

Trends in General Medicine

Art is Medecine - not Placebo

Irina Katz-Mazilu*

Visual Artist, Art Therapist, Paris, France.

***Correspondence:**

Irina Katz-Mazilu, Visual Artist, Art Therapist, Paris, France.

Received: 14 Jul 2025; **Accepted:** 13 Aug 2025; **Published:** 25 Aug 2025

Citation: Irina Katz-Mazilu. Art is Medecine - not Placebo. Trends Gen Med. 2025; 3(3): 1-4.

ABSTRACT

As we can say that « medicine is an art » (not only science), we can argue that art is medicine - not only placebo. Since old times and until nowadays, art and creativity have proved spontaneous and on purpose use for improving physical and mental health. Contemporary medicine benefits of the neurosciences' and arts therapies' joint research. Using art in health is a complementary and powerful medicine in many fields. Specific non-verbal communication, art making with all media and sharing through empathic creativity are at the core of arts therapies and more generally in any receptive or active use of art. General medicine is at the outposts of treating illness and pain. It has a major role to play in informing and addressing the patients to easily accessible means of emotional regulation, empowering and sociability. Moreover, recent research shows that art therapy can significantly reduce burn-out and stress in healthcare professionals.

Keywords

Aesthetic brain, Art, Arts therapies, Emotional regulation, Empathic creativity, Health, Burn-out, Medicine, Neuroscience, Research.

Introduction

General medicine is both natural and human science. Current technological progress in medicine is spectacular and offers many new ways of improvement for our health. On one condition: not to forget that a human is a living being, an organism and not a machine. Sometimes medicine appears as considering the human from an excessively technical perspective. If indeed each of us is a system with its principles and laws common to all humans as belonging to the same species, we are also variants influenced by particular natural environment: climate, geographical conditions, interactions with vegetals and animals. And finally we are unique individuals resulting from specific interpersonal and cultural influences interacting with personal genetic data as well as with nature. Moreover, the cultural influence of humans on environment and nature is constantly re-shaping them - which in turn is impacting the human development. This circular process currently needs deep reflection as major change might occur with imprevisible consequences both on individual and global levels...

Understanding the complexity of so many intricate elements contributing to foster a human being requests a multidisciplinary approach. Consulting in general medicine is the first step we do when an imbalance in our body or mental functioning brings pain and/or illness. The family doctor is the one who knows me at best and can help to get rid of the most current challenges. How? The doctor has knowledge...but also the capability of listening, touching, observing, asking questions, responding to my questions, empathizing, expressing compassion and encouragements, supporting me quietly and gently...This is called « the art of medicine ». But if Medicine is (also) an Art, what about Art in Medicine?

Art in Healing

The bible King Saül used to ask David to play harp for him when he was in melancholic mood. Musical treatment for depression, anxiety and/or agitation is known since old times. We all love lullabies...Body painting, masks, music, dance and performance are tools of acting for emotional regulation and health. Besides deep knowledge of a large diversity of mineral, vegetal and animal substances' properties, the traditional healers know how to use aesthetic experience as a lever for change. The healing rituals combine the impact of substances acting on the body (disinfection, analgesia...) and on the mind (emotions, modified mental

states...), with various arts and media. Visual, sound, tactile, smelling and tasting effects are organized in a *mise en scène*, in a dramatic scenography enhanced by narratives (myths, legends, fairy-tales, songs...) and symbolic movement. The combination of these components is so powerful that in all human cultures their practice is under strict encoding and rituals' control.

Use of art media in mental self-care can be found through human history in all societies. One well-known example is the theater company founded by the Marquis de Sade, prosecuted for immorality and imprisoned for many years at the beginning of the XIXth century. In the asylums, psychiatrists noticed that some patients spontaneously practiced painting, embroidery, knitting or sculpture and that this free creative work had obvious positive effects on their mental and physical health. The collection of the psychiatrist Hans Prinzhorn is constituted from 20 000 art pieces created by asylum inpatients [1] and had a big influence on artists like Paul Klee and Jean Dubuffet, who fostered the theory of the *art brut*.

Carl Gustav Jung was the first psychiatrist and psychoanalyst to use art media on purpose with some of his psychotic patients. He first experimented the process of art and creativity for himself by regularly writing, drawing, painting, modeling or sculpting early in the morning under the impulse of his dreams and then analyzing these products and the creative process with Freud. Jung elaborated the method of the *active imagination* and theorized the steps of the art process [2].

