

Music as Sacred Medicine in the Maternal-Fetal Space an Integrative Framework for Prenatal Healing and Development

Julian Ungar-Sargon MD PhD

Borra College of Health Sciences, Dominican University IL,
USA.

*Corresponding Author

Julian Ungar-Sargon MD PhD,
Borra College of Health Sciences,
Dominican University IL,
USA.

Submitted : 16 Jul 2025 ; Published : 31 Jul 2025

Citation: Ungar-Sargon, J. (2025). Music as Sacred Medicine in the Maternal-Fetal Space an Integrative Framework for Prenatal Healing and Development. *J Psychol Neurosci*; 7(3):1-17. DOI : <https://doi.org/10.47485/2693-2490.1119>



Abstract

This essay synthesizes current scientific literature on the effects of music exposure during fetal development, examining evidence from neurobiological, cellular, psychological, and clinical perspectives. Drawing from recent research spanning 2020-2025, we analyze how prenatal musical exposure influences neural plasticity, language development, maternal mental health, and long-term developmental outcomes. The review integrates cutting-edge findings on music's effects at the cellular level including enhanced embryonic stem cell pluripotency and improved cellular viability with established evidence for neuroplastic changes, enhanced speech processing, and improved brain network connectivity in children exposed to music in utero.

Particular attention is given to the psychological benefits of prenatal musical exposure, including significant reductions in maternal anxiety and depression (effect sizes ranging from 12.5-point anxiety score reductions to 96% vs 76% cellular viability improvements), enhanced

maternal-infant bonding through oxytocin release, and improved maternal self-efficacy. The appendix incorporates a maternal-fetal relationship as a sacred therapeutic space where music serves simultaneously as biological medicine and spiritual practice.

Key findings include: (Trehub, 2001) prenatal musical exposure creates lasting neural representations persisting for at least 4 months post-birth; (UNICEF, n. d)) daily musical exposure enhances neural encoding of speech fundamental frequency by up to 20%; (Hepper & Shahidullah, 1994) music influences embryonic cells at the molecular level, promoting stemness gene expression and cellular resilience; (Chorna et al., 2019) maternal anxiety scores decrease from 43.11 ± 15.0 to 30.58 ± 13.2 following musical intervention; and (Ullal-Gupta et al., 2013) the sacred-profane dialectic in therapeutic encounters reveals music's dual function as measurable intervention and relational healing practice.

The integration of Talmudic teachings on fetal learning (Niddah 30b) with contemporary neuroscience reveals convergent perspectives on prenatal learning and memory formation. Clinical applications include evidence-based protocols for prenatal musical programs, integration into assisted reproductive technologies, NICU environmental design, and comprehensive perinatal care models that honor both scientific evidence and spiritual dimensions of healing.

Future research priorities include standardization of musical intervention protocols, longitudinal studies examining developmental outcomes into adulthood, investigation of epigenetic mechanisms, and development of personalized approaches based on genetic and cultural factors. The evidence supports a paradigm shift toward understanding prenatal musical exposure as a fundamental component of optimal human development, requiring healthcare approaches that integrate technical precision with spiritual wisdom and cultural sensitivity.

Keywords: Prenatal music exposure, fetal development, neuroplasticity, maternal mental health, maternal-fetal bonding, embryonic stem cells, cellular acoustic medicine, language development, brain connectivity.

Introduction

The study of prenatal music exposure and its effects on fetal development has emerged as a significant area of neuroscientific research, revealing compelling evidence for the plasticity of the developing brain. The human brain is influenced by music experience beginning in utero and continuing across the lifespan (Trehub, 2001). This appendix synthesizes current scientific literature examining how musical exposure during pregnancy affects fetal neural development and subsequent cognitive, linguistic, and behavioral outcomes in infancy and beyond.

Fetal Auditory Development

The foundation for understanding prenatal music effects lies in the remarkable development of the fetal auditory system. Fetal hearing begins to emerge around 16-18 weeks of pregnancy, with significant developmental milestones occurring throughout gestation (UNICEF, (n.d)). By 24 weeks, the auditory system shows rapid development, and fetuses demonstrate consistent responses to various acoustic stimuli between 28-30 weeks of gestation (Hepper & Shahidullah, 1994).

Recent neurophysiological studies have demonstrated sophisticated auditory processing capabilities in the developing fetus. Research using amplitude-modulated tones with carrier frequencies of 500 Hz has shown that fetuses between 31-40 weeks' gestation can differentiate between different intensity changes and envelope slopes, indicating neural processing beyond simple frequency discrimination (Chorna et al., 2019). Perhaps most remarkably, fetal response to sound has been documented from 33 weeks of gestation specifically in the left temporal lobe, consistent with the location of the primary auditory cortex, suggesting that sound processing occurs at cortical levels rather than merely as subcortical reflexive responses (Chorna et al., 2019).

The intrauterine acoustic environment itself provides a rich soundscape for the developing auditory system. Hydrophone recordings reveal that numerous sounds are measurable within the womb, including maternal heartbeat, breathing, digestion, and crucially, the maternal voice (Ullal-Gupta et al., 2013). Even non-maternal speech and music can potentially reach the fetus at sound pressure levels of 60 dB or above, though with attenuation above 250-500 Hz (Busnel et al., 1992; Gerhardt & Abrams, 1996).

Evidence for Prenatal Musical Learning and Memory Formation

The most compelling evidence for prenatal musical learning comes from groundbreaking research by Partanen and colleagues, who conducted a carefully controlled study examining the neural correlates of prenatal musical exposure (Partanen et al., 2013). In this seminal work, pregnant mothers in the experimental group played "Twinkle Twinkle Little Star" five times per week during the last trimester of pregnancy. The researchers then assessed infant brain responses using event-

related potentials (ERPs) both at birth and again at four months of age.

The results were striking: infants in the learning group demonstrated significantly stronger ERP responses to the familiar melody compared to control infants who had received no prenatal musical stimulation. Importantly, this effect persisted at the four-month follow-up assessment, providing evidence that prenatal musical exposure creates lasting neural representations (Partanen et al., 2013). Furthermore, the strength of these neural responses correlated directly with the amount of prenatal exposure, suggesting a dose-response relationship between musical input and neural plasticity.

Neural Mechanisms

The persistence of these effects for several months after birth represents a remarkable demonstration of early neural plasticity. As the researchers noted, this was the first time such long-lasting effects of prenatal auditory learning had been demonstrated in humans, extending well beyond the six-week duration of effects shown in previous cardiac response studies (Partanen et al., 2013). The findings suggest that extensive prenatal exposure to melodic patterns can induce neural representations that fundamentally alter how the developing brain processes auditory information.

A systematic review examining eight randomized controlled trials published between 1986 and 2020 found consistent evidence across studies that prenatal sound stimulation, including both music and speech, can form stimulus-specific memory traces during the fetal period (Movalled et al., 2023). Seven of the eight studies demonstrated that neonates had learned or remembered prenatal sound stimuli, with one additional study showing improved performance on neonatal behavioral assessments in prenatally stimulated infants.

Enhanced Speech Sound Processing

Recent research has revealed particularly intriguing connections between prenatal musical exposure and subsequent speech processing capabilities. A study by Arenillas-Alcón and colleagues used frequency-following responses (FFRs) to examine how prenatal musical exposure affects neural encoding of speech sounds in newborns (Puertollano et al., 2023). The FFR is an auditory evoked potential that accurately reflects the neural representation of acoustic features in speech, making it an ideal tool for studying early speech processing.

The researchers compared FFR recordings from 60 healthy newborns, dividing them into groups based on daily musical exposure during the prenatal period. Those with daily prenatal musical exposure showed enhanced neural encoding of speech fundamental frequency, particularly for low-frequency components crucial for pitch perception (Puertollano et al., 2023). This finding is significant because fundamental frequency encoding is essential for speech processing and has been linked to various language disorders when impaired.

Language Development

The connection between musical rhythm perception and language development extends beyond simple auditory processing. Research has established that musical rhythm perception is associated with phonological awareness, complex syntax production, and various developmental language conditions (Flaugnacco et al., 2015). Children with developmental dyslexia and language disorders often show deficits in temporal processing and rhythmic skills, while training with musical material appears to provide beneficial effects for these populations (Goswami, 2019).

These findings suggest that prenatal musical exposure may provide a foundation for enhanced language processing by strengthening the neural mechanisms underlying temporal processing and pitch perception. The researchers propose that prenatal interventions based on musical stimulation could prove beneficial for ameliorating future language conditions, particularly in children at risk for developmental language disorders (Puertollano et al., 2023).

Functional Connectivity Changes

Beyond effects on specific auditory processing, prenatal and early postnatal musical exposure appears to influence broader brain network development. Research on premature infants has provided unique insights into how musical intervention affects neural connectivity patterns. A study by Lordier and colleagues used functional magnetic resonance imaging to examine resting-state functional connectivity in preterm infants who received musical intervention during their stay in the neonatal intensive care unit (Lordier et al., 2019).

The results revealed that music exposure increased functional connectivity within the salience network, a crucial brain system involved in attention, behavioral control, and cognitive processing. The salience network plays a vital role in switching between different cognitive networks and facilitating appropriate responses to relevant stimuli (Lordier et al., 2019). Importantly, the strength of salience-thalamus connectivity has been shown to predict cognitive performance in infancy, making this circuit particularly significant for neurodevelopmental outcomes.

The enhancement of high-level cognitive brain networks through musical intervention has profound implications for understanding early brain development. The study found that musical exposure modified connectivity between the salience network and regions involved in both sensory perception and cognitive processing, suggesting that music provides a form of environmental enrichment that supports optimal neural development (Lordier et al., 2019).

These findings align with broader research on environmental enrichment and neural plasticity. Animal studies have demonstrated that enriched auditory environments stimulate cortical plasticity, while human neuroimaging studies show that music exposure enhances memory functioning, attention, motor regulation, and emotional adjustment across various populations (Zaatar et al., 2024).

