Therapy dogs may unlock health benefits for patients in hospital ICUs

While therapy dogs have long been welcomed as “nonpharmaceutical interventions” for some hospitalized patients, their use with those who are critically ill is new for many hospitals.

Writing today in the journal Critical Care, Johns Hopkins rehabilitation and ICU experts conclude that a therapy animal is “a great exemplar” of nonpharmacological interventions that can help ICU patients become active and engaged in their recovery as early as possible.

“Doctors and nurses have traditionally been of the mindset that if we just give patients the ‘right’ medication, their psychological status will improve,” says Dale Needham, a professor of medicine and of physical medicine and rehabilitation at the School of Medicine and senior author of the new editorial. “In fact, we probably need to give less medicine and rely more on nonpharmaceutical interventions, such as music therapy, relaxation training, and animal-assisted therapy to help improve patients’ psychological status.”

ICU patients, the specialists say, often require mechanical ventilators to breathe, feeding tubes, catheters, and an array of other technology that “dehumanizes” and demoralizes them. In addition, ICU patients may be sedated and restricted to bed rest, adding to their risks of muscle weakness, confused thinking, depression, anxiety, and post-traumatic stress disorder.

Studies show that up to 80 percent of ICU patients have delirium—characterized by inattention, disorientation, confusion, and sometimes hallucinations—during their stays, while evidence is growing that the risk of developing these conditions eases among patients who are more active and less medicated.

Always searching for ways to engage patients in their own medical care and to humanize

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True crime and the rise of the docudrama

Film and Media Studies Director Linda DeLibero discusses the growing appeal of true crime storytelling on TV and the future of the genre

When filmmaker Errol Morris extracted a taped confession from death row inmate David Harris for the murder of a Dallas police officer in 1976, he not only cleared an innocent man for the crime—he made documentary history and helped shape the true crime genre into what it is today.

These days, the line between fiction and nonfiction, drama and reality has blurred. Whether it’s millionaire Robert Durst blurring out an apparent confession between belches on a hot mic in a hotel bathroom for HBO’s *The Jinx*, or a near shot-for-shot recreation of the murder trial and media circus for FX’s *American Crime Story: The People V. O.J. Simpson*, or the Netflix meta-documentary *Casting JonBenet* that cashes in on a 6-year-old pageant queen’s murder while toeing the line of exploitation, the genre has distorted its relationship to truth, and attracted scores of viewers along the way.

For insight on the popularity of true crime and the appeal of blockbuster “prestige” true crime storytelling, the Hub reached out to Linda DeLibero, director of the Program in Film and Media Studies at Johns Hopkins University.

Here’s what she had to say:

How has the genre of the docudrama evolved over time?

Linda DeLibero (LDL) For the last 50 years, people have taken pains to think seriously about what documentary means, and what truth means, and what reality means. Documentaries that have fictionalized reenactments have been around for a long time, but they have always been controversial among documentary filmmakers because they don’t represent “The Truth.” To insert elements of drama into a format like documentary—is that fair game? Does that undermine the whole project of trying to show the world as it is?

Errol Morris was probably the most notorious example of this kind of filmmaking. *The Thin Blue Line* is a really pivotal event in documentary film history, because it was not only full of reenactments, but it also changed the course of the subject’s life and uncovered a truth that would have otherwise gone unnoticed. The question then becomes, Can we make a difference? And if you can make a difference, then reenactment and this display of what you’ve investigated is fair game.

Now we’re at the point where some of these documentaries are very purposefully aimed at making a difference, like *The Keepers*. I think both the strength and the weakness of *The Keepers* was that it had a mission, but that it also wanted to tell this compelling story. Sometimes those different strands didn’t connect.
Main text:

**What explains their popularity now?**

**LDL** As with any commercial products, the motives of documentary filmmakers are necessarily mixed. You have to sell this, you have to make it popular, and you’re going to honor the people who you’re covering, or you’re going to use them—or both. And that’s the difficulty.

These fictionalized accounts can some of those problems. If you have actual people testifying in your movie, that can be exploitative. This way, if you get permission from the Versace family beforehand, for example, and Donatella’s signed the release forms—you’re done, you’re free to create.

I think the primary motive behind these shows like *American Crime Story* and any other fictionalized rendering of crimes—people want to see crime, and they don’t want to see things that didn’t really happen.

