that the most positive response was recorded when using gentle, simple and rhymed poems. Musical presentation of poems was also proven to be successful. In this case the author prior to the recitation of verses used the motif of the known French songs. See the following example:

Saint Michelle

*I went with a pet
Along the sun of Saint Michelle
Where Petr Janda went too
A lot Wents went – funny
Where people go in minor and major
I dreamt of Madame Pompadour
However, the Word rolled to us, darlings
And instead of randevous – ronda
Or perhaps a date
I was run over by another car
Your Belmondo's Honda*

Saint Michelle

*Šel jsem si s miláčkem
Po slunci Saint Michelle
Kde šel i Petr Janda
A šla spousta Šlů – sranda
Kde lidi chodí v moll a dur
Vysnil jsem madam Pompadoure
Však přetočil se nám miláčkům svět
A místo rande – ronda
Nebo snad rande – vous
Přejel mě jiný vůz
Tvá Belmondova Honda*

The participants of musically poetic show could later create poems with a spa theme. I here demonstrate that they prefer uncomplicated and rhymed poetry. See the following typical examples of the work of the patients of the sanatorium Janáček:

Spa, spa, spa, We have wonderful time here We're all friends We all like each other	Lázně, lázně, lázně Máme se tu krásně Jsme tu všichni kamarádi Máme se tu všichni rádi
Well I live in the spa Drinking the spa water I go to dances I'm having fun	Dobře si v lázních žiji Lázeňskou vodu piji Na tanečky chodím V pohodě se bavím
It is not just a coincidence The spa well-being Massages, exercise, baths And now it is better for the body	Není to náhoda Ta lázeňská pohoda Masáže, cvičení, koupele A hned je lépe po těle
I drink the spa water I will live up to a hundred years With good wine I will heal my soul	Lázeňskou vodu piji Do sta let se dožiji Při dobrém vínečku Vyléčím i dušičku

In the final stage of the investigation the author conducted with selected patients (snowball method) semidirected series of interviews, from which immediately after their completion he recorded the thoughts and ideas that intrigued him. He also took into account the frequency of similar and identical testimony, and he did not fail to notice especially ideas that were heard repeatedly in interviews.

5 The conclusion of the investigation

Poetry therapeutic intervention questionnaire and subsequent interviews showed the following. Patients of the sanatorium Janáček tend to prefer less “sophisticated” entertainment with an emphasis on musical elements. For the next poetry therapeutic intervention it is therefore necessary to make changes in the collection of texts of poems. The text of poems is monitored by patients despite repeated explanations that this part of poetry is not so important. During the poetry therapeutic presentation there should also be possible to find more space for more direct social and verbal

interaction with the audience. It means more explaining, for example, describing when and why the poem originated, what the author wanted to convey by poems, etc. It is not too ideal to present too long series of poems without a break.

The creation of these patients in the senior age, in terms of form, do not differ much from the poetic expressions of children of primary school age. However, patients in the poems inserted repeatedly the subject of their health. They can work with rhymes, but they cannot handle the rhythm of verse and use onomatopoeia. These elements should be therefore more stressed in possible further “poetry therapeutic performance”.

In the sanatorium Janáček many patients lack especially relaxing music during procedures. Poetic production, as an adjunct therapy, they cannot well imagine. During procedures they occasionally hear the radio and usually some pandering programs.

In the sanatorium Janáček there is no special education expressive therapy provided, as an adjunct treatment of cardiovascular problems. It seems, however, that the clients would be interested in such interventions. And despite the fact that education and patient awareness of this area of supportive care are slim, the relatively long intervals between treatments would allow the insertion of expressive therapies.

The offer of cultural events that take place mostly in the evening, is rich and is positively perceived by most patients. In some cases, performers do not consider specifics of spectator clients (especially inappropriate volume of the production – either too loud or too quiet ...).

Some patients have complained to their roommate. Coexistence in some cases showed features of bullying. In the sanatorium patients have the option of anonymous communication about their difficulties or visit a psychologist, but in most cases they are shy to use these options. For these “impaired” patients a visit of any cultural show was a welcome escape from unpleasant reality of spa rooms.

6 Literature

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