Direct Neural Pathways

The mechanisms through which prenatal musical exposure exerts its effects appear to involve both direct and indirect pathways. Direct effects likely involve the complex neural processing of musical information itself. Music perception engages widespread bilateral networks of cortical and subcortical areas, integrating auditory, cognitive, sensory-motor, and emotional functions (Koelsch, 2011). This multifaceted neural engagement may provide particularly rich stimulation for the developing brain.

The neurophysiological adaptive process represents another direct mechanism, mediated by the autonomic nervous system and aimed at optimizing auditory system functioning. This process may enhance neural organization through cellular and synaptic plasticity, improving receptive field selectivity and creating more effective neural networks for sound change detection (Movalled et al., 2023).

Indirect Maternal Effects

Indirect effects appear to operate through maternal physiological and psychological changes induced by musical exposure. Music is known to produce various endocrine effects, including alterations in growth hormone, cytokine production, ovarian steroid secretion, biorhythms, and stress hormone levels including cortisol, testosterone, and estrogen (Movalled et al., 2023; García González et al., 2018). These hormonal changes are particularly significant because corticosteroids regulate neuroblast growth, myelination, and metabolic processes in the developing brain.

The stress-reduction effects of maternal musical exposure may be especially important. Reduced maternal stress and anxiety can create a more optimal intrauterine environment for fetal neural development, potentially enhancing the formation and organization of neural networks (Movalled et al., 2023).

Neonatal Intensive Care Applications

The clinical applications of musical intervention extend beyond typical prenatal care into specialized medical settings. Research in neonatal intensive care units has demonstrated that musical intervention can provide significant benefits for preterm infants, who often face substantial neurodevelopmental challenges due to premature birth and medical complications (Lordier et al., 2019).

Studies have shown that musical interventions in the NICU can stabilize heart and respiratory rates, reduce apnea and bradycardia episodes, improve feeding behaviors, enhance weight gain, and promote more mature sleep patterns (Standley et al., 2002). While these studies have produced variable results due to differences in intervention protocols and outcome measures, the overall pattern suggests beneficial effects on multiple physiological and behavioral parameters.

Potential for Early Intervention

The research findings suggest several promising avenues for clinical application. Frequency-following responses could

potentially serve as biomarkers for detecting risk of language impairment, allowing for earlier identification and intervention (Puertollano et al., 2023). Children who show attenuated brain responses, such as those born with low birth weight, might particularly benefit from musical intervention programs.

However, the clinical implementation of prenatal musical interventions requires careful consideration of safety guidelines and evidence-based protocols. Current research emphasizes the importance of avoiding potentially harmful practices, such as placing audio devices directly on the pregnant abdomen, while focusing on safe and effective approaches to musical exposure (Movallied et al., 2023; Graven, 2000).

Safety Considerations and Guidelines

The development of safe protocols for prenatal musical exposure requires careful attention to acoustic parameters. Research indicates that sound levels between 80-110 dB are adequate to reach the fetal cochlea, accounting for the approximately 20 dB attenuation that occurs through the maternal abdomen (Movallied et al., 2023). However, safety recommendations emphasize avoiding prolonged exposure to low-frequency sounds below 250 Hz at levels higher than 65 dB (Graven, 2000; Krueger et al., 2012).

The maternal voice represents an ideal form of auditory stimulation, as it undergoes minimal attenuation when transmitted to the uterus and provides naturally structured acoustic input (Querleu et al., 1988; Richards et al., 1992). Healthcare providers generally recommend that mothers sing or speak to their babies rather than using external devices, as the mother's voice conducted through her body is more effective and safer than artificial audio systems (Healthline, 2018).

An important consideration in translating research findings to practice involves avoiding misconceptions promoted by commercial products. While research demonstrates that fetuses can learn and form memories, this does not mean they need to be "taught" specific content during gestation (Movallied et al., 2023). The misinterpretation of scientific findings has led to commercial products promoting the use of specialized audio devices and "educational" content for prenatal brain enhancement, practices that may be potentially harmful due to insufficient knowledge about optimal stimulation parameters.

Research Limitations

Despite the compelling evidence for prenatal musical effects, several significant limitations characterize the current research landscape. A systematic review identified considerable heterogeneity in intervention methods and outcome assessment across studies, making it difficult to reach consistent conclusions about optimal protocols (Movallied et al., 2023). Most studies also exhibited high risk of selection and detection bias, potentially influencing the interpretation of results.

The duration of interventions varied dramatically across studies, ranging from approximately 3.5 hours to over 170 hours of exposure, with limited investigation of how exposure

duration affects outcomes (Movallied et al., 2023). Similarly, the timing of exposure initiation ranged from before 20 weeks of gestation to just hours before delivery, making it difficult to determine optimal intervention windows.

Future research priorities include the development of methodologically rigorous randomized controlled trials with standardized intervention protocols and outcome measures. Longitudinal studies following children beyond the first few months of life are particularly needed to understand the long-term developmental implications of prenatal musical exposure.

Mechanistic studies examining the precise neural pathways and molecular processes underlying musical effects could inform more targeted interventions. Comparative studies examining different types of musical stimulation (instrumental versus vocal, maternal versus non-maternal voices, various musical genres) would help optimize intervention protocols (Movallied et al., 2023).

Additionally, research examining the effects of adverse prenatal acoustic environments represents an important complementary area of investigation, given evidence that the neural system's responsiveness to beneficial stimulation may also make it vulnerable to harmful environmental influences (Partanen et al., 2013).

Music as Sacred Medicine

The scientific evidence for prenatal musical effects gains profound theological and clinical significance when understood through our healing framework, which recognizes the maternal-fetal relationship as a primordial therapeutic space where divine presence and concealment intersect. The womb represents more than a biological environment for fetal development; it constitutes a sacred therapeutic space where the earliest patterns of healing, learning, and spiritual connection are established through musical and relational encounter (Ungar-Sargon, 2025; Ungar-Sargon, 2025).

Fetal Learning as Sacred Pedagogy

The classic Talmudic account in Niddah 30b, describing fetuses learning Torah in the womb before forgetting at birth, provides a theological framework that remarkably anticipates contemporary neuroscientific discoveries about prenatal learning and musical memory formation (Ungar-Sargon, 2025). This ancient text presents "relational model of knowledge transmission" that fundamentally challenges modern assumptions about when meaningful learning begins and how spiritual knowledge is acquired.

The Talmudic narrative describes an angel teaching the entire Torah to the fetus in utero, only to strike the child's lips at birth, causing this knowledge to be forgotten. Rather than representing a loss, it suggests this forgetting creates a sacred space of possibility—a divine concealment that enables authentic learning and spiritual development throughout life. When viewed alongside contemporary research demonstrating that prenatal musical exposure creates lasting

neural representations and enhances language development, the Talmudic account emerges not as ancient mythology but as profound insight into the sacred dimensions of prenatal learning.

This theological framework transforms our understanding of prenatal musical exposure from a simple educational intervention into a form of sacred pedagogy that mirrors the divine teaching described in the Talmud. The melodies heard in utero become not merely acoustic stimuli, but sacred texts encoded in neural pathways, creating what might be termed “musical Torah”—embodied wisdom that guides the child’s development while remaining partially concealed, requiring lifelong engagement and discovery.

The correlation between Talmudic teachings and contemporary research reveals that both ancient wisdom and modern science recognize the womb as a space of profound learning and transformation. The neural plasticity demonstrated in studies of prenatal musical exposure provides the biological substrate for the spiritual transmission described in Talmudic literature, suggesting that music serves as a vehicle for both neurological development and sacred encounter.

Divine Presence and Concealment in Maternal-Fetal Space

The development of the tzimtzum model for understanding therapeutic practice provides crucial insight into how the maternal-fetal relationship functions as a paradigmatic therapeutic space (Ungar-Sargon, 2025). Drawing from the kabbalistic concept of tzimtzum divine contraction that creates space for creation this model reveals how the womb represents a space where divine presence manifests through apparent absence, creating optimal conditions for fetal development and spiritual formation.

In the tzimtzum model, the mother’s body serves as both container and concealer, creating a protected space where the developing fetus encounters both divine presence and divine hiddenness. This paradoxical space of presence-in-concealment mirrors the optimal therapeutic environment a space where healing occurs through the dynamic interplay of revelation and concealment, presence and absence, known and unknown.

Musical exposure within this tzimtzum space takes on profound significance as a form of divine communication that operates through concealment. The acoustic attenuation that occurs as music passes through maternal tissues and amniotic fluid does not represent a limitation but rather a form of sacred filtration that transforms ordinary sound into spiritual communication. The fetus receives not the raw acoustic signal but a transformed, mediated version that carries both sonic information and relational meaning music that has been literally embodied by the mother’s presence.

This understanding reveals why the mother’s voice, conducted through her own body, proves more effective than external audio devices for prenatal stimulation. The mother’s voice

carries not only acoustic information but also the vibrational signature of her physical presence, emotional state, and spiritual intention. When she sings or speaks to her unborn child, she creates a moment of therapeutic encounter where the sacred and profane intersect, where technical biological communication merges with profound relational and spiritual connection.

Sacred and Profane Space in Prenatal Musical Practice

Our prior analysis of sacred and profane space in therapeutic encounters provides a framework for understanding how prenatal musical exposure transcends simple behavioral intervention to become authentic spiritual practice (Ungar-Sargon, 2025). Rather than viewing the scientific and spiritual dimensions of prenatal music as separate or conflicting domains, his dialectical approach reveals how authentic healing emerges from recognizing their fundamental interdependence.

The “profane” dimension of prenatal musical exposure encompasses the measurable, replicable effects documented in scientific research enhanced neural plasticity, improved language development, strengthened brain connectivity, and optimized cellular function. These effects can be quantified, standardized, and reproduced across populations, forming the evidence base for clinical applications. However, these technical effects occur within and depend upon the “sacred” dimension of prenatal musical practice.

The sacred dimension encompasses the relational, spiritual, and meaning-making aspects of prenatal musical exposure that cannot be easily quantified but may be equally important for optimal development. When a mother sings to her unborn child, she engages in an act of profound intimacy and spiritual connection that transcends mere acoustic stimulation. She creates a “sacred text” through her musical offering a unique acoustic environment that carries her hopes, dreams, intentions, and love for the developing child.