There is this real desire to feel that what you’re witnessing is something true, and what’s happened in the entertainment industry since the advent of the Internet has only made this impulse grow.

**What else do these shows reveal about our culture?**

**LDL** These shows present hot button issues in a way that’s a lot more palatable than watching *Meet the Press*. I think it taps into viewers’ emotional reactions—it probably makes people think they’re watching something educational as well as entertaining. And I don’t dispute that, if the shows are done well.

For younger audiences, this is a chance for them to get their history. There’s no reason any of my students would have even heard of David Koresh or Waco or what happened there. But they can watch Waco and be introduced to issues that are still hot button issues today and that are packaged as entertainment, full of fascinating characters and critical dilemmas.

The people who make these shows speak about the historical underpinnings of the issues at play in the stories. For example, the producers of *American Crime Story: The Assassination of Gianni Versace* are always talking about how the show takes place in a time when being gay in America was still problematic and there was a demimonde where things were going on that were not mainstream. They’re presenting this as a way of revealing gay history that many viewers may not know about. That’s the hook.

There’s something about that that feels a little more virtuous, and a little more important—it’s no longer mindless entertainment.

**What do you see as the future of the genre?**

**LDL** I hate to say it as a film lover, but film is going to have to figure out how to compete with television. You can no longer say that what’s going on in television is less prestigious, cutting-edge or interesting than what’s going on in film.

Film is no longer where people are getting their bold, artful dramas. It’s television now, and it’s the Wild West. You can explore topics in depth, that’s the difference—you get eight to 10 hours to develop characters and story lines. These are stories that people don’t look at as “T.V.” This is something else. It’s important.

This news cycle—when every single day something unprecedented happens, to the point of when we’ve become inured, paralyzed from being able to do anything, you have these shows that are regurgitations of things that gosmacked people decades ago, and you’re giving them something that they didn’t know about before. And there’s the convergence of a lot of changes in the industry, such as the number of top talent actors, writers, and producers who are working in television now. There’s an onus on these people to produce stories that are important—the way that film once was considered to be.

—*Saralyn Cruickshank for the Hub*
Therapy dogs

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the ICU, rehabilitation psychologist Megan Hosey, an assistant professor of physical medicine and rehabilitation at the School of Medicine, saw how successful animal-assisted therapy was in the inpatient rehabilitation unit at Johns Hopkins. Patients who participated in animal therapy were able to meet goals faster by involving the animals—standing for longer periods of time while patting a dog, for instance.

Speculating that similar benefits could occur among ICU patients, Hosey worked with ICU physician Needham and other experts to adapt the hospital’s protocol to safely bring dogs to ICU patients who could benefit.

All dogs involved in animal therapy programs at Johns Hopkins must be registered through a program called Pet Partners, which ensures that both handlers and dogs are up to date on training. To qualify for visits, patients must be awake and alert enough to engage calmly with a dog, not at high risk of infections, and be interested in having a dog visit. The typical length of stay in the Johns Hopkins medical ICU is a few days. The 10 patients who received visits from dogs in 2017 ranged in age from their 20s to their 80s, with a variety of medical diagnoses. Each patient had at least one 20- to 30-minute visit from a therapy dog while in the medical ICU.

In a few instances, the animal therapy included a physical therapist or occupational therapist to pair physical rehabilitation with the dog visit and achieve specific functional goals.

“The data from a psychological perspective shows that building motivation to become more active, for example, is a way dogs can help patients,” says Hosey. “Once you have a dog in the room staring up at you expecting a treat or a pat, it’s hard for a patient to avoid engaging.”

In other cases, a dog may simply sit on a patient’s lap, providing a calm, affectionate presence that has been shown to improve mood and pain ratings.

Given the positive response from patients, the team plans to measure pain, breathing rate, and mood in the future.

The editorial makes the case, Hosey says, that other hospital ICUs and other hospital units should consider nonpharmacological interventions including therapy dog visits. She says hospitals considering such therapies need to set clear program goals, include stakeholders who can help overcome barriers, and partner with a program such as Pet Partners or Assistance Dogs International that have credibility in certifying animals. Moreover, launching the program with patients who have the highest likelihood of success and improvement—not those with delirium or communicable diseases, for instance—is recommended.

