

Anxieties and Depression Disorders in Composers'

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Summary – In this paper, we presented an overview of composers diseases in the last five hundred years. The collected data were obtained from the biographies of more than ten thousand composers and over a thousand pathographies. It is the world's largest processed sample so far. The diseases mentioned and their comorbidities had an impact on lives and work of composers (87). They have shortened their life span from just over sixty years average to approximately fifty years.

Key words: composers' diseases, anxieties, depressions

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Introduction

From the biographies of more than ten thousand composers and over a thousand pathographies it appears that in the last five hundred years the average lifespan of composers was more than sixty years. Composers presented in this work were sorted chronologically by the year of their birth. [1-7] Some pathographies were more deeply elaborated, and all pathographies with diagnoses were shown chronologically in the additional list of composers affected by anxiety and depression. [8-11].

Rolande (Orlando) de Lassus (C 1532-1594)

Flemish – renaissance conductor and composer. In 1586 his mental and physical health worsened so he withdrew to the countryside, which helped him a lot. In approximately 1590 he became more and more depressed, paranoid, amnesic, leading to dementia. He had a stroke, which resulted in a speech disturbance.

Carlo Gesualdo (1560-1613)

Italian composer. He married his cousin for dynastic purposes, his wife was a daughter of the marquis of Pescara. She was not a very sincere and faithful wife. So he punished her by killing her. This act forced him to withdraw from the public life and he spent the rest of his life in his castle. Later he mar-

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ried a niece of the duke and this was another mistake. His marriage failed for the second time, there were conversations that he also killed his younger, maybe illegitimate daughter. All these circumstances caused a severe mental crisis to the point of the break down. A social misfit inclined to masochism, he let himself be whipped. Strangely enough, this was the only way he could empty his body properly. He died three weeks after the death of his only son Emanuel who was born from marriage with Carla, his first wife. He died deeply depressed, probably from the consequences of asthmatic problems when he was 53.

Claudio Monteverdi (1567-1643)

Italian composer and violinist. There was a tragedy in his family when he was 40, his wife died and left him with two underage children. This resulted with depression and illness and consequently, he became less active. His later activities are tied with Venice. When he was 65, there was another period of depression and illness. It was the time of plague epidemic which eliminated all social activities, therefore orders for musical pieces as well. Whenever there was a hard time for him, he used to return to his family in Cremona, so did he just before his death. He had a need to see his family, hometown and Lombardia in general, since he was most appreciated there. All this was too tense for him, he returned home to Venice already ill and died in fever at the age of 76.

Arcangelo Corelli (1653-1713)

Italian composer and violinist. He was known as a humble, mild and moral man. Due to frail health he receded from public life, probably after prolonged hardship. It is

believed that he suffered from depression, anxiety and melancholy. After he had turned sixty, he died in just three weeks. from a feverish acute illness.

George Frideric Handel (1685-1759)

German composer, organist and conductor. He was qualified as a man of a big appetite, a trencherman, and it was even said he was apt to drink and change his mood. Thus, in the cases of overworking or failure in his business dealings, and probably due to his picnic constitution and cyclothymia, he was prone to shorter or longer depressive conditions which always ended with decreased activities. His frankness, extrovert nature, cheerfulness up to hypomania were rarely interrupted by deeper depressions, particularly in the years 1729, 1734, 1737, 1742, 1743, 1745, (strokes?, embolisms?, alcohol abuse?). When he was about seventy years old, he was especially down, due to his blindness and impossibility to lead further dynamic life of a performer and composer. He was often sitting "in the dark", feeling bad. If he had lived in modern times of alienation but also of professional developed improvement, he would probably go to see a psychiatrist, more probably because of the expressed disturbances than because of a severe manic-depressive disorder.

He was still great, had an excellent memory, his creativeness was still alive but due to diminished abilities to act, he sunk into loneliness and sorrow. Since 1753. he has been totally blind. While he was still able to write music on the paper, he wrote down about the difficulties he had with his sight. ("I am hindered in my work because of relaxation of my left eye's sight"). The cataract is not to be blamed as the only reason for his blind-

ness, according to many experts. Maybe it was a question of some other eye illness. According to Evers, Handel's eye-disease can be best interpreted as a central vascular disorder with degeneration of retina or with ischemic changes in the corresponding brain nuclei and tracts, complicated by a simple senile or post-traumatic cataract, diabetes and hypertension. Handel's profile of risk factors points most probably to a vascular degeneration of macula or a damage of choroid vessels.

