

Diseases and Destinies of Famous Composers Why should one even write about composers' diseases?

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Summary – Why should one even write about composers' diseases? That question is no longer an issue because in the last 50 to 100 years, this very topic has given us a whole new insight into famous composers' creative lives. Grieg, as well as many others, concurred. The very goal of biopathographies is to investigate the lives and creativity of famous composers from the psychological as well as from medical point of view. We attempted to list and interpret the data we found accurately, and categorize them using a simple everyday vocabulary in the book *Diseases and Destinies of Famous Composers*.¹

Key words: composers, diseases, pathographies

The history of music from the earliest times said very little about the private lives of composers, and even less about their ailments. An interesting fact is that a composers' life expectancy was very high (over 60 years) from earliest times to the late 19th century. That can perhaps be attributed to the stability and strictness of the lifestyle needed for their music and practice regime. The other explanation is that only older affirmed composers gained world fame. Lately a new trend in music history can be observed – young composers, those that died before they could gain world fame are being re-visited in music archives in order to rees-

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establish the worth of their music (Schein, Arriaga, Linley, Vancaš, Krežma etc.).^{1,18,19} One of the first records of composers' ailments and deaths can be found as early as 13th – 18th century, and some records of early and dramatic deaths due to the plague (the black death) from the beginning of the 16th century on (1506. Obrecht, Agricola and Adam von Fulda).^{1,18,19} About 50 plague deaths among composers have been examined, just to name a few: Croatian composer Jelić who, by most accounts, died in Saverne (Alsace); Falconieri, Rossi, Bakfark, Guerrero, Widman, Schmelzer and others. Further data can be found regarding composers' diseases during 16th century (Palestrina, Lassus, Gesualdo, Gibbons...),^{1,18,19} accounts mostly collected from earlier times, especially from 17th and 18th century that bring us a whole collections of plausible, extensive findings concerning composers' fatalities that we describe in the book.¹ During 19th century diagnostic methods as well as the systematization of diseases has improved, therefore we notice increased incidence of certain diagnoses, such as tumors, syphilis etc. However, during 20th century an improvement in therapeutic methods occurs, so the lifespan of composers increases, they live well into their 70's and 80's. We mention over 100 octogenarian composers with preserved, although much humbler composing abilities, who lived into their old age, as well as over 40 nonagenarian composers. On the other hand, we see a number of young, unstable, mostly

jazz musicians who barely lived to be 30, as opposed to a generation of modern, affirmed jazz musicians (Gillespie and others) who outlived their predecessors by as much as 50 years. The extreme cases include a generation of rock musicians who died in their 20s (of drug abuse, diseases, accidents or have committed suicide); several of them died exactly at the age of 27 (J. Joplin, Hendrix, Cobain, Morrison).² Some composers / musicians perished in so called »red terror«, holocaust, land or air traffic accidents, drowning, poisoning etc. Suicide was the cause of death for many composers (Tchaikovsky);³ not to mention general contagious diseases (Mozart,⁴ Schubert,⁵ Mahler⁶, Respighi, Bizet etc.).^{1,18,19} or some more specific ones like tuberculosis (Pergolesi, Arriaga, Vancaš, Lisinski, Weber, Chopin,⁷ Paganini¹ etc.),^{1,18,19} syphilis (Wolf,⁸ Schumann, Smetana, Chabrier, Donizetti⁹),^{1,18,19} or aforementioned plague – the black death (that accompanied wars and starvation). Some other afflictions took the lives of a great number of composers – tumors (Debussy, Gershwin, Field),^{1,18,19} ulcers (Holst),^{1,18,19} uremia (R. Strauss, Albeniz)^{1,18,19} diabetes, (Milhaud, Ysaye, Ditters v. D.),^{1,18,19} pneumonia (Bachs),¹⁰ as well as mental disorders (Balakirev, Musorgsky),^{1,18,19} stroke (Gluck,¹¹ Verdi, Mendelssohn,¹² Gounod, Britten),^{1,18,19} and later, also heart attacks – sudden cardiac deaths (Martinu,^{1,18,19} Wagner, Roussel, Rimsky – Korsakov,¹³ Borodin,¹⁴ Offenbach, Reiger)^{1,18,19} of overstrained composers. Blind-

ness and deafness were a great limitation for a number of composers; nevertheless, some of the greatest were uninterrupted in their creative work by these handicaps (Haendel, Bach, Beethoven,¹⁵ Smetana¹⁶).