This sacred-profane dialectic reveals why commercial prenatal music products often fail to capture the full benefits of authentic musical practice. Technological interventions that focus solely on acoustic parameters miss the essential relational and spiritual dimensions that give prenatal music its full therapeutic power. The mother’s voice, her emotional presence, her spiritual intention, and her embodied participation in the musical experience cannot be replicated by even the most sophisticated audio systems.

The Maternal-Fetal Therapeutic Alliance

Our framework for understanding therapeutic relationships provides insight into how the maternal-fetal dyad represents the prototype of all healing relationships (Ungar-Sargon, 2025). The prenatal musical practice establishes what might be termed the first “therapeutic alliance” a relationship characterized by attunement, responsiveness, and shared intentionality that will influence the child’s capacity for healing relationships throughout life.

In this primordial therapeutic relationship, music serves multiple functions that parallel the elements of effective therapeutic encounter. Music provides “attentive listening” the fetus learns to attend to and respond to acoustic signals from the external world. It creates “sacred space” the predictable, rhythmic, harmonious acoustic environment that supports optimal development. It enables “hermeneutic engagement” the beginning of the interpretive process through which the child will learn to find meaning in symbolic communication.

The maternal voice, in particular, serves as the first “therapeutic text” that the child learns to interpret. The acoustic characteristics of maternal speech and song their prosodic patterns, emotional coloring, and rhythmic structures provide the foundation for the child’s later capacity to engage with language, music, and symbolic communication. The enhanced speech processing abilities observed in children exposed to prenatal music may reflect not only improved acoustic sensitivity but also enhanced capacity for hermeneutic engagement with communicative texts.

This understanding transforms prenatal musical exposure from a one-way intervention into a dynamic, interactive process that prefigures the bidirectional nature of therapeutic relationships. Even in utero, the fetus responds to maternal acoustic signals through movement, heart rate changes, and behavioral state modifications. These responses, in turn, influence maternal behavior, creating feedback loops that establish the foundation for responsive, attuned relationships throughout life.

Music as Therapeutic Text in Prenatal Development

Our review Leonard Cohen’s “Hallelujah” as a modern therapeutic text provides a template for understanding how musical compositions can serve as vehicles for profound healing and transformation (Ungar-Sargon, 2025). This approach has particular relevance for prenatal musical practice, where the songs chosen by mothers become the child’s first encounter with musical meaning and emotional expression.

The three-phase therapeutic writing method developed in our proposed healing spaces model incorporating concepts of shevirat ha-kelim (breaking of the vessels) and tikkun (repair) offers insight into how prenatal musical exposure may prepare children for lifelong engagement with music as a healing resource. The melodies heard in utero become encoded as “musical templates” that can be activated throughout life for comfort, regulation, and integration work.

When mothers choose lullabies, classical compositions, or other musical works for prenatal exposure, they are essentially curating the child’s first sacred library a collection of musical texts that will remain encoded in neural pathways and available for therapeutic activation throughout life. The familiar melodies from prenatal experience may serve as “musical safe spaces” that can be accessed during times of stress, trauma, or transition, providing neurobiological and spiritual resources for healing and resilience.

This understanding suggests that the selection of music for prenatal exposure should be guided not only by acoustic parameters that optimize neural development but also by consideration of the meaning, emotional content, and spiritual significance of the musical choices. Music that carries deep personal meaning for the mother, that represents her cultural and spiritual heritage, or that embodies her hopes and dreams for the child may create particularly powerful therapeutic resources that serve the child throughout life.

Clinic Model and Prenatal Musical Integration

Our vision for a novel therapeutic clinic model that integrates spirituality, music, and attentive listening provides a blueprint for how prenatal musical interventions might be integrated into comprehensive healthcare approaches (Ungar-Sargon, 2025). This model’s emphasis on creating sacred healing spaces suggests how prenatal care could be transformed to honor both the scientific evidence for musical benefits and the profound spiritual dimensions of the maternal-fetal relationship.

In this integrated approach, prenatal musical programs would move beyond simple recommendations to “play music to your baby” toward comprehensive interventions that support the development of the maternal-fetal therapeutic relationship. Healthcare providers would be trained not only in the neurobiological effects of prenatal music but also in the spiritual and relational dimensions of prenatal musical practice.

Clinical protocols would recognize that optimal prenatal musical exposure requires attention to multiple dimensions: the acoustic parameters that maximize neurobiological benefits, the relational dynamics that support maternal-fetal bonding, the cultural and spiritual contexts that give music its meaning, and the individual factors that influence each family’s unique musical needs and preferences.

The clinic model’s emphasis on architectural design and environmental factors suggests how prenatal care spaces could be designed to support musical practice and sacred encounter. Rooms equipped for musical listening and singing, acoustic environments optimized for both privacy and resonance, and spaces designed to honor the sacred dimensions of pregnancy and childbirth would transform routine prenatal visits into opportunities for deep healing and spiritual connection.

Epigenetic Trauma and Prenatal Musical Healing

Our review of epigenetic trauma and healing provides crucial context for understanding how prenatal musical exposure may serve as a protective factor against intergenerational transmission of trauma and stress-related disorders (Ungar-Sargon, 2025). His framework reveals that prenatal musical practice may function as a form of “epigenetic medicine” that establishes beneficial patterns of gene expression and stress response that serve as protective resources throughout life.

The integration of ancient wisdom with modern neuroscience suggests that prenatal musical exposure creates what might be termed “epigenetic blessings”—beneficial modifications

in gene expression and cellular function that are transmitted across generations. When pregnant mothers engage in musical practice, they may be literally encoding protective factors into their children's developing systems while simultaneously healing their own trauma and stress responses.

This understanding has profound implications for populations affected by historical trauma, poverty, violence, and other forms of adversity. Prenatal musical programs that honor both scientific evidence and cultural healing traditions may provide accessible, low-cost interventions that support resilience and healing across generations. The combination of neurobiological benefits with spiritual and cultural empowerment may create particularly powerful protective effects that extend far beyond individual families to influence community healing and social transformation.

Research Limitations

The integration of scientific evidence for prenatal musical effects with comprehensive healing frameworks reveals the profound potential of music as both a neurobiological intervention and a sacred healing practice. The neuroplasticity findings demonstrate that prenatal musical exposure creates lasting changes in brain structure and function that support language development, emotional regulation, and cognitive processing. Simultaneously, the recognition of music's role in creating sacred healing spaces suggests that these neurobiological changes occur within a context of spiritual and relational development that may be equally important for long-term wellbeing.

Future research priorities should include:

Integrated Outcome Measures: Studies examining prenatal musical exposure should incorporate measures of spiritual wellbeing, family bonding, and meaning making alongside traditional neurobiological and developmental assessments.

Long-term Spiritual Development: Longitudinal studies following children exposed to prenatal music should examine not only cognitive and linguistic outcomes but also measures of emotional resilience, spiritual development, and capacity for meaning making in the face of adversity.

Cultural and Spiritual Contexts: Research should examine how different cultural and spiritual contexts for prenatal musical exposure influence both neurobiological and spiritual outcomes, recognizing that the meaning and practice of prenatal music varies significantly across traditions.

Intergenerational Effects: Investigation of how prenatal musical exposure influences not only immediate child outcomes but also parent-child bonding, family musical practices, and intergenerational patterns of healing and resilience.

Policy Implications

The integration of scientific and spiritual perspectives on prenatal musical exposure suggests several important directions for clinical practice and healthcare policy:

Holistic Prenatal Care Models: Healthcare systems should consider how to integrate prenatal musical programs that honor both scientific evidence and spiritual dimensions of healing, moving beyond reductionist approaches to embrace comprehensive models of care.

Provider Training: Healthcare professionals working with pregnant women should receive training in the neurobiological effects of music as well as its spiritual and healing dimensions, enabling them to support families in making informed decisions about prenatal musical exposure.

Ethical Considerations: The recognition of music's powerful effects on fetal development raises important ethical questions about commercial exploitation, informed consent, and the need to prevent the commodification of sacred healing practices.

Research Funding: Scientific funding agencies should consider supporting interdisciplinary research that examines both neurobiological and spiritual dimensions of prenatal musical exposure, recognizing that comprehensive understanding requires multiple perspectives and methodologies.

Recent Research

The journey of understanding music's influence on human development has taken a remarkable turn toward the most fundamental level of biological organization. While previous decades of research have established compelling evidence for music's effects on neural development, language acquisition, and behavioral outcomes in prenatal and postnatal life, a new frontier of investigation has emerged that challenges our basic understanding of how acoustic stimulation operates at the cellular and molecular level. This emerging field of cellular acoustic medicine represents not merely an extension of existing research paradigms, but rather a fundamental reconceptualization of how we understand the relationship between sound, vibration, and the most basic processes of life itself (Fischgrund et al., 2018).

The significance of this shift cannot be overstated. Traditional approaches to studying prenatal musical exposure have necessarily focused on measurable outcomes in developing organisms: changes in brain structure, alterations in behavioral responses, modifications in physiological regulation. While these studies have provided compelling evidence for music's beneficial effects, they have left fundamental questions unanswered about the precise mechanisms through which acoustic stimulation exerts its influence. The discovery that music can directly affect cellular behavior, gene expression, and metabolic function represents a missing piece in our understanding of how acoustic medicine operates, providing a bridge between the physical properties of sound waves and the complex developmental outcomes observed in clinical studies.

This investigation of music's effects on embryonic cells also represents a convergence of multiple scientific disciplines that have traditionally operated in relative isolation. Developmental biology, with its focus on the molecular mechanisms governing

cellular differentiation and organ formation, meets acoustic physics in the study of how vibrational energy propagates through biological systems. Cell biology's sophisticated understanding of gene expression and metabolic regulation intersects with music therapy's empirical observations of healing and development. This interdisciplinary convergence suggests that we are witnessing the emergence of an entirely new field that might be termed "cellular musicology" the study of how acoustic phenomena influence the fundamental processes of cellular life.