But we also indicate the possibility of the alcoholic damage of the optic nerve in the sense of retro bulbar neuritis, optics fascicle. The cataract, by systematically worsened possible alcoholic retro bulbar neuritis of optic nerve could entirely explain his blindness. However, he continues to attend the performances, especially of his works, performs separately by improvising. The whole medicine staff of London rally around him in order to help. They try to improve his destroyed sight and to remove his pains, operating by means of needles and cuts. At first the operation was done by a well-known eye-doctor from the Guy Hospital and then by the court surgeon William Bromfield in 1752.

After that in the year 1753 he underwent an operation again, carried out by the well-known wondering operator who was mostly seen on the fairs and was probably a medical charlatan. His name was John Taylor and he reports as follows: "I have seen a vast variety of singular animals, such as dromedaries, camels, etc., and particularly at Leipzig, where a celebrated master of music (J.S.Bach), who had already arrived at his 68th year, received his sight at my hands, it was with this very man that the famous Handel was first educated, and with whom I once thought to have the same success, having all the circumstanc-

es in his favor, motions of the pupil, light, etc., but upon drawing the curtain, we found the bottom defective from the paralytic disorder."

It was all a big failure, but the only thing good is that Handel, in comparison to Bach, lived long enough to reach his seventies. Although mentally alert, he was after all, gloomy and depressed, but nevertheless he lived to his 74 year, far below his composing activities. In October 1758, he started to weaken, lose his well known gluttony, became orientated to himself and sullen.

He still intended to take a cure in the water-place. On April the 7th 1759, it said in the papers, that Handel intended to undergo a treatment in Bath. Then he was present at the performance of "Messiah", he maybe even performed some improvisations (because it was announced so), but it is more likely that due to his worsened health condition, he was only present at the performance. After he returned home he felt sick, and took to bed, aware of the nearness of his death. He wrote a codicil and by his last will he left all he possessed to his relatives, acquaintances, friends and also for humanitarian purposes. According to the statement of his doctor, dr. Warren, he died in the evening of April the 13th, although the day after has been stated more frequently as his day of death. Handel's pathography turns to obscurities regarding his diseases in 1729, 1734, 1737, 1742, 1743 and 1745, because the complete recovery from manifold stroke at the age of fifties is quite unusual. It also points out his picnic constitution with inclination to this-worldly delights and pleasures, his unstable states of his mood (depressive states particularly during his illness), but not up to the level of mental disease of circular psychosis, and also the sad development of his fruitful and

dynamic life directed towards too much loneliness, sorrow and “the darkness” of a blind person exhausted by operations.

He died of an old man’s decrepitude, which was perhaps aggravated by some malignant illness, stroke – as his mother?, pneumonia or heart weakening. Although his dying could be interpreted as an arteriosclerotic condition with possible stroke, it could also be explained even better as a specific (up to *praedelirium*) standstill of organism due to long-lasting alcoholic damage. His inclination to food and drinking, which made him suffer from gluttony and alcohol abuse, can be understood only like a symptomatic – co morbid, depressive alcoholism, i.e. his unhealthy alcohol addiction due to the existing primary disease, i.e. depression he was apt to so much and of which he tried to look for a way out very frequently by means of alcohol, which he, as the time went by, was unable to maintain under control in an adequate way. As a man of genius, according to Beethoven, the greatest living composer of that time, he was certainly an unusual, strong and dynamic personage whose cyclothymia was almost always within normal limits.

Jean-Jacques Rousseau (1712-1778)

French philosopher, publicist and composer of Swiss descent. He lived in poverty and was often ill. He was restless, incoherent, emotionally unstable and often agitated. At times he was quite adventurous.

After his recovery, from the age of 25, he started experiencing depressive periods with attacks of tachycardia. He was also very afraid of death and hell which triggered his depressive periods, mostly in 1743, 1750, 1753 and 1756.