After the World War I, some psychiatrists in the USA noticed that for many traumatized war veterans making art and expressing emotions was a positive alternative to obsessive nightmares, panic attacks and major depression. This approach quickly developed after the World War II, when artists have been invited to help patients make art. Adrian Hill, a British painter, named this method « art therapy ». A famous example is described in « Mary Barnes, Two Accounts of a Journey through Madness » [3]. Mary was a nurse and at age of 42 manifested schizophrenic symptoms. She was hospitalized and treated in conformity with the antipsychiatry's humanistic approach, using interactivity with the patient, esthetic regression and creativity [4] instead of medication. Progressively Mary recovered and was stabilized through art making. She became an artist and wrote about her life and her art-in-health experience.

The second half of the XXth century was rich in explorations of the human creativity and the art making process. Many well known psychiatrists, psychologists, psychoanalysts, anthropologists, sociologists, philosophers and artists were interested in understanding the nature of the art process and the extent of its importance in humans' life. Many theories have been elaborated with different orientations, but all converge to one main conclusion: art is necessary for the human in general and for addressing human challenges even more! Artists having experienced mental illness or traumatic social conditions have practiced self-care through art making besides psychological or medical treatments. Marion Milner was a well-known psychoanalyst who wrote « On not being

able to paint » [5]. First published in 1950, this book is focused on exploring the nature of the creativity and the issues that prevent its expression. Milner analyses the situation of not being and/or not feeling creative as a frequent symptom in mental distress.

But creative self-care might not always be enough successful *in sine*. Creating in an arts therapies context in presence of the arts therapist offers a specific frame to non-verbal communication, making it accessible to anyone. The core of the arts therapies is in using the art process associated to a particular and unique modality of therapeutic relationship based on the *empathic creativity* [6]. Many benefits result from using complementary healing methods. Associating art and health in a humanistic approach [7] offers new healing opportunities.

Art and Neuroscience

In the last decades, the development of neuroimagerie and neuroscience greatly helped to prove the positive effects of art making and of creative behaviour on the physical and mental human health. Arts therapies are nowadays broadly employed not only in the psychiatric field but also for many other medical issues: oncology, chronic disease and chronic pain, surgery. New orientations in anesthesiology offer the possibility to limit or avoid the use of substances through musical induction and medical hypnosis. Arts therapies are of great benefit for elder with neurodegenerative illnesses like Alzheimer or Corps de Lewy as well as stroke [8]. The cure of physical and/or mental trauma integrates methods of treating PTSD and C-PTSD through Arts Therapies. The TT-AT Protocol /Trauma Treatment through art therapy is used in many cases: adolescents with eating disorders [9], violence in different settings [10], etc. Oncology [11] and palliative care [12] greatly benefit of arts therapies for patients and their relatives. Research in arts therapies quickly integrates and collaborates with neuroscience [13].

How does neuroscience contribute to understand and define our need for aesthetics? Studying the brain and the neurosystem proves that our perceptions and emotions are tightly linked to aesthetic experiences from the time of our gestation to our death. Recent research brings evidence on the complex intrication of our sensorial-perceptive, emotional-affective and cognitive-intellectual capabilities. Neuroscience considers the « aesthetic brain » as a specifically human capability to experiment aesthetics and balance through emotional regulation. This is corresponding to a basic need [14] of the same importance as the other vital needs. Many research is dedicated to neurodivergent individuals. David Tammet describes his experience as a person with Asperger autism. Besides some extraordinary capabilities in mathematics, he is also a case of synesthesia, defined as the capability to associate 2 or more senses in a synergic perception. He is able to see numbers and words in colors and in an emotional way [15]. Even if 4% of individuals show the particularity to associate sounds, colors, smells and tastes in their perceptions, this is not systematically linked to art making, artistic gifts or carriers. But art is always acting through our 5 senses, nervous system and body-mind interactions. More research is needed to enlarge the knowledge in this field. We need

new methods of therapeutic help for neurodivergent, autistic and disabled people as well as for those who suffer with trauma and mental pain in grieving, burn-out, depression, suicidal ideas...