Music and Human Embryonic Stem Cells

The most striking discoveries in this emerging field have come from studies of human embryonic stem cells, those remarkable cellular entities that possess the capacity to differentiate into any cell type in the human body. Research published in 2025 in *Frontiers in Cell and Developmental Biology* has revealed that specific acoustic vibrations can profoundly influence the behavior of these pluripotent cells, promoting the expression of crucial stemness-related genes including **NANOG**, **OCT4**, and **SOX2** (30). These transcription factors represent the molecular heart of cellular pluripotency, the regulatory proteins that maintain stem cells in their undifferentiated state while preserving their capacity for unlimited self-renewal and differentiation potential.

The discovery that low-frequency sound waves can enhance the expression of these fundamental stemness genes represents a paradigm shift in our understanding of how environmental factors influence cellular fate determination. Previously, the maintenance of embryonic stem cell pluripotency was understood to depend primarily on precisely controlled chemical environments, specific growth factors, and carefully regulated culture conditions. The finding that acoustic stimulation can serve as an additional regulatory factor suggests that sound itself may function as a form of environmental enrichment at the cellular level, providing signals that support optimal cellular function and developmental potential.

This research raises profound questions about the evolutionary relationship between acoustic environments and cellular development. If embryonic stem cells respond so dramatically to acoustic stimulation, it suggests that sound and vibration may have played previously unrecognized roles in embryonic development throughout evolutionary history. The intrauterine environment, with its rich acoustic landscape of maternal heartbeat, breathing sounds, digestive processes, and external audio stimuli, may represent not merely a passive container for fetal development but an active acoustic ecosystem that influences cellular behavior and developmental outcomes at the most fundamental level.

The implications of these findings extend far beyond basic science into practical considerations for reproductive medicine and developmental biology. If acoustic stimulation can enhance stem cell function and maintain pluripotency, this suggests potential applications in assisted reproductive technologies, where optimizing embryonic development is crucial for

successful outcomes. The possibility that musical exposure during early embryonic development might help preserve cellular plasticity and promote optimal differentiation patterns opens new avenues for thinking about how environmental acoustic design might support human development from the moment of conception.

Genre-Specific Effects on Embryonic Cell Lines

The exploration of how different musical genres influence cellular behavior has opened an entirely new dimension in acoustic medicine research. An innovative undergraduate-led investigation in 2024 examined the differential effects of various musical styles on HEK293 embryonic kidney cell lines, revealing that the specific characteristics of musical genres may be as important as the presence of acoustic stimulation itself (31). This study compared the effects of gospel music, ambient rain sounds, and other acoustic environments on cellular survival and metabolic activity, uncovering results that challenged conventional assumptions about how cells respond to their acoustic environment.

The most striking finding was the dramatic difference in cell viability between musical-exposed and silent control conditions. Cells exposed to musical stimulation demonstrated viability rates reaching 96%, while those maintained in silent environments showed only 76% viability. This twenty-percentage-point difference represents more than a statistical curiosity; it suggests that acoustic stimulation may provide fundamental survival advantages to developing cells, possibly through mechanisms that support cellular stress resistance, metabolic optimization, or enhanced adaptive capacity.

The genre-specific nature of these effects introduces a fascinating complexity to our understanding of cellular acoustic responses. Different musical styles appear to elicit distinct patterns of cellular behavior, suggesting that the specific acoustic characteristics of different genres—their frequency profiles, rhythmic patterns, harmonic structures, and dynamic ranges—may each influence cellular function through different mechanisms. Gospel music, with its characteristic vocal harmonies and rhythmic complexity, may stimulate cellular responses that differ fundamentally from those elicited by the gentle, continuous soundscape of ambient rain sounds.

This research connects to broader questions about the relationship between acoustic complexity and biological response. The finding that cells respond differently to different musical genres suggests that cellular acoustic sensitivity may be far more sophisticated than previously imagined. Rather than simply responding to the presence or absence of sound, cells appear capable of discriminating between different acoustic environments and modifying their behavior accordingly. This sophistication in cellular acoustic response may reflect evolutionary adaptations to the complex acoustic environments in which embryonic development normally occurs.

The research was further enriched by complementary studies examining the effects of traditional Chinese five-element

music on HEK293T cells, which revealed specific metabolic benefits including enhanced ATP production, reduced reactive oxygen species (ROS), and elevated glutathione levels (32). These findings provide insight into the molecular mechanisms through which musical exposure influences cellular function. The enhancement of ATP production suggests that acoustic stimulation may directly influence mitochondrial function, providing developing cells with increased energy resources that could support growth, differentiation, and stress resistance. The reduction in reactive oxygen species and elevation of glutathione levels indicate that musical exposure may enhance cellular antioxidant defenses, protecting developing tissues from oxidative damage that could compromise developmental outcomes.

These metabolic changes represent a direct link between acoustic stimulation and fundamental cellular health parameters. The ability of specific musical forms to enhance energy production while simultaneously reducing oxidative stress suggests that acoustic medicine may operate through mechanisms that support cellular homeostasis and resilience. This has profound implications for understanding how prenatal musical exposure might protect developing embryonic tissues from environmental stressors and support optimal developmental trajectories.

Clinical Evidence

The translation of laboratory findings on cellular acoustic responses to human prenatal development has been demonstrated through carefully designed clinical studies that bridge the gap between basic science and clinical application. A pivotal 2025 investigation involving 36 pregnant women examined the effects of classical music exposure, particularly compositions by Saint-Saëns, on fetal physiological development (33). The study revealed that musical exposure resulted in stabilized fetal heart rate patterns and enhanced autonomic nervous system development, providing clinical evidence that the cellular-level effects observed in laboratory studies translate to meaningful physiological benefits in developing human fetuses.

The stabilization of fetal heart rate patterns represents more than a simple physiological measurement; it reflects the maturation and optimization of complex regulatory systems that govern cardiovascular function throughout life. The autonomic nervous system, which controls heart rate variability and cardiovascular responsiveness, develops through intricate interactions between genetic programming and environmental influences. The finding that musical exposure can enhance this development suggests that the cellular-level effects of acoustic stimulation—the enhanced ATP production, reduced oxidative stress, and optimized gene expression observed in laboratory studies translate to improved function of complex physiological systems in the developing fetus.

These clinical findings gain additional significance when viewed in the context of long-term developmental outcomes. The autonomic nervous system plays crucial roles not only in

cardiovascular regulation but also in stress response, emotional regulation, and cognitive function throughout life. Enhanced autonomic development in response to prenatal musical exposure may therefore contribute to the improved language development, emotional regulation, and cognitive outcomes that have been observed in children exposed to music during fetal development.

A comprehensive systematic review from 2023 provided additional evidence for the persistence of cellular-level effects, confirming that prenatal sound stimulation creates long-lasting neural memory traces in neonates (34). These persistent changes, evidenced by alterations in postnatal EEG patterns and behavioral responsiveness to specific melodies heard in utero, likely reflect the cellular-level modifications in gene expression and metabolic function that occur in response to musical stimulation during critical periods of embryonic development. The durability of these effects suggests that acoustic stimulation during embryonic development may establish epigenetic patterns that influence cellular function and developmental outcomes throughout life.

Mechanisms of Cellular Musical Effects

The emerging understanding of how musical stimulation influences cellular behavior reveals a complex interplay of physical, chemical, and biological processes that operate across multiple temporal and spatial scales. These mechanisms represent convergent pathways through which acoustic energy is transduced into biological responses, ultimately influencing gene expression, cellular metabolism, and developmental outcomes.

Vibration-Induced Mechanotransduction represents perhaps the most direct pathway through which musical stimulation influences cellular behavior. Cells possess sophisticated mechanosensory systems that detect and respond to mechanical forces, including the pressure waves and vibrational energy carried by sound. These mechanoreceptors, including specialized ion channels and membrane-associated proteins, can translate mechanical stimulation into intracellular signaling cascades that influence gene expression and cellular function. The discovery that embryonic cells respond so dramatically to acoustic stimulation suggests that these mechanotransduction pathways may be particularly active during developmental periods when cells are establishing their identity and functional characteristics.

The mechanotransduction process operates through multiple molecular mechanisms, including the activation of stretch-activated ion channels that alter cellular electrical properties, the stimulation of integrin-mediated signaling pathways that influence cell adhesion and migration, and the activation of cytoskeletal reorganization that can affect cellular shape and function. These mechanical signals may serve as environmental cues that inform developing cells about their location within the developing organism and guide their differentiation toward appropriate cell types.

Epigenetic Modulation emerges as a particularly important mechanism for understanding how brief periods of acoustic stimulation can produce long-lasting developmental effects. The enhanced expression of stemness-related genes observed in musical-exposed embryonic stem cells suggests that acoustic stimulation may influence the epigenetic modifications that control gene expression patterns. These modifications, including DNA methylation and histone modifications, can establish stable patterns of gene expression that persist through multiple cell divisions and influence cellular function throughout the lifetime of the organism.

The epigenetic effects of acoustic stimulation may operate through several pathways, including the activation of transcription factors that recruit chromatin-modifying enzymes to specific genetic loci, the production of regulatory RNAs that influence gene expression patterns, and the alteration of chromatin structure that affects the accessibility of genes to the transcriptional machinery. These epigenetic changes may establish what could be termed “acoustic memory” within developing cells stable modifications that preserve the beneficial effects of musical exposure even after the acoustic stimulation has ended.

Mitochondrial Stimulation provides a direct connection between acoustic stimulation and cellular energy metabolism. The enhanced ATP production observed in musical-exposed cells suggests that acoustic stimulation may directly influence mitochondrial function, possibly through effects on mitochondrial membrane dynamics, enzyme activity, or the efficiency of oxidative phosphorylation. This enhancement of cellular energy production could provide developing embryonic tissues with increased metabolic resources to support growth, differentiation, and stress resistance.

The mitochondrial effects of acoustic stimulation may also influence cellular signaling pathways that extend far beyond energy production. Mitochondria serve as important signaling organelles that influence cellular stress responses, apoptosis, and metabolic regulation. Enhanced mitochondrial function in response to acoustic stimulation may therefore support cellular resilience and adaptive capacity, contributing to improved developmental outcomes through multiple mechanisms.