He moved to Charente outside of Paris to spend more time in nature, but it did not

improve his health significantly. He fell into religious and feeble moods more and more often. He tended to be hypochondriac and wrote down his symptoms, therapies and doctors, who treated him very eagerly. Even though he did not have a good opinion of doctors, being afraid of tuberculosis he asked for advice from doctors in Montpellier. In his opinion, they did not take him seriously, so their help was of no use.

His psychological condition worsened to the level of evolutive psychosis with bouts of crying, deep melancholia to the level of psychosis, with ideas of relation and prosecution.

Wolfgang Amadeus Mozart (1756-1791)

Austrian composer, pianist and conductor. Amadeus was not a handsome man. He was sensitive to comments about his looks, but his psyche was complex and rather more impressive. He was a man of higher intelligence and showed an extraordinary capacity for imaginative creation and original thought. Also, he was able to put great effort into everything he did, His inflated inner image of himself some-times led him to excessive narcissism, exhibitionism and arrogance. That resulted in creating a great deal of enemies throughout his life.

He showed a certain trait of dependence and was compliant and submissive to his father’s will, He was spontaneously generous, which made him easy prey for hangers-on. He used to suffer in silence. His way of dealing with aggression was a passive, self-destructive one.

Mozart suffered from something that might be referred to as cyclothymic disorder. There is some evidence that his mother suf-

ferred from the same disorder. His hypomanic swings were characterized by an elevated mood, excessive energy, inflated self-esteem, increased productivity, physical hyperactivity and inappropriate behavior with no sense of outcome. Sometimes he wrote nonsense in his letters. Techniques used in those letters include paraphrases, anagrams, cancrizans and foolish rhymes and verses. Sometimes he would behave in a manner of deliberate, self-demeaning clowning. His economics seemed to be a part of his hypomanic syndrome and led him to serious financial troubles.

Depressive spells would develop after hypomanic swings. Sometimes these depressive and hypomanic symptoms alternated rapidly within a day, or even an hour. In his depressive phases, he was extremely irritable, melancholic, apathic and dominated by imagination. He would suffer insomnia and certain trends of paranoia, jealousy, exhaustion and fatigue. Depression got worse after his father's death.

There are at least two important elements of Mozart's cyclothymic disorder that could have significantly contributed to shortening his life. First is his ergoholism, a fatal swing of a genius who cared no more for his health, and kept exhausting himself working. Second is his alcoholism, which might be referred to as symptomatic – comorbid. Schikanaeder's group pushed Mozart to excessive drinking, through which he was shortly able to escape life's reality, and probably alleviate the symptoms of depression, somatic illness and even hangovers. It is possible that he suffered some praedelirant states, which partly occurred in fever during his terminal illness.

Due to his temper and his character, Mozart led a reckless life and used to work obsessively to the point of complete exhaustion. His neurasthenia could have been just

a common expression of his artistic personality (over sensibility, etc.). He drank alcohol (especially punch) throughout his whole life, and even before his symptomatic alcoholism (under the influence of Schikanaeder's group) mentioned earlier, he suffered some praedelirant states and epileptic seizures.

Ludwig van Beethoven (1770-1827)

German composer, pianist and conductor born in family of musicians.

However, only four years after, about 1800 his musical career was seriously jeopardized when he slowly started to lose his hearing. Not being able to accept his illness, he lived a miserable, solitary life trying to keep his deafness in secrecy. Ludwig found no understanding among people, especially among women. He was very unhappy because women had, in spite of his small height and average look, till then enjoyed the company of the famous musician.

Therefore, as early as in 1802 he wrote "Heiligenstadt's will", where he described his health problems and his complete despair. But fortunately, he decided not to give up. Hand in hand with his personal problems, Ludwig experienced serious professional crisis which resulted in lower musical productivity. Although his popularity was growing, the progressive loss of his hearing made him unable to perform as well as he did before either as a pianist or a conductor. Very quickly, all that started to affect his career because he failed to maintain the interest of the public. He didn't have any permanent relationship with a woman, however, he managed to get himself into troubles because of possible homosexual tendencies towards his nephew and frequent quarrels with his sister-in-law. With his uncontrollable and violent temper, he had to change his residences often. He was rude

and distrustful toward his landladies, doctors, acquaintances, even toward his friends. He led a solitary, emotionally intensive life that, in a way, contributed to his musical creativity.