Art in health is useful under any condition and at any age because art is a main way to face our existence, pain and joy, life and death... After surviving to deportation in Auschwitz, the psychiatrist and psychoanalyst Viktor Frankl thought that making sens in life is a specifically human characteristic as well as an imperious need. « For Frankl, the question of the meaning in existence is a mental health individual and societal issue » writes Georges-Elias Sarfati [16]. Art is an accessible help to make sens in life.

Medication and Imagination : The Importance of the Misnamed « Placebo »

If we consider the ordinary life in ancient human societies, we can imagine how painful it might have been to spend months and years to produce stone tools, to cultivate plants and build huge monuments with rudimentary technologies...as well as to face body and mental suffering and pain with less comfort and help as nowadays. Why than spend even more time and effort to decorate a tool which already requested several months of polishing the stone, or a dress, or a furniture? Why should it be beautiful? Why imagine long and complex rituals for accompanying sickness, for organizing expensive funerals requesting long time work for preparatives? These behaviours are universal for the human species in spite of many different local variants. We can conclude that the motivation for imaginary and symbolic activity is deeply rooted in the so-called human nature, in our body-mind schema, in our aesthetic brain. Arts therapies are complementary medicine in recent healing methods combining technology and psychology. The role and the importance of art has to be reconsidered in medicine. The synergy between using medicine and stimulating imagination reinforces treatments' effectiveness. Arts therapies are an important lever in complementary medicine through healing methods combining technology and psychology in many ways. The power of the symbolic and imaginative creativity can be assessed through studying the brain's activity as well as biological data while receiving or producing an aesthetic experience [17]. The art effect has an additional impact to chemotherapy and surgery if used in a pertinent way. The role and the importance of art has to be reconsidered and enhanced in medicine.

A recent thread in art therapy is the prescription of museotherapy [18]. Museums, exhibitions, and more generally concerts, theater and dance shows offer a large spectrum of possibilities for health care. Cultural events are accessible to everyone and access to culture is a citizen's right. Adapting culture access to the capabilities of people with special needs is quickly developing in many countries. Receptive as well as active methods of viewing, hearing, moving, prove their effectiveness for physical and mental health [19].

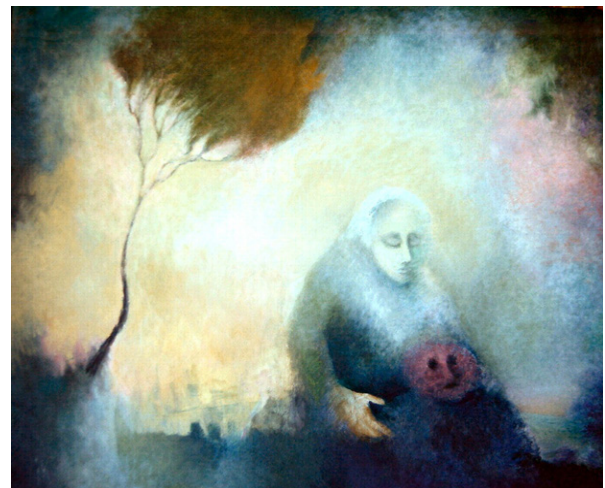
Art Therapy for Burn-Out and Stress in Healthcare Professionals

Besides the interest for the use of art therapy with general

population, recent research shows significant improvement of burn-out for healthcare professionals which is a major concern for health systems. A recent randomized controlled study evaluated the effectiveness of a structured group art therapy intervention for healthcare professionals [20]. A total of 129 healthcare professionals with moderate-to-severe burn-out and associated mental distress symptoms were randomly distributed either in 6 weekly group art therapy programs or in waiting lists in 4 London/UK hospitals. The results showed significant change in emotional exhaustion, depersonalization, perceived stress and personal accomplishment, anxiety and depression for the professionals who participated in the art therapy program. Outcomes were assessed through several surveys at base-line, at 6 weeks postintervention control period and at 3 months follow-up. These findings support the use of art therapy in staff services and in research for long-term effectiveness.