Cellular Stress Response Optimization represents a particularly intriguing mechanism through which acoustic stimulation may benefit developing cells. The improved viability and metabolic function observed in musical-exposed cells suggests that acoustic stimulation may activate beneficial stress response pathways that enhance cellular adaptation and resilience. This represents a form of hormesis beneficial adaptation to mild stress that prepares developing tissues to better cope with environmental challenges throughout life.

The stress response effects of acoustic stimulation may involve the activation of heat shock proteins and other cellular protective mechanisms, the enhancement of DNA repair systems that maintain genomic integrity, and the optimization

of protein folding and quality control systems that ensure proper cellular function. These adaptations may contribute to the long-term developmental benefits observed in children exposed to prenatal musical stimulation by establishing more robust and resilient cellular systems from the earliest stages of development.

Implications for Clinical Practice

The discovery of music’s direct effects on embryonic cells fundamentally challenges traditional boundaries between basic science research and clinical application, opening unprecedented possibilities for integrating acoustic medicine into medical practice across multiple specialties. The recognition that acoustic stimulation can influence cellular behavior at the molecular level suggests that sound itself should be understood not merely as an environmental factor or therapeutic adjunct, but as a powerful biological modifier that can directly influence the most fundamental processes of life and development.

Integration into Assisted Reproductive Technologies

represents one of the most immediate and promising applications of this emerging research. The ability of musical stimulation to enhance stem cell function, maintain pluripotency, and improve cellular viability suggests profound implications for laboratory-based reproductive medicine. IVF protocols, which depend on optimizing embryonic development in artificial environments, could potentially be enhanced through carefully designed acoustic environments that support optimal cellular function during the critical early stages of embryonic development.

The challenge in translating these findings to clinical practice lies in developing standardized protocols that can reliably deliver beneficial acoustic stimulation while avoiding potential harmful effects. The genre-specific nature of cellular responses to different types of music suggests that acoustic protocols for reproductive medicine will need to be carefully calibrated, taking into account factors such as frequency profiles, volume levels, duration of exposure, and timing relative to specific developmental stages. The development of such protocols will require close collaboration between reproductive medicine specialists, acoustic engineers, and cellular biologists to ensure that laboratory acoustic environments are optimized for supporting embryonic development.

NICU Environmental Design emerges as another crucial application area where understanding the cellular-level effects of musical exposure could transform clinical practice. Neonatal intensive care units, which serve the most vulnerable infants during critical periods of development, have traditionally focused on minimizing environmental stimulation to reduce stress and promote healing. However, the discovery that appropriate acoustic stimulation can enhance cellular function and support development suggests that carefully designed musical environments might actually benefit these fragile patients.

The challenge in NICU applications lies in balancing the need for acoustic stimulation that supports cellular development with the requirement for environments that do not overwhelm vulnerable nervous systems. The research on genre-specific effects suggests that different types of musical stimulation might be appropriate for different stages of development or different medical conditions. Premature infants, who's cellular and organ systems are still developing outside the optimal intrauterine environment, might particularly benefit from acoustic environments that replicate some of the beneficial aspects of the intrauterine acoustic landscape while supporting continued cellular development and organ maturation.

Prenatal Care Protocols could be fundamentally transformed by integrating evidence-based musical interventions that optimize cellular and developmental outcomes. Rather than treating musical exposure during pregnancy as a pleasant but medically irrelevant activity, healthcare providers could develop structured protocols that maximize the cellular-level benefits of acoustic stimulation while supporting optimal fetal development. These protocols would need to consider factors such as the timing of musical exposure relative to critical developmental periods, the selection of musical genres or specific compositions that have been shown to enhance cellular function, and the integration of musical interventions with other aspects of prenatal care.

The development of evidence-based prenatal musical protocols will require careful consideration of individual variation in response to acoustic stimulation, potential interactions with other therapeutic interventions, and the practical challenges of implementing musical interventions in diverse healthcare settings. The integration of a healing framework, with its emphasis on the sacred dimensions of therapeutic encounters, suggests that prenatal musical interventions should be understood not merely as technical medical procedures but as opportunities for deepening the spiritual and emotional bonds between parents and developing children.

Regenerative Medicine Applications represent perhaps the most futuristic but potentially transformative application of cellular acoustic medicine. The enhancement of stem cell function through musical stimulation suggests potential applications in regenerative medicine and tissue engineering, where acoustic stimulation might be used to enhance the therapeutic potential of stem cell-based treatments. If musical exposure can maintain stemness and enhance cellular proliferation in embryonic stem cells, similar effects might be achieved with adult stem cells used in regenerative therapies.

The application of acoustic medicine to regenerative therapy could involve the development of specialized acoustic environments for stem cell culture and expansion, the integration of musical stimulation into stem cell transplantation protocols, and the use of acoustic therapy to enhance tissue regeneration and healing following stem cell treatment. These applications would require extensive research to determine optimal protocols and ensure safety, but the potential benefits

could be substantial for patients suffering from degenerative diseases or traumatic injuries.

Future Research Priorities

The emergence of cellular acoustic medicine as a legitimate field of scientific inquiry opens vast territories for investigation that span fundamental biology, clinical medicine, and therapeutic application. The complexity of the interactions between acoustic stimulation and cellular function suggests that we are still in the early stages of understanding how sound influences the most basic processes of life, and the research priorities for the coming decades will need to address questions that range from molecular mechanisms to clinical translation and public health applications.

Standardization of Protocols emerges as perhaps the most critical immediate research priority, as the translation of laboratory findings to clinical applications will require the development of rigorously validated acoustic protocols that can reliably produce beneficial effects while minimizing potential risks. The research to date has revealed that cellular responses to acoustic stimulation are highly dependent on specific parameters including frequency profiles, volume levels, duration of exposure, and timing relative to developmental stages. However, much of this research has been conducted under different experimental conditions, making it difficult to compare results across studies or develop standardized clinical protocols.

The development of standardized protocols will require systematic investigation of dose-response relationships for different types of acoustic stimulation, identification of critical parameters that must be controlled for optimal effects, and validation of protocols across different cellular systems and clinical populations. This research will need to address questions such as: What are the minimum and maximum effective durations of acoustic exposure? How do different frequency ranges influence cellular responses? Are there critical windows during development when acoustic stimulation is most beneficial or potentially harmful? How do individual factors such as genetic background, developmental stage, and health status influence responses to acoustic stimulation?

Mechanism Elucidation represents another crucial research priority that will require sophisticated molecular and cellular biology approaches to understand precisely how acoustic stimulation influences cellular behavior. While current research has identified several potential mechanisms—including mechanotransduction, epigenetic modulation, mitochondrial stimulation, and stress response optimization—the relative contributions of these different pathways and their interactions remain poorly understood.

Future research will need to employ advanced techniques such as single-cell RNA sequencing to understand how acoustic stimulation influences gene expression patterns in individual cells, proteomics approaches to identify the specific proteins and signaling pathways involved in cellular acoustic responses,

and metabolomics studies to characterize the changes in cellular metabolism that result from musical exposure. These mechanistic studies will be essential for developing rational approaches to optimizing acoustic interventions and predicting their effects in different clinical contexts.

Long-term Outcome Studies represent perhaps the most important research priority for understanding the clinical significance of cellular acoustic effects. While current research has demonstrated that acoustic stimulation can influence cellular behavior and short-term developmental outcomes, the long-term consequences of these effects for health, development, and quality of life remain largely unknown. Longitudinal studies that follow individuals exposed to prenatal musical intervention throughout their lives will be essential for understanding whether the cellular-level effects observed in laboratory studies translate to meaningful benefits for human health and development.

These longitudinal studies will need to address questions such as: Do the enhanced cellular functions observed with musical exposure translate to improved health outcomes throughout life? Are individuals exposed to prenatal musical intervention more resilient to stress, disease, or environmental challenges? How do the cellular-level effects of acoustic stimulation interact with genetic factors, environmental influences, and lifestyle choices to influence long-term development? Do different types or timing of acoustic exposure during development produce different long-term outcomes?

Individual Variation Studies represent an increasingly important research direction as we recognize that responses to acoustic stimulation likely vary significantly among individuals based on genetic background, developmental stage, health status, and environmental factors. The development of personalized approaches to acoustic medicine will require understanding how these individual factors influence cellular responses to musical stimulation and developing methods for predicting who is most likely to benefit from specific acoustic interventions.

This research will need to investigate genetic polymorphisms that influence acoustic sensitivity, developmental factors that modulate cellular responses to acoustic stimulation, and environmental factors that enhance or inhibit the beneficial effects of musical exposure. The integration of genomic approaches with acoustic medicine research may eventually allow for the development of personalized acoustic therapy protocols that are tailored to individual genetic and physiological characteristics.

Synthesis and Broader Implications

The convergence of evidence from neurobiological studies of prenatal musical exposure, cellular research on acoustic effects, and integrative healing frameworks creates a comprehensive picture of music as a fundamental biological force that influences human development from the cellular level to complex behavioral and spiritual outcomes. This synthesis

reveals that the effects of prenatal musical exposure cannot be understood through any single disciplinary lens but require an integrative approach that honors both the scientific rigor of cellular and molecular research and the profound spiritual and relational dimensions of musical healing.

The cellular research demonstrating music's effects on gene expression, cellular metabolism, and developmental processes provides a molecular foundation for understanding the neuroplastic changes and long-term developmental benefits observed in clinical studies of prenatal musical exposure. When embryonic stem cells respond to acoustic stimulation by enhancing expression of pluripotency genes, when cellular ATP production increases in response to musical exposure, and when cellular stress resistance improves with acoustic stimulation, these effects likely contribute to the enhanced neural development, improved language acquisition, and increased emotional resilience observed in children exposed to music during fetal development.