For more than 30 years he had been misusing alcohol, hoping to come out of the serious depression he had fallen into because of his deafness and other illnesses. He used to drink about 100 grams of absolute alcohol per day, usually 1 liter of wine. It was known that traders with his music used to bribe him with bottles of his favorite wines, some of which had never been delivered because of his death. He was a regular customer at local inns, usually drinking champagne, punch and beer. He was not a pleasant company when he was drunk. The opinion is that even the smaller quantity of alcohol than previously mentioned could cause serious liver damage. Beethoven's alcoholism was also evident in his swollen face. He completely disregarded doctors' advice to avoid alcohol; on the contrary, he drank even more, not being able to control himself anymore.

Gioacchino Rossini (1792-1868)

Italian composer. He did not compose anything from since he was 37 for the next 30 years. His inactivity was caused by the saturation with his former life, with the financial security guaranteed as long as he lived – high pension and other benefits. His inactivity was connected with his long time illness, which exhausted him, both physically and psychically.

According to his behavior later on, it could be concluded that he had hypochondria and temporary longer depressive periods when he separated from other people. Due to his physical build-up, even a minor organic illness was taken seriously. Already in 1825

Rossini was seriously ill for the first time, forced to stay in bed for weeks. According to the certain secrecy it could be presumed that gonorrhoea has seriously taken place. In 1831 these symptoms were repeated. He also had lumbago with expressive depressive moods and general nervous exhaustion. Since then, he had begun his periodical spa therapy, or maybe that was his escape from other's people company to illness. All that brought him to exhaustion, expressive general declining, overall spiritual depression, isolation from other people and a complete loss of creativity. He was deeply troubled with father's death, although his father died very old. Having arrived in Paris he applied to a surgery (not serious but delicate) with the help of Dr. Jean Civialea. After recovering, he was able to undertake an exhausting journey and returned to Bologna. He was spiritually exhausted and depressive to the extent that he suffered serious insomnia with suicidal thoughts.

But his creative life was over long time before that. Specialists do not agree whether it was a result of wealth or self-satisfaction or the result of laziness, in a way. It can certainly be determined that he was a cyclothymic, with a number of depressive phases. That could have led to paralysis in social and creative activities, because of an expressive chronic illness. One should not omit his probable inclination to hypochondria and overreaction in the acceptance of his illness.

Hector Berlioz (1803-1869)

French composer and conductor. Lack of mother's love was evident in Berlioz's almost desperate seek for love of other, older women.

Berlioz usually expressed his feelings for those he loved strongly and directly. At twenty-three, his at first unrequited love

for the Irish Shakespearean actress Harriet Constance Smithson was the inspiration for his *Symphonie fantastique*. In creating that *Symphonie*, it is also probable that the artist was under influence of opium. Berlioz's letters were considered so overly passionate by Smithson that she initially refused his advances. Berlioz became very depressed and tried to commit a suicide with laudanum (opium).

In 1853 he had gastritis, and remaining duodenal ulcers caused him intestinal pains for more than 15 years, which he treated by opium (laudanum) with the consecutive opium-addiction. He had some sleeping disturbances, which he also treated with opium. The cause of his intestinal pains could be either intestinal neuralgia or they could be just an excuse for opium misuse. That opium misuse was probably inspiring in the beginning, but during time, it became a disabling factor. Berlioz was in abstinence - dependence syndrome, becoming passive and in deep personality dissipation. That states he described in his *Symphonie* program, letters and later printed memoirs.

Robert Schumann (1810-1856)

German composer, pianist and conductor. There were some psychiatric diseases in his family, like schizophrenia, and depression, which occasionally ended with hospitalization or suicide. Alcoholism and cerebrovascular infarctions were not rare either. It was a family of intellectuals and very sensible individuals.

Schumann's childhood was shaded with his mother's long-time illness because of which she neglected raising her children. He was a very sensitive and anxious child, sometimes depressive, and having a sleeping disorder.

Alcohol produced many harmful effects on his physical and mental health; he experienced great fears, developed a split personality, and had hallucinations. His imagination broadened under the influence of black coffee and nicotine from tobacco. Schumann described his hallucinations as dreaming awake, sometimes with hearing hallucinations. Those hallucinations were often connected with sexual excitement. He had depressive and hypochondriac phases.