—Marin Hedin for The Hub
A Record Crowd

On December 14, 2017, 300 retirees gathered at the Annual Holiday Party in the Glass Pavilion. This was a record number of attendees! Guests enjoyed a scrumptious buffet catered by Zeffert & Gold. They listened to lively music from Good Vibrations DJ and took fun pictures in a photo booth. Thank you to all who brought hats, gloves, and mittens for our Adopt-a-Family Program!

Raffle prizes included:
- Assorted four-pack of Organic Raw Dark Chocolate
- Gift Certificate $50: Plant boutique & gift shop
- Mindfulness on the Go Cards
- Parts & Labor Restaurant & Butchery $50 Gift Certificate
- JHU Press books about history, politics, and arts & entertainment

We are looking for a larger venue for the 2018 holiday party to accommodate greater numbers of retirees. Stay tuned for details.

Johns Hopkins grad programs ranked among nation’s best by ‘U.S. News’

Johns Hopkins University graduate programs in biomedical engineering, nursing, and medicine are once again among the country’s very best, according to the annual U.S. News & World Report ranking of the nation’s Best Graduate Schools.

The biomedical engineering program landed again in the No. 1 spot, which it has long held. The School of Nursing’s master’s degree programs rose to first place, while the School of Medicine moved up to second place among research-oriented medical schools. Its internal medicine program is tied with Harvard University for the No. 1 spot.

The School of Education ranked 17th and the Whiting School of Engineering moved up for the fourth consecutive year to 18th overall.

Other disciplines, such as public health and the sciences, humanities, and social sciences, were not newly ranked this year. U.S. News will continue to use rankings from earlier years in those fields until they are ranked again.

The U.S. News Best Graduate Schools rankings, released March 19, are based on indicators including an institution’s global and national reputation, publications and citations, research statistics, admitted student information, and other factors.

Additional rankings
In addition to the top-rated biomedical engineering program, other engineering specialties ranked. The university ranked 34th for public affairs, tied with nine universities.

Visit https://hub.jhu.edu/2018/03/20/us-news-grad-program-rankings-2018/ to read the full article.

—Jill Rosen for The Hub
Join your fellow Johns Hopkins retirees for a tour of historic downtown Frederick, Maryland. Trained, experienced tour guides from Heritage Frederick will board our bus and guide our group back in time through 300 years of Frederick history. The tour guides will lead us through Frederick’s historic district and past some of its most notable landmarks, such as Francis Scott Key’s memorial, the National Road, Hood College, and the Hessian Barracks. This tour is an opportunity to learn and view Frederick’s past in comfort. This trip will begin with a 30 minute tour of the Museum of Frederick County History.

**Retiree Event:**

**Historic Frederick Step-On Tour**

**Date**
Tuesday, May 3, 2018
8:30a.m. to 4:00p.m.

**Itinerary**
8:30a.m. – Depart from JHU at Eastern
10:00a.m. to 10:30a.m. – Museum Tour
10:30a.m. to 12:00p.m. – Historic Frederick Bus Tour
12:00p.m. to 2:00p.m. – Lunch at Local Restaurant
2:30p.m. – Depart from Museum of Frederick County History

**Cost**
$12 per person

**Food**
Attendees are free to choose a lunch venue of their choice in downtown Frederick. A list will be provided.

**Bus Transportation and Parking**
The bus will depart Johns Hopkins at Eastern (1101 E. 33rd Street) from the lower parking lot, off of Loch Raven Blvd. A bathroom is available on the bus. You may leave your car parked in this lot all day; please record your vehicle information to the right.
**Please join us!**

Please RSVP by Thursday, April 26, 2018 by mailing the information below to Essence Pierce at the Office of Work, Life and Engagement, Johns Hopkins at Eastern, 1101 East 33rd St., Suite C100, Baltimore, MD 21218. PLEASE MAKE CHECK PAYABLE TO: Johns Hopkins University

Call 443-997-7000 if you have questions.

Name: ____________________________________________________________

Daytime phone: __________________________ Mobile phone: __________________________

Email address: ______________________________________________________

Name of guest (one per retiree): __________________________________________

Please provide the following information to park your car at Johns Hopkins at Eastern:

Tag Number ______________ Make ______________ Model ______________ Color ______________
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