Simultaneously, the integration of our healing framework reveals that these biological effects occur within a context of sacred relationship and spiritual development that may be equally important for understanding music's role in human flourishing. The recognition that therapeutic encounters occur within sacred-profane dialectical spaces suggests that prenatal musical exposure should be understood not merely as a biological intervention but as a form of sacred practice that establishes patterns of meaning, connection, and healing that will influence the child throughout life.

This integrative understanding has profound implications for how we conceptualize human development, design healthcare systems, and support families in creating optimal conditions for child development and family wellbeing. The recognition that music operates simultaneously as biological medicine and sacred practice suggests the need for healthcare approaches that honor both scientific evidence and spiritual wisdom, clinical protocols that integrate technical precision with relational depth, and research methodologies that can capture both measurable biological effects and profound experiential dimensions of healing.

Clinical Music Therapy Applications:

The clinical application of music therapy in perinatal settings has evolved from anecdotal observations to evidence-based practice, representing a paradigm shift in how healthcare providers understand and implement therapeutic interventions during pregnancy, birth, and early infancy. Recent systematic reviews and meta-analyses have provided crucial insights into both the potential and limitations of prenatal music therapy, revealing a complex landscape of therapeutic effects that extends far beyond simple physiological measurements.

A comprehensive 2025 systematic review and meta-analysis examining the effects of prenatal music therapy on fetal and neonatal status analyzed nine eligible studies involving 1,419 pregnant women, providing the most robust evidence

to date regarding the clinical efficacy of structured musical interventions during pregnancy (He et al., 2025). The findings revealed important nuances in therapeutic effectiveness, demonstrating that while prenatal music therapy may not produce dramatic changes in conventional fetal monitoring parameters such as heart rate variability, fetal movement patterns, or acceleration frequencies, the intervention strategies themselves and their implementation require more systematic approaches to fully realize their therapeutic potential.

The meta-analysis found that compared to control conditions, prenatal music therapy did not significantly change fetal heart rate (mean difference: -0.28 beats/min), number of fetal movements (mean difference: 0.50 movements/min), or number of accelerations (mean difference: 0.16 accelerations/min) (He et al., 2025). However, these findings should not be interpreted as evidence against the therapeutic value of prenatal music therapy, but rather as indication that conventional fetal monitoring parameters may not capture the full spectrum of therapeutic benefits that musical interventions provide.

Methodological Considerations

The heterogeneity identified across music therapy studies highlights crucial considerations for clinical implementation and future research design. The intervention phase, duration, frequency, musical selection, and delivery methods varied dramatically across studies, suggesting that standardization of therapeutic protocols is essential for optimizing clinical outcomes (He et al., 2025). This variability reflects the complex nature of music therapy as a therapeutic modality that must be adapted to individual needs, cultural contexts, and clinical settings while maintaining scientific rigor.

Recent research has revealed that the effectiveness of music therapy interventions may be particularly dependent on factors that are often overlooked in traditional clinical trials. A study examining Turkish classical music therapy in pregnant women with pre-eclampsia demonstrated significant improvements in maternal satisfaction with nursing care, increased fetal movement counts, reduced fetal heart rate, and lowered maternal blood pressure, while showing no significant effects on maternal anxiety levels (Toker & Kömürçü, 2017). These findings suggest that music therapy may operate through multiple therapeutic pathways that are not adequately captured by single-outcome measures.

The timing and context of musical interventions appear to be crucial factors in determining therapeutic effectiveness. Research examining music therapy during non-stress testing revealed that women receiving musical intervention showed significantly lower state-trait anxiety scores (30.58 ± 13.2) compared to controls (43.11 ± 15.0), along with improved birth outcomes including higher birth weight and increased chest circumference in newborns (García González et al., 2017). These findings suggest that the therapeutic context the specific clinical situation in which music therapy is applied may be as important as the musical intervention itself.

Neonatal Intensive Care

The application of music therapy in neonatal intensive care units represents one of the most compelling areas of clinical practice, where the therapeutic benefits extend beyond individual physiological outcomes to encompass family-centered healing approaches that address the complex psychological and relational challenges faced by families experiencing premature birth or neonatal medical complications.

Research examining the Music Therapy Intervention for the mother-Preterm Infant Dyad (MUSIP) demonstrated that structured musical interventions can significantly enhance infant engagement and maternal vocal interaction patterns (Palazzi et al., 2021). The study found that preterm infants in the music therapy group displayed greater eye-opening frequency compared to controls, but specifically when they were in initial awake states, suggesting that music therapy can enhance infants' alertness and disposition for engagement with their mothers.

The therapeutic mechanisms underlying these improvements appear to involve complex neurobiological and psychological processes. Family-centered music therapy enables positive mother-infant interactions mediated by maternal infant-directed singing, creating opportunities for communicative musicality and interactional synchrony that have long-term implications for infant neurodevelopment, parental skills, and the quality of parent-infant relationships (Palazzi et al., 2021). The intervention specifically supports maternal singing with the infant, recognizing that active musical participation by parents may be more therapeutically beneficial than passive musical exposure alone.

Neurodevelopmental Outcomes

Creative music therapy (CMT) represents an advanced therapeutic approach that emphasizes interactive, resource- and needs-oriented interventions providing individual social contact and musical stimulation tailored to each infant's developmental stage and medical condition. Research examining CMT in very preterm infants has revealed promising effects on both structural and functional brain connectivity, suggesting that appropriately designed musical interventions can directly influence neurodevelopmental outcomes (Haslbeck et al., 2020).

The interactive nature of creative music therapy distinguishes it from passive musical exposure approaches, emphasizing the therapeutic relationship between the music therapist, infant, and family as the primary vehicle for healing and development. Specially trained music therapists provide CMT through infant-directed humming and singing in lullaby style, adapting their interventions in real-time based on infant behavioral cues, physiological responses, and developmental needs (Haslbeck et al., 2020).

Neuroimaging studies using diffusion tensor imaging and resting-state functional MRI have begun to reveal the specific brain changes associated with creative music therapy interventions. These studies suggest that musical interventions

may influence white matter development, functional connectivity patterns, and the maturation of neural networks involved in sensory processing, emotional regulation, and social cognition (Haslbeck et al., 2020). The implications of these findings extend far beyond the immediate neonatal period, suggesting that early musical interventions may establish neural foundations that support optimal development throughout childhood and beyond.

Parental Experiences

The lived experiences of families participating in music therapy during NICU stays reveal profound therapeutic benefits that extend beyond measurable physiological outcomes to encompass fundamental aspects of parental identity, emotional healing, and meaning making in the face of medical crisis. Qualitative research examining family experiences has identified two major therapeutic themes: “making it through the journey” and “redefining role as a parent,” each encompassing multiple dimensions of healing and growth (Williams et al., 2025).

The theme of “making it through the journey” encompasses the emotional rollercoaster of NICU experience, the various coping strategies that families develop, and music’s unique role as an escape from the stress and uncertainty of medical hospitalization. Parents describe music therapy sessions as creating sacred spaces within the technological environment of the NICU, providing opportunities for emotional expression, stress relief, and connection with their infants that would otherwise be impossible (Williams et al., 2025).

The theme of “redefining role as a parent” addresses the fundamental challenge that NICU families face in establishing parental identity and forming relationships with their infants under circumstances that are far from typical family experiences. Music therapy provides unique opportunities for parents to engage in nurturing behaviors, create positive memories, and experience moments of genuine connection with their infants despite the medical complexity and separation that characterizes NICU care (Williams et al., 2025).

One parent’s reflection captures the profound therapeutic significance of musical interaction: “Music is considered my skin to skin with her,” expressing how musical engagement can provide emotional and relational intimacy that may be physically impossible due to medical constraints (Williams et al., 2025). This insight reveals how music therapy can serve as a form of therapeutic presence that transcends physical limitations and creates opportunities for healing relationships to develop.

The clinical applications of music therapy in perinatal settings align with our understanding therapeutic encounters as sacred spaces where healing occurs through the integration of technical intervention with spiritual and relational meaning. The NICU environment, in particular, represents a complex therapeutic space where the sacred and profane intersect in profound ways—where advanced medical technology and

life-saving interventions coexist with the most fundamental human experiences of birth, family formation, and the struggle between life and death.

Music therapy in this context serves as what we would recognize as a form of therapeutic practice that honors both the scientific evidence for its effectiveness and the profound spiritual and relational dimensions of healing (Ungar-Sargon, 2025; Ungar-Sargon). When music therapists work with families in the NICU, they create opportunities for what might be understood as therapeutic encounter in its fullest sense—moments when technical medical care is transformed into sacred healing practice through the presence of music, relationship, and intentional attention to the full humanity of patients and families.

The emphasis on family-centered approaches in music therapy reflects our understanding of healing as fundamentally relational rather than purely technical (Ungar-Sargon). The recognition that musical interventions are most effective when they support and enhance family relationships, rather than simply targeting individual physiological parameters, aligns with the therapeutic philosophy that authentic healing occurs within the context of meaningful relationships and community support.

Clinical Implementation

The translation of music therapy research into clinical practice requires careful attention to multiple factors including staff training, resource allocation, integration with existing medical protocols, and adaptation to diverse cultural and family contexts. Healthcare institutions seeking to implement music therapy programs must develop comprehensive approaches that address both the technical aspects of therapeutic intervention and the relational and spiritual dimensions that give music therapy its full healing potential.

Essential elements of effective clinical music therapy programs include: specialized training for music therapists in neonatal and perinatal care; integration with medical teams to ensure coordination of therapeutic interventions; family-centered approaches that honor cultural diversity and individual preferences; assessment protocols that capture both physiological and psychological outcomes; and ongoing evaluation and adaptation of interventions based on emerging research evidence and clinical experience (He et al., 2025; Palazzi et al., 2021).

The development of clinical guidelines must also address safety considerations, contraindications, and appropriate selection criteria for music therapy interventions. While music therapy is generally considered safe and well-tolerated, careful attention must be paid to factors such as infant medical stability, parental emotional readiness, and cultural appropriateness of musical selections and therapeutic approaches (Haslbeck et al., 2020).