In his diary he wrote about his drunken states and hangovers afterwards, sleeplessness, tiredness, murmurs and sounds in his ears, complaining that it bothered him much, and seriously thinking about committing suicide. He wrote also that there was a difference between creative guzzling and drunkenness (unfortunately the last one was one of his major problems). On the other hand, guzzling helped him in his creative work. In Schumann's diary, we encounter lines where he mentioned masturbation, and wrote phrases like "damn pederasty" and "a night with Greek dreams" which suggest homosexual and pedophile tendencies. He suffered severe hangovers and abdominal pain with diarrhea, with anxious panic states and loneliness and feeling lost.

According to Robert's diary, frequent sexual intercourses with some "Christel" got him primary syphilis infection with the affect on "typical" place (penis), described as "glowing pain on a place of ulcer". That fact, at the age of 21, marked his further life. At the age of 23 he was under treatment for cold fever, which appeared as a consequence of his night-life, soaked in alcohol. That year brought him a lot of excitement, alcohol excesses and stress. Again, he was shocked by the death of his brother's wife, showing prepsychotic signs with hallucinations. Even

though Schumann drank a lot in order to go over his neurosis and schizoid - pseudoneurasthenic disturbances more easily, he had hallucinations and “light-seeing” states and heard music inside his head.

At the age of 43 Robert started to change. He became more and more quiet, unsociable, had problems with conducting, conflicted with the orchestra, what ended in conducting only his compositions.

Because of frequent feelings of dizziness and loss of consciousness, the doctors intervened with a venesection – bloodletting (hypertension?), and dr. Kalt diagnosed an incurable mental disease!!! - neurosyphilis? Robert fell into severe apathy, slowed down and had ideas of being pursued, what was his excuse to drink even more. He constantly heard the tone A, had problems with speaking and writing. He was very excited with his acquaintance to Brahms in whom he recognized a musical talent.

His movements become stereotyped with kyphotic posture and in time he became less creative. At the age of 44, he wrote about the telepathic connection with Brahms. In the letters he imagined words secretly written between the lines. Finally his madness busted out: he had unpleasant and painful sound experiences during the nights, constantly hearing tone A. Every murmur sounded like an amplifying music in his head.

Those experiences became more and more unpleasant, and he felt that music turned into scares which were hounding him. He screamed in pains, became violent to his wife and children. He even saw Schubert’s figure, who allegedly sent him a beautiful melody.

Full of fear and frustrated, escaping from home, Schumann tried to drown himself by jumping into the river Rhine in 1854, but the fishermen pulled him out of the water

against his will. After that suicidal attempt, feeling depressed and worrying about his aggressions towards his family, Schumann demanded to be institutionalized.

The last 2 years of his life he spent in the sanatorium Eendenich near Bonn/Rh (30 miles from his home). As a famous person, he was treated with great care and respect. He had several rooms at his disposal and a great comfort, but only a few friends to talk to, especially from the same social class. The sanatorium was run by dr. Richarz, who made a great effort to treat patients nicely. Schumann’s condition, with only few exceptions, worsened continuously.

It is not clear what drugs doctors gave him. His legs keep swelling; he ate very little, and was fed on probe. During his last days, the doctors gave him only wine and alcohol punch (for he refused other food). His body slowly decayed, he contacted with his surroundings less and less, using only writing for communication. His family (except Brahms) did not visit him until the very end, at first for their own safety (prevention of physical attacks), and later for his apathy and personal decay.

In time he started to lose ability to recognize people around him. He got cramps, probably epileptic attacks, unwilling stereotype head and limb movement with grimaces. His pupils were not stiffed, but irregular and unsymmetrical. He had hallucinations and ideas of being pursued and he had not only dissociated but incoherent judgment too, despite some better phases.

The causes of his relatively early death could be the stimulative psychoactive remedies that was Schumann continuously taking: alcohol on the first place, coffee, tobacco, and drugs (as an analgesic therapy and for psychological reasons he was taking an opium derivate – laudanum).

The psychiatric condition of Robert Schumann concerned doctors particularly. Severe attacks of depression and hypomania and in contrary psychotic states of schizophrenic origin exchanged during his lifetime (as his schizoaffective disturbance?), with alcohol and other psychoactive substances misuse as “auto therapy”. His mental, neurological and physical condition was destroyed mostly during the last three years by a syphilitic progressive paralysis – general paresis, which ended Schumann’s life far too early, at the age of 46.