From the earliest times, we have plenty of data about the long living composers (Stravinski,¹⁷ Kelemen,^{1,18,19} Papanadopulo,¹ Gotovac¹), but the information about their diseases or causes of death is usually very scarce or nonexistent – they mostly left the public eye and became secluded, due to their chronically bad health and weakness (Leonin, Blondel, Perotin, Frauenlob, Giovanni da Cascia, Machaut, Landini, Dunstable, Dufay, Binchois, Ockeghem, Tinctoris, Josquin des Prez, Isaac, Jannequin, Senfl, Willaert, Sachs, Morales, Arcadelt, Tallis, Clemens non Papa, Zarlino, Waelrant, Le Jeune, Byrd, Victoria, Eccard, Morley, Sweelinck, Bull and Dowland).^{1,18,19} Luckily, we were able to find enough data about some composers (Adam von Fulda, Agricola, Obrecht, Escobar, Encina, Bakfark, Cabezon, Gabriellis, Palestrina, Guerrero, Lassus, Caccini, Caldara, Gallus, Cavallieri, Marenzio, Peri, Gesualdo),^{1,18,19} and we describe some of them in the book.¹ However, from baroque times, many composers / musicians are left without exact pathographic data (Praetorius, Weelkes, Gagliano, Lukačić, Scheidt, Legrenzi, Vitali, Buxtehude, Biber, Philidor, Pachelbel, Delalande, Kuhnau, Pepusch, Bononcini, Matheson, Keiser, Quantz, Graun, Arne

etc.).^{1,18,19} They most likely died from some chronic illness at an older age.

A lot of contemporary composers' life paths are observed in their old age. One such example is maestro Milko Kelemen, who is still actively composing at the age of 80. Years ago, in one of his autobiographic attempts, with a bit of humor and auto-irony maestro Kelemen listed more than 30 diagnoses that were attributed to him by physicians, nevertheless he was still traveling, composing and living actively. A lot of long living, now deceased composers, died without leaving sufficient communication or trustworthy biographic / pathographic material (Grove¹⁸, MGG, Greene¹⁹), either in written or electronic form (as is the case with Charpentier, Koechlin, Marx, Bruch, Liebermann, Blacher, Varese, V. Thomson, Francaix, Schmitt, Bliss, Malipiero, Petrassi, Bella, Haba, Tailleferre, Piston, Sessions).^{1,18,19}

We should encourage specialist local pathobiographers to research and find more plausible information, from national, music and general encyclopedias, biographies, accounts from immediate family and friends, local historians, and also from Church and medical archives; the data that was otherwise forgotten, inaccessible or perhaps even hidden on purpose. These are our experiences. Although we have collected some 2000 national and international biopathographies, it was appropriate and interesting for the general public to include in this book about 350 of them. The others are com-

posers whose less prominent biopathographies are lacking – they are therefore more interesting to us when subjected to overall statistical analysis concerning pathology of specific organic systems. These analyses were even used in some PhD and Msc theses.²¹

In the last 50 years of our work, about 100 articles were published in Croatian language and more than 30 in English language (accessible via Internet publications of »Alcoholism«, »Liječničke novine« and some other professional and scientific journals).

This book has already been roughly translated to English. It is our goal to complete the pathographic presentation of single nations, double occupations (for example composers – physicians or composers – lawyers); historical eras, and finally, certain organic systems. These accounts have already been presented in dozens of lectures, international meetings, symposia, and specialist pathographic conferences (in Lovran, Zagreb, Geneva, London, Toronto etc.).¹⁰

German^{22,23} and Austrian²⁴ pathographic investigators are considered the most prominent, followed by American and English, as well as Australian.²⁵ However, their combined pathographic efforts represent nearly 10% of the composers presented in the book;¹ they equal about 1% of the composers that we investigated. They have been chosen following the example of some other biopathographic works that included a sample of some 200-400 composers. We followed

the same example. We think that the general public will be interested in such a biographic enterprise – a presentation of pathographies of famous composers, their lives and destinies as artists, as well as patients. Therefore we decided to publish the book,¹ among our other medical and musical editions, internationally.

The inclusion of a word »destiny« in the title may seem peculiar. However, as the psychiatrists and neurologists, we are used to look at a person / patient as a whole, so we included general biographic elements in their pathographies.

Through the last 50 years of our hard work in this field we tended to write dozens of pages on a number of composers, and we still do about Mozart⁴, Tchaikovsky³ and several others. Gradually we have shortened the musicological and biographical part of our pathographies and focused more entirely on the basic pathomedical part. Some of our role model pathographers like the honorable professor Anton Neumayr²⁴ tended to write few pathographies but in a great length. A certain important- famous composer could get as much as a hundred pages. Not questioning the quality of that kind of presentation, the readers got overwhelmed by the sheer quantity of those works.

We decided to present our pathographies more concisely. This book could be regarded as a lexicon, a dictionary or a small encyclopedia, therefore our composers are presented in alphabetical or-

der, or chronologically in case of Croatian composers.

In the end we emphasize once more that we purposely left out some of the world's famous composers, in order to encourage local and international pathographic scientific research in greater depth.