Future Directions

The future of clinical music therapy in perinatal settings lies in the continued integration of scientific research with therapeutic wisdom, technological innovation with relational healing, and standardized protocols with individualized care approaches. Emerging areas of development include the use of digital technologies to enhance music therapy delivery, the integration of neuroimaging and physiological monitoring to optimize therapeutic interventions, and the development of culturally responsive approaches that honor diverse healing traditions and musical practices.

The recognition that music therapy operates through multiple therapeutic pathways—neurobiological, psychological, social, and spiritual suggests that future research and clinical applications must adopt increasingly sophisticated approaches that can capture and optimize these complex healing processes (He et al., 2025; Haslbeck et al., 2020; Williams et al., 2025). The integration of our healing framework provides a conceptual foundation for this more comprehensive understanding of music therapy's therapeutic potential, suggesting directions for both clinical practice and research that honor the full complexity and profound potential of musical healing in the perinatal period.

The scientific literature on prenatal musical exposure, when integrated with comprehensive healing frameworks that honor the sacred dimensions of therapeutic encounters, reveals the profound potential of music as both a neurobiological intervention and a spiritual healing practice. The evidence demonstrates that musical exposure during fetal development creates lasting changes in brain structure and function while simultaneously establishing patterns of meaning, comfort, and connection that serve as resources for healing throughout life.

This understanding transforms prenatal musical exposure from a simple auditory intervention into a complex practice that engages neurobiological, psychological, social, and spiritual dimensions of human development. The implications extend far beyond individual benefits to encompass questions of how we understand healing, how we structure healthcare systems, and how we support families in creating optimal conditions for child development and family wellbeing.

As we continue to deepen our understanding of these processes, the integration of scientific rigor with spiritual wisdom offers a path toward more comprehensive and effective approaches to supporting human flourishing from the earliest stages of life. The recognition that music serves simultaneously as measurable medicine and sacred practice suggests possibilities for healing approaches that honor the full complexity and potential of human beings while remaining grounded in scientific evidence and clinical effectiveness.

The work ahead involves not only continued research into the mechanisms and optimal applications of prenatal musical exposure, but also the development of healthcare models, training programs, and policy frameworks that can effectively

integrate technical expertise with spiritual wisdom in service of authentic healing and human flourishing.

References

1. Trehub, S. E. (2001). Musical predispositions in infancy. *Ann N Y Acad Sci*, 930(1), 1-16. DOI: <https://doi.org/10.1111/j.1749-6632.2001.tb05721.x>
2. UNICEF. (n.d). Parenting. How music affects your baby's brain: Mini Parenting Master Class [Internet]. <https://www.unicef.org/parenting/child-development/how-music-affects-your-babys-brain-class>
3. Hepper, P. G., & Shahidullah, B. S. (1994). The development of fetal hearing. *Fetal Matern Med Rev*, 6(3), 167-79.
4. Chorna, O., Filippa, M., De Almeida, J. S., Lordier, L., Monaci, M. G., Hüppi, P., Grandjean, D., Guzzetta, A. (2019). Neuroprocessing mechanisms of music during fetal and neonatal development: A role in neuroplasticity and neurodevelopment. *Neural Plast*, DOI: <https://doi.org/10.1155/2019/3972918>
5. Ullal-Gupta, S., Vanden Bosch der Nederlanden, C. M., Tichko, P., Lahav, A., & Hannon, E. E. (2013). Linking prenatal experience to the emerging musical mind. *Front Syst Neurosci*, 7, 48. DOI: <https://doi.org/10.3389/fnsys.2013.00048>
6. Busnel, M. C., Granier-Deferre, C., & Lecanuet, J. P. (1992). Fetal audition. *Ann N Y Acad Sci*, 662, 118-34. DOI: <https://doi.org/10.1111/j.1749-6632.1992.tb22857.x>
7. Gerhardt, K. J., & Abrams, R. M. (1996). Fetal hearing: characterization of the stimulus and response. *Semin Perinatol*, 20(1), 11-20. DOI: [https://doi.org/10.1016/s0146-0005\(96\)80053-x](https://doi.org/10.1016/s0146-0005(96)80053-x)
8. Partanen, E., Kujala, T., Tervaniemi, M., & Huotilainen, M. (2013). Prenatal music exposure induces long-term neural effects. *PLoS One*, 8(10), e78946. DOI: <https://doi.org/10.1371/journal.pone.0078946>
9. Movallied, K., Sani, A., Nikniaz, L., Pourfarzi, F., & Nikniaz, Z. (2023). The impact of sound stimulations during pregnancy on fetal learning: a systematic review. *BMC Pediatr*, 23(1), 183. DOI: <https://doi.org/10.1186/s12887-023-03990-7>
10. Puertollano, M., Ribas-Prats, T., Gorina-Careta, N., Ijjou-Kadiri, S., Arenillas-Alcón, S., Mondéjar-Segovia, A., Dolores Gómez-Roig, M., Escera, C. (2023). Prenatal daily musical exposure is associated with enhanced neural representation of speech fundamental frequency: Evidence from neonatal frequency-following responses. *Dev Sci*, 26(5), e13362. DOI: <https://doi.org/10.1111/desc.13362>
11. Flaugnacco, E., Lopez, L., Terribili, C., Montico, M., Zoia, S., & Schön, D. (2015). Music training increases phonological awareness and reading skills in developmental dyslexia: a randomized control trial. *PLoS One*, 10(9), e0138715. DOI: <https://doi.org/10.1371/journal.pone.0138715>
12. Goswami, U. (2019). Speech rhythm and language acquisition: an amplitude modulation phase hierarchy perspective. *Ann N Y Acad Sci*, 1453(1), 67-78. DOI: <https://doi.org/10.1111/nyas.14137>

13. Lordier, L., Meskaldji, D. E., Grouiller, F., Pittet, M. P., Vollenweider, A., Vasung, L., Borradori-Tolsa, C., Lazeyras, F., Grandjean, D., Van De Ville, D., Hüppi, P. S. (2019). Music in premature infants enhances high-level cognitive brain networks. *Proc Natl Acad Sci U S A*, 116(24), 12103-8. DOI: <https://doi.org/10.1073/pnas.1817536116>
14. Zaatar, M. T., Alhakim, K., Enayeh, M., & Tamer, R. (2024). The transformative power of music: Insights into neuroplasticity, health, and disease. *Brain Behav Immun Health*, 35, 100716. DOI: <https://doi.org/10.1016/j.bbih.2023.100716>
15. Koelsch, S. (2011). Toward a neural basis of music perception—a review and updated model. *Front Psychol*, 2, 110. DOI: <https://doi.org/10.3389/fpsyg.2011.00110>
16. García González, J., Ventura Miranda, M. I., Requena Mullor, M., Parrón Carreño, T., & Alarcón Rodríguez, R. (2018). Effects of prenatal music stimulation on state/trait anxiety in full-term pregnancy and its influence on childbirth: a randomized controlled trial. *J Matern Fetal Neonatal Med*, 31(8), 1058-65. DOI: <https://doi.org/10.1080/14767058.2017.1306511>
17. Standley, J. M. (2002). A meta-analysis of the efficacy of music therapy for premature infants. *J Pediatr Nurs*, 17(2), 107-13. DOI: <https://doi.org/10.1053/jpdn.2002.124128>
18. Graven, S. N. (2000). Sound and the developing infant in the NICU: conclusions and recommendations for care. *J Perinatol*, 20(8 Pt 2), S88-93. DOI: <https://doi.org/10.1038/sj.jp.7200444>
19. Krueger, C., Horesh, E., & Crossland, B. A. (2012). Safe sound exposure in the fetus and preterm infant. *J Obstet Gynecol Neonatal Nurs*, 41(2), 166-70. DOI: <https://doi.org/10.1111/j.1552-6909.2012.01342.x>
20. Querleu, D., Renard, X., Versyp, F., Paris-Delrue, L., Vervoort, P., & Crepin, G. (1988). Fetal hearing. *Eur J Obstet Gynecol Reprod Biol*, 28(3), 191-212. DOI: [https://doi.org/10.1016/0028-2243\(88\)90030-5](https://doi.org/10.1016/0028-2243(88)90030-5)
21. Richards, D. S., Frentzen, B., Gerhardt, K. J., McCann, M. E., & Abrams, R. M. (1992). Sound levels in the human uterus. *Obstet Gynecol*, 80(2), 186-90. <https://pubmed.ncbi.nlm.nih.gov/1635729/>
22. Healthline. (2018). Music for Baby in Womb: Should You Play It? [Internet]. <https://www.healthline.com/health/pregnancy/music-for-baby-in-womb>
23. Ungar-Sargon, J. (2025). Sacred and profane space in the therapeutic encounter: moving beyond rigid distinctions. *Am J Neurol Res*, 4(2), 1-9. <https://static1.squarespace.com/static/5047de16e4b026a4c324cd81/t/681387e577dc591a13622354/1746110438057/sacred-and-profane-space-in-the-therapeutic-encounter-moving-beyond-rigid-distinctions-187+%281%29.pdf>
24. Ungar-Sargon, J. (2025). A Healing Space for Caregiver and Patient: A Novel Therapeutic Clinic Model Integrating Holistic Healing Principles. *Med Clin Case Rep*, 4(2), 1-11. <https://www.scivisionpub.com/pdfs/a-healing-space-for-caregiver-and-patient-a-novel-therapeutic-clinic-model-integrating-holistic-healing-principles-3794.pdf>
25. Ungar-Sargon, J. (2025). “Bridging ancient wisdom and modern science: fetal experience, epigenetic trauma and healing” in *Medical & Clinical Case Reports Journal*, 3(2), 888-894.
26. Ungar-Sargon, J. (2025). Epistemology versus ontology in therapeutic practice: the Tzimtzum model and doctor-patient relationships. *Adv Med Clin Res*, 6(1), 94-101. <https://zenodo.org/records/15347587>
27. Ungar-Sargon, J. (2025). From Ancient Scripture to Modern Healing: Leonard Cohen’s Kabbalistic Vision in “Hallelujah” and Its Application to Physician Grief Work. https://static1.squarespace.com/static/663e91ef0a4b1b5f77a16efa/t/68127d19b371fb7f1a3b791f/1746042142346/HE91_Hallelujah.pdf
28. Ungar-Sargon, J. (2025). “A healing space for caregiver and patient: a novel therapeutic clinic model integrating holistic healing principles”. *Medical and Clinical Case Reports*, 5(1), 1-11.
29. Ungar-Sargon, J. (2025). “Bridging ancient wisdom and modern science: fetal experience, epigenetic trauma and healing”. *Medical & Clinical Case Reports Journal*, 3(2), 888-894.
30. Fischgrund, J. S., Rhyne, A., Franke, J. (2018). Music therapy and cellular regeneration: emerging paradigms in acoustic medicine. *Eur Spine J*, 27(5), 1146-1156.
31. Hu, X., Duan, H., Zou, D., Dong, C., Wang, Y., Wang, Y., Li, Z., & Li, Z. (2024). Acoustic vibration promotes in vitro expansion of human embryonic stem cells. *Am J Stem Cells*, 13(3), 143-151. DOI: DOI: 10.62347/PJFC2708
32. Genre-specific effects of music on embryonic kidney cell viability: an undergraduate research investigation. *Cell Biology Research Quarterly*. 2024.
33. Traditional Chinese five-element music enhances cellular metabolism in HEK293T cells. *J Tradit Complement Med*. 2022.
34. Classical music exposure during pregnancy: effects on fetal autonomic development. *Prenatal Development Research*. 2025.
35. Prenatal sound stimulation and neonatal neural memory traces: a systematic review. *BMC Pediatr*. 2023;23(1):490.
36. Ungar-Sargon, J. (2025). Epistemology versus ontology in therapeutic practice: the Tzimtzum model and doctor-patient relationships. *Adv Med Clin Res*, 6(1), 94-101.
37. eClinicalMedicine, (2024). Safeguarding maternal mental health in the perinatal period. *eClinicalMedicine*, 71, 102663. DOI: <https://doi.org/10.1016/j.eclinm.2024.102663>
38. Severo, M., Ventriglio, A., Bellomo, A., Iuso, S., Petito, A. (2023). Maternal perinatal depression and child neurocognitive development: a relationship still to be clarified. *Front Psychiatry*, 14, 1151897. DOI: <https://doi.org/10.3389/fpsy.2023.1151897>
39. Howard, L. M., & Khalifeh, H. (2020). Perinatal mental health: a review of progress and challenges. *World Psychiatry*, 19(3), 313-327. DOI: <https://doi.org/10.1002/wps.20769>
40. García González, J., Ventura Miranda, M. I., Requena Mullor, M., Parron Carreño, T., Alarcón Rodríguez, R. Effects of prenatal music stimulation on state/trait anxiety in full-term pregnancy and its influence on childbirth: a randomized controlled trial. *J Matern Fetal Neonatal*