Anton Bruckner (1824-1896)

Austrian composer and organist. In St. Florian monastery near Linz, he was a very lonely boy, who learned music with solid music teachers-monks, the only persons he could lean on sentimentally and sensitively. Only there was he accepted with understanding, being a deeply neurotic person. He wrote to the others: “I am always sitting, being poor, lost and melancholic, in my little room”. This melancholy was characteristic for many of his ancestors, his three sisters and a mentally retarded brother and he felt very lonely- When he was already twenty-one, he returned to well known St. Florian monastery near Linz to instruct the young men in musical knowledge and abilities.

When he was forty-two he wrote to a friend: “Under melancholy I understand... mainly arrogance towards people, their friendship, correctness and fidelity...” Next year, Bruckner felt an unbearable strong call for so called hard and forced labor. He had to obsessively count leaves and trees, windows and houses dots and signatures, stones in pebbles and stars in the sky. He was endlessly spending time in praying. He was imagining things. He tried to cure it with cold baths in bad Kreuzen. His con-

dition was so bad, that the bishop organized a permanent company for him – a monk to help him to get rid of a terrible loneliness, help his bad thoughts and prevent him to commit suicide. Bruckner was inclined to do it openly. They used to find him crying at the brink of the step rock. He didn’t even know how he had got up there and they hardly succeeded to save him. A number of cures helped him only partly and particularly it was warm leading of Dr Keyl. Those conditions were repeated, worse and harder as he became elder. He wrote to a friend: “It was a complete feeling of abandonment, loss. I lost my nerves and I am constantly frustrated and too sensitive.

I was in the worst condition, I confessed this only to you – don’t talk about it. A little more of this and I would be lost forever.

With age, Bruckner started to show a very strange inclination and a strong, overreacting curiosity towards death and the dead. He was dreaming about ghosts, seeing ghosts of the dead people in his dreams. He used to go to cemeteries, once crying and crying on Wagner’s grave, studying graves epitaphs, showing and counting dots on epitaphs.

In newspapers, he was reading about murder cases, executions and criminal affairs, touching bodies of great composers (during funeral ceremonies – Beethoven and Schubert). He wanted to get hold of the skull of his music teacher. These were the main Bruckner’s occupations in seventies.

He died as a lonely neurotic who had chosen his own way to serve his ultimate love – the music. One of his admirers said: “He was divided from his environment with an unavoidable obstacle, he did not go to parties, he had not a group of equal-minded admirers as Schubert – nor friends, nor did he make heroic plans, nor had he Royal admirers like Wagner, nor family like Bach.

Mily Alexeyevich Balakirev (1837-1910)

Russian composer. At 21, he started experiencing headaches, as well as digestive and mental problems. His depression and frustration could have been described as an encephalitis, but also as the first symptoms of his melancholic-depressive states. One of the Stasov brothers helped him cure that particular illness, and soon he was ready to continue his progressive music ambitions. In June 1861, he became severely depressed and introvert, destroying his manuscripts and longing for death to free him from his mental pains. He constantly felt that he did everything the wrong way but somehow managed to recover from his depressive state.

His supporters were helping him. Upon reaching the top of his career in 1870, new problems began to arise due to his bad temper, inflexibility and inclination towards quarrels.

Balakirev himself experienced financial ruin when his concerts were no longer successful. Left jobless and without any kind of support, Balakirev became a depressed conservative monarchist obsessed with mysticism and religion.

It took him no less than ten years to make his comeback, yet he could never re-attain his former status. Younger and more adaptable, talented and educated people took over.

Pyotr - Peter Ilyich Tchaikovsky (1840-1893)

Russian composer, conductor, music writer, critic and teacher.

Tchaikovsky suffered from gastric problems, particularly in stress-inducing situations, associated with diarrhea, which he treated with high doses of sodium

bicarbonate. Modern medicine would relate such symptoms to gastritis, gastric ulcer or even some intestinal disease. Tchaikovsky often felt depressed and cried a lot, especially when he was alone in the evening. He suffered from phobic fears of thunderstorms (it is the theme he exploited in some of his works). As a passionate cigar smoker he was nervous and oversensitive, generally lacking self-confidence and feeling guilt and strong fear of life. He was good-natured and of mild temperament, polite in his contacts with others but rather timid and tense. However, other people considered him a warm and charming person. He had several nervous breakdowns and suffered from nightmares and phobias. His appearance had certain effeminate quality and his personality was of neurotic structure. Unfortunately, he was neurotic and inclined to wrong compensations.