Conclusion

Aesthetic experience and art making are central to the human well-being and health. Because the human is fundamentally a social being whose development is dependent of the cultural environment, the emotional-aesthetic experience transmitted from one generation to the next has a deep impact on our emotional regulation - and consequently on our general physical and mental well-being. The aesthetic experience appears as fundamental as the other primary needs defining a human. The specific aesthetic need has to be satisfied as contributing to the normal development of the brain's neurons, synapses, lobes and hemispheres, of the limbic and vagal systems, of both the logical and the imaginative intelligence. The emotional regulation is essential in any successful medical treatment, as well as for helping the patients to accept the inevitability of pain and death. The same brain-and-body mechanisms are driving the aesthetic need as all our other primary needs. Thriving for art is a fundamental innate human trend. General medicine, situated at the outpost of care and healing, plays an important role in offering information and orientation towards creative and cultural activities as means of relief. Besides medication, the doctor is called to enhance the patient's physical and mental well-being by encouraging his creativity and sociability through beauty and sharing.



References

1. Prinzhorn H, Bildnerei der Geisteskranken. Expressions de la folie Dessins peintures sculptures d'asyle Gallimard. 1922.
2. Remy C. Qu'est-ce que l'imagination active selon Jung www.enracinementcreatif.com. 2024.
3. Barnes M, Berke J. Un voyage à travers la folie Mary Barnes and Josepk Berke Two Accounts of a Journey through Madness 1971, Seuil. 1976 c.1973.
4. Simon R. Symbolic Images in Art as Therapy. Routledge. 1997.
5. Milner M. On not being able to paint Routledge. 2010.
6. Katz-Mazilu I. Aesthetics and Ethics in Art and Art Therapy. Intech Open. 2025.
7. Hope Corbin J, Sanmartino M, Alden Hennessy E, et al. Fung Kei Cheng Book review Art and Health Promotion Tools and Bridges for Practice Research and Social Transformation Creative Arts in Education and Therapy Eastern and Western Perspectives. 2022; 8: 68-70.
8. Katz-Mazilu I. Art Therapy a Powerful Lever for Recovery with Depression Stroke and Hemiplegia Journal of Psychology and Neuroscience. Uniscience. 2023.
9. Macchioni S, La Ferla T, Luzzatto P. TheTT-AT protocol piloted with adolescents with eating disorders and additional symptoms. International Journal of Art Therapy. 2025.
10. Pearce J, Njobo L, Mills E, et al. The TT-AT trauma protocol piloted in different international settings Zambia UK Italy. International Journal of Art Therapy. 2023.
11. Lelièvre M, Delpech L, Sudres JL. Sens et motions apports d'un soin de support art thérapeutique enoncologie. Une analyse mixte dans le cadre d'une étude exploratoire Senses and Motions Contribution of an Art-Therapeutic Support Treatment in Oncology. A Mixed Analysis in an Exploratory Study. Canadian Journal of Art Therapy. 2024; 37: 157-169. <https://www.tandfonline.com/action/journalInformation?journalCode=ucat21>
12. Collette N, Güell E, Fariñas O, et al. Art Therapy in a Palliative Care Unit Symptom Relief and Perceived Helpfulness in Patients and Their Relatives. J Pain Symptom Manage. 2021; 61: 103-111.
13. Bokoch RN, Hass-Cohen A, Espinoza T, et al. California School of Professional Psychology Alliant International University Alhambra CA United States A scoping review of integrated arts therapies and neuroscience research. SYSTEMATIC REVIEW article Frontiers in Psychology. 2025; 16.
14. Magsamen S. Your Aesthetic Brain A Growing Case for the Arts, Cerebrum. 2019.
15. Tammet D. Des pierres ils ont fait des étoiles Les Arènes. 2024.
16. Olano M, Viktor Frankl. à la recherche du sens perdu, Sciences Humaines no.380, Juillet-Août. 2025.
17. Kaimal G, Kendra R, Muniz J. Reduction of Cortisol Levels and Participants Responses Following Art Making. Art Therapy. 2016; 33: 74.
18. Alieva D, Pervushina M, Kabaeva E, et al. Inclusive Art Therapeutic Labs in the Museum of the East the Charitable Foundation for Social Assistance and Support SVET Russia. 2024.
19. Trupp MacKenzie D, Howlin C, Fekete A, et al. The impact of viewing art on well-being a systematic review of the evidence base and suggested mechanisms. The Journal of Positive Psychology. 2025.
20. Tjasink M, Carr CE, Basset P, et al. Art Therapy to reduce burn-out and mental distress in healthcare professionals in acute hospitals a randomized controlled trial. BMJ Public Health. 2025; 3: 002251.