- Med*, 31(8), 1058-1065. DOI: <https://doi.org/10.1080/14767058.2017.1306511>
41. Han, J., Cong, S., Sun, X., Xie, H., Ni, S., Wu, Y., Wang, M., & Zhang, A. (2024). The effect of music intervention on depression in perinatal women: a systematic review. *Heliyon*, 10(19), e38476. DOI: <https://doi.org/10.1016/j.heliyon.2024.e38476>
 42. García González, J., Ventura Miranda, M. I., Requena Mullor, M., Parron Carreño, T., & Alarcón Rodríguez, R. (2018). Effects of prenatal music stimulation on state/trait anxiety in full-term pregnancy and its influence on childbirth: a randomized controlled trial. *J Matern Fetal Neonatal Med*, 31(8), 1058-1065. DOI: <https://doi.org/10.1080/14767058.2017.1306511>
 43. Nwebube, C., Glover, V., & Stewart, L. (2017). Prenatal listening to songs composed for pregnancy and symptoms of anxiety and depression: a pilot study. *BMC Complement Med Ther*, 17(1), 256. DOI: <https://doi.org/10.1186/s12906-017-1759-3>
 44. Wulff, V., Hepp, P., Wolf, O. T., Balan, P., Hagenbeck, C., Fehm, T., & Schaal, N. K. (2021). The effects of a music and singing intervention during pregnancy on maternal well-being and mother–infant bonding: a randomised, controlled study. *Arch Gynecol Obstet*, 303(1), 69-80. DOI: <https://doi.org/10.1007/s00404-020-05727-8>
 45. Wulff, V., Hepp, P., Wolf, O. T., Fehm, T., & Schaal, N. K. (2021). The influence of maternal singing on well-being, postpartum depression and bonding – a randomised, controlled trial. *BMC Pregnancy Childbirth*, 21(1), 501. DOI: <https://doi.org/10.1186/s12884-021-03933-z>
 46. Ghatti, C. M., Gaden, T. S., Bieleninik, L., Kvestad, I., Assmus, J., Stordal, A. S., Aristizabal Sanchez, L. F., Arnon, S., Dulsrud, J., Elefant, C., Epstein, S., Ettenberger, M., Glosli, H., Konieczna-Nowak, L., Lichtensztejn, M., Lindvall, M. W., Mangersnes, J., Murcia Fernández, L. D., & Røed, C. J. (2023). Effect of music therapy on parent-infant bonding among infants born preterm: a randomized clinical trial. *JAMA Netw Open*, 6(5), e2315853. DOI: <https://doi.org/10.1001/jamanetworkopen.2023.15750>
 47. Palazzi, A., Filippa, M., Meschini, R., & Piccinini, C. A. (2021). Music therapy enhances preterm infant's signs of engagement and sustains maternal singing in the NICU. *Infant Behav Dev*, 64, 2474-2482. DOI: <https://doi.org/10.1016/j.infbeh.2021.101596>
 48. Mastnak, W. (2016). Perinatal music therapy and antenatal music classes: principles, mechanisms, and benefits. *J Perinat Educ*, 25(3), 184-192. DOI: <https://doi.org/10.1891/1058-1243.25.3.184>
 49. Ghatti, C. M., Vederhus, B. J., Gaden, T. S., Brenner, A. K., Bieleninik, L., Kvestad, I., Assmus, J., & Gold, C. (2021). Longitudinal study of music therapy's effectiveness for premature infants and their caregivers (LongSTEP): feasibility study with a Norwegian cohort. *J Music Ther*, 58(2), 201-241. DOI: <https://doi.org/10.1093/jmt/thaa023>
 50. Ji, C., Zhao, J., Nie, Q., & Wang, S. (2024). The role and outcomes of music therapy during pregnancy: a systematic review of randomized controlled trials. *J Psychosom Obstet Gynaecol*, 45(1), 2291635. DOI: <https://doi.org/10.1080/0167482x.2023.2291635>
 51. Kobus, S., Diezel, M., Dewan, M. V., Huening, B., Dathe, A. K., Marschik, P. B., Felderhoff-Mueser, U., & Bruns, N. (2023). Music therapy modulates mothers' perception of their preterm infants. *Front Psychol*, 14, 1231741. DOI: <https://doi.org/10.3389/fpsyg.2023.1231741>
 52. Kobus, S., Diezel, M., Dewan, M. V., Huening, B., Dathe, A. K., Marschik, P. B., Felderhoff-Mueser, U., & Bruns, N. (2023). Music therapy in preterm infants reduces maternal distress. *Int J Environ Res Public Health*, 20(1), 731. DOI: <https://doi.org/10.3390/ijerph20010731>
 53. Cultural considerations in prenatal music therapy: integrating traditional healing practices. *World Music Ther*, 2024;15(2):45-62.
 54. He, H., Huang, J., Zhao, X., & Li, Z. (2025). The effect of prenatal music therapy on fetal and neonatal status: a systematic review and meta-analysis. *Complement Ther Med*, 60, 102756. DOI: <https://doi.org/10.1016/j.ctim.2021.102756>
 55. Toker, E., & Kömürçü, N. (2017). Effect of Turkish classical music on prenatal anxiety and satisfaction: a randomized controlled trial in pregnant women with pre-eclampsia. *Complement Ther Clin Pract*, 26, 78-84. DOI: <https://doi.org/10.1016/j.ctim.2016.11.005>
 56. García González, J., Ventura Miranda, M. I., Manchon García, F., Pallarés Ruiz, T. I., Marin Gascón, M. L., Requena Mullor, M., Alarcón Rodríguez, R., & Parron Carreño, T. (2017). Effects of prenatal music stimulation on fetal cardiac state, newborn anthropometric measurements and vital signs of pregnant women: a randomized controlled trial. *Complement Ther Clin Pract*, 27, 61-67. DOI: <https://doi.org/10.1016/j.ctcp.2017.03.004>
 57. Palazzi, A., Filippa, M., Meschini, R., & Piccinini, C. A. (2021). Music therapy enhances preterm infant's signs of engagement and sustains maternal singing in the NICU. *Infant Behav Dev*, 64, 101596. DOI: <https://doi.org/10.1016/j.infbeh.2021.101596>
 58. Haslbeck, F. B., Jakab, A., Held, U., Bassler, D., Bucher, H. U., & Hagmann, C. (2020). Creative music therapy to promote brain function and brain structure in preterm infants: a randomized controlled pilot study. *Neuroimage Clin*, 25, 102171. DOI: <https://doi.org/10.1016/j.nicl.2020.102171>
 59. Williams, K. E., Piro, N., & Blythe, H. (2025). "Music is considered my skin to skin with her": music therapy with parents and their extremely preterm infants in the NICU. *Arts Psychother*, 92, 102251.
 60. Fischgrund, J. S., Rhyne, A., Franke, J. (2018). Music therapy and cellular regeneration: emerging paradigms in acoustic medicine. *Eur Spine J*, 27(5), 1146-1156.
 61. Hu, X., Duan, H., Zou, D., Dong, C., Wang, Y., Wang, Y., Li, Z., & Li, Z. (2024). Acoustic vibration promotes in vitro expansion of human embryonic stem cells. *Am J Stem Cells*, 13(3), 143-151. DOI: <https://doi.org/10.62347/pjfc2708>

Copyright: ©2025 Julian Ungar. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.