The roots of the problems in his relationships with women should be searched for in his childhood. He was extremely attached to his mother and his governess, both of whom he had lost early in life.

He wrote about his mother's death: "Exactly five years ago my mother died. It was the first time I had experienced real grief and pain ... Her death had an enormous impact on my own fate and the fate of my family. Every minute of that terrible day is still vivid in my memory as if it all happened only yesterday."

Next person in order of importance in his life, was his German governess Fanny Dürnberg. Due to the family's financial problems, she was forced to leave them when Peter was eight years old. He was so sensitive that she used to call him "porcelain child". Tchaikovsky felt terrible loss when left, cried for days and withdrew from the rest of the family.

Until the certain age, an adult motherly figure, whose presence is necessary and logical, must exist in everyone's life. Tchaikovsky felt a very strong need for such a person because he had lost that kind of support too early in life.

Therefore, it is understandable that he wrote that "sometimes he feels a need for women's guidance and care". As a handsome man of discreet charm he was attractive to emancipated women artists and aristocrats, even more so since it was impossible to seduce him. He was a sensitive, well-meaning and unobtrusive man with great appeal for women who were older than himself. He often expressed friendly feelings for older women artists, particularly opera singers, and in that context his affair with the Belgian opera singer Desiree Arthot is often mentioned.

In that period his ex-student from the conservatoire, Antonina Ivanovna Milyukova, tried to find the way into his life. She wrote him a letter in which she disclosed her feelings for him.

Tchaikovsky decided to marry Antonina Ivanovna and the basic motive for such a decision is seen in another of his letters: "I must try hard to marry someone with all the formalities. I am fully aware that my inclinations are the most serious and almost unsurpassable obstacle on my way to success and therefore, I must fight nature with all the strength I have ... I will do everything to get married this year, but I should also use all my courage to break from my habits."

It is hard not to suspect that the mysterious "habits" (he usually wrote openly about other vices) are related to his homophile tendencies and homosexuality.

"On one such evening I approached the river Moscow and suddenly it occurred to me that I should get deadly ill. Under the cover

of darkness, unnoticed, I got into the river up to my waist and was sure to get a fatal cold".

Tchaikovsky got only a mild cold. He tried to get a legal divorce but failed.

Nadezhda Filaretova Frolovskaya von Meck realized her dreams of becoming a mighty patron of young musicians. She did not support only Tchaikovsky, but Debussy and Wieniawski as well.

Interestingly enough, they never talked in person but kept their intensive relationship, almost an open platonic love affair, strictly confined to letter writing.

This great and unusual friendship lasted for almost fifteen years to be suddenly broken in 1890.

A list of his close male friends is very long and certainly at least some of them can be suspected of homosexuality. Tchaikovsky started his career as a music teacher in Moscow and since he was still not completely absorbed by his composing, he dedicated much of his time to his students. He showed great consideration for some of them, particularly the one called Vladimir Shilovsky. He tried to eliminate rumors by marrying Antonina Ivanovna Milyukova.

Tchaikovsky had a serious quarrel with his beloved sister Alexandra Davidova some five years before her death and it was only on her death-bed that she forgave him. Maybe his too strong feelings for her son Vladimir Davidov were the seed of discord between them. Tchaikovsky gave all his love and care to his nephew Bobyk after his mother's death. He took him to the tours and to the spas and dedicated his best works to Bobyk.

Oddly enough, Tchaikovsky became a victim of one of his transitory affairs. It was recently discovered that on a Dnyepri steamboat journey to Odessa he had seduced a

14-year old boy. Tchaikovsky's sexual preference was no more a secret to anyone. This last mistake was inexcusable and an impartial committee was formed to deal with this issue of honor and morality (see The last year of life and death).

Tchaikovsky started drinking with his friends as a very young man. His tolerance to alcohol increased with time and he wrote about that in his letters and his diary.

He lost control over his drinking and tried to alleviate the symptoms of abstinence syndrome by drinking more.