BOLESTI I SUDBINE POZNATIH SKLADATELJA

Sažetak – Zašto uopće pisati o bolestima skladatelja? To se pitanje više ne postavlja jer

upravo bavljenje njihovim bolestima već 50 – 100 godina sve intenzivnije i mnogo bolje pruža uvid i u život i u stvaralaštvo skladatelja. To su, osim Griega, mislili i mnogi drugi skladatelji. To su biopatografije, životni putovi i sudbine skladatelja sa psihološki i dragocjenim podacima. Uostalom, nastojali smo vjerno navesti podatke koje smo našli te ih samo povremeno tumačiti, raščlaniti ili dodatno medicinski sistematizirati – kategorizirati služeći se razumljivim izrazima u publikaciji knjige »Bolesti i sudbine poznatih skladatelja«.¹

Ključne riječi: skladatelji, bolesti, patografije

REFERENCES

1. Breitenfeld D, Breitenfeld T. Bolesti i sudbine poznatih skladatelja. Zagreb: Music Play; 2012.
2. Lucijanić M, Breitenfeld D, Miletić J, Buljan D, Ozimec-Vulinec Š, Akrap A. Rock Musicians' Club 27. *Alcoholism* 2010;46:109–113.
3. Breitenfeld D, Raguž H, Bakotić-Požarić I, Breitenfeld T. Petar Iljič Čajkovski – Kolera ili suicid. *Liječničke novine* 2000;155:49–56.
4. Breitenfeld D, Mikula I, Breitenfeld T, Krpac L. Wolfgang Amadeus Mozart (1756–1791) Sociopsychosomatic Factors that Precipitated Mozart's Final Illness. *Alcoholism* 1992;28:107–110.
5. Breitenfeld D. Franz Schubert (1797–1828) Pathography. *Alcoholism* 1990;26:109–112.
6. Lucijanić M, Breitenfeld D, Pavić J, Miletić J, Buljan D, Granić R. Gustav Mahler – 100th anniversary od death. *Alcoholism* 2011;47:53–56.
7. Breitenfeld D, Kust D, Turuk V, Vučak I, Buljan D, Županić M, Lucijanić M. Frederic Chopin and Other Composers Tuberculotics – Pathography. *Alcoholism* 2010;46:101–107.
8. Breitenfeld T, Thaller V, Jagetić N, Bergovec M, Breitenfeld D, Kosan M. Hugo Wolf (1860–1903) Pathography. *Alcoholism* 2006;42:101–104.
9. Breitenfeld T, Vodanović M, Breitenfeld D, Šostar Z, Lucijanić M, Buljan D, Granić R. Spontini, Hoffmann, Donizetti, Macdowell, Delius and Other Composers Neurosyphilitics. *Alcoholism* 2009;45:143–152.
10. Breitenfeld D, Thaller V, Breitenfeld T, Golić-Gruber V, Pogorevc T, Zoričić Z, Grubišić F. The Pathography of Bach's Family. *Alcoholism* 2000;36:161–164.

11. Breitenfeld T, Breitenfeld D, Thaller V, Prstačić M, Jagetić N. Christoph Wilibald Gluck (1714–1787) Pathography. *Alcoholism* 2006; 42:43–44.
12. Breitenfeld T, Breitenfeld D, Vargek-Solter V, Delija A, Šostar Z, Demarin V. Felix Mendelssohn Bartholdy (1809–1847) Goethe's Favorite. *Acta Clin Croat* 2009;48:315–318.
13. Breitenfeld D, Bergovec Mi, Breitenfeld T, Buljan D. Nicholas Andreievich Rimsky – Korsakow (1844–1908). *Alcoholism* 2010; 46:49–51.
14. Breitenfeld D, Thaller V, Breitenfeld T, Golik-Gruber V, Bergovec Mi, Bergovec Ma, Pogorevc T, Bergovec L. Alexander Porfirevich Borodin (1833–1887). *Alcoholism* 2000; 36:165–169.
15. Breitenfeld D, Thaller V, Bergovec Ma, Breitenfeld T, Bergovec L, Prstačić M, Breitenfeld V. Ludwig van Beethoven (1770–1827) Pathography. *Alcoholism* 2003;39:47–50.
16. Breitenfeld T, Thaller V, Breitenfeld D, Demarin V, Vodanović M. Bedrich Smetana (1824–1884) – Pathography. *Alcoholism* 2008; 44:115–120.
17. Breitenfeld D, Thaller V, Breitenfeld T, Golik-Gruber V, Zoričić Z, Prstačić M. Igor Stravinsky (1882–1971). *Alcoholism* 2001; 37:71–72.
18. Sadie S. Grove. *World Encyclopedia of Music*, London: McMillan; 1980.
19. Greene D.M. *Greene's Biographical Encyclopedia of Composers*. Garden City, New York: Doubleday & Company Inc; 1985.
20. Šostar Z, Vodanović M, Breitenfeld D, Breitenfeld T, Buljan D, Granić R. Composers – substance abusers. *Alcoholism* 2009;45:127–142.
21. Breitenfeld T. *Neurološke i psihijatrijske bolesti skladatelja (magistarski rad)*. Zagreb: Stomatološki fakultet Sveučilišta u Zagrebu; 2003.
22. Kerner D. *Krankheiten grosser Musiker*. Stuttgart: Schattauer; 1968.
23. Lange – Eichbaum W, Ritter W. *Genie, Irrsinn und Ruhm. Die komponisten*. Muenchen: Reinhardt; 1986.
24. Neumayr A. *Musik und Medizin*. Wien: J&V.E; 1989.
25. O'Shea J. *Music and Medicine Medical Profiles of Great Composers*. London: J.M. Dent & Sons Ltd.; 1990.