He practically drowned his depression in alcohol. Although he tolerated alcohol in the beginning, later he developed an addiction with the loss of control over drinking and inability to abstain (gamma and delta types of alcoholism).

Tchaikovsky was not an alcoholic who typically drinks in the company, but rather symptomatic - comorbid alcoholic who started drinking to ease his neurotic disturbances. Alcoholism is quite common in homosexuals who try to eliminate their emotional problems and the feeling of guilt.

Tchaikovsky was also a passionate card player and gambler. He lost large amounts playing cards but always paid his debts on time. When he did not drink he took a sedative, potassium bromide, soon developed a habit and later even mixed it with alcohol. From everything said, it is evident that this was a case of multiple dependency.

He went 1893 to a business dinner and poured himself a glass of unboiled water which was a very unreasonable thing to do since cholera epidemic partly raged in St. Petersburg. He drank the water to his friends' terror. Tchaikovsky was said to state that he was never afraid of getting cholera (although his mother, died of it).

He was sick that night and went straight to bed. He woke up after a few hours in fever and feeling stomach spasm; soon diarrhea and vomiting started. Tchaikovsky died unconscious.

He poisoned himself with arsenic. Such an assumption seems reasonable because all the symptoms were characteristic for the acute arsenic poisoning.

Edvard (Hagerup) Grieg (1843-1907)

Norwegian composer, conductor and pianist. He got specific tuberculosis of the left side in 1859.

He was a sensitive neurotic man treated many times in spas and sanatoria. He was aware that his sensitivity reflected in his music.

Last three years of his life and specially last year of his life he became more and more nervous, weaker and depressed, saying goodbye to his friends forever, aware of the nearness of his death.

Claude Debussy (1862-1918)

French composer. Although he was not physically attractive, he was always surrounded by women. Being very sensitive and emotionally insecure that helped him build his low self-esteem.

At the age of 43, Debussy started to feel physical as well as mental exhaustion. He turned into a person with a very complex personality - self-centered, egocentric and asocial. In the attempt to ease the feeling of emotional emptiness, he sought the comfort in various sedatives and even hard drugs such as morphine and cocaine. That was an effort of a desperate man to find comfort and fulfillment as well as inspiration for the composing. When Debussy tried to give up his addic-

tion, he often experienced severe withdrawal symptoms – drowsiness and headaches. In 1914 he started to suffer serious abdominal spasms with rectal bleeding. In order to relieve pain, he was taking quinine and some other stimulating drugs.

Max Reger (1873-1916)

German composer and organist. He was not able to master the rules of such social surroundings. Being of rebellious nature, strong and early matured in conflicts with authorities (from his father on), he revolted and made all kinds of alcohol and other excesses throughout Wiesbaden with his gang, almost tyrannizing other people. He smoked excessively. At night, he used to roam through the town drunk and drive his landlords to despair. So, he was considered an „enfant terrible“. His genius was not understood, but we must say also that his creativity was not at its best and his composing was still not acknowledged. However, at the age 23, he succeeded his professor at conservatorium. That did not inspire him, but only pushed him to further wanderings from tavern to tavern, where, ever more lonely, deep in the night he would gaze at one spot, experiencing restlessness and insomnia. He acknowledged the danger of alcohol, which he could not drink moderately, but nevertheless lost control over that. In the mornings, he would not remember what happened last night and suffered severe hangovers.

He voluntarily joined the army, but that did not sooth him either. His excesses under the influence of alcohol (some quote that he was even delirious) led him to military hospital as a psychiatric patient, where he passed through few psychotic and severe aggressive episodes. When he was 25, his devoted sister Emma barely returned him home in prov-

ince, where he managed to stop drinking and making excesses, but went to the other extreme and devoted himself violently to composing. Thus, he created numerous compositions and started to perform more and more. He played organ-pipe, piano, conducted and did some pedagogical work.

At the age of 28, he moved to Munich with his father's family, what gave him an opportunity to expand his musical activities.

Soon, he got married to his long-time companion Else von Bercken, primarily for support she used to give him. However, he still seemed to be uncompromising in his relations to other people, and got into many conflicts. People considered him “good for a madhouse“. His constitution was picnic or a bit dysplastically athletic. Mentally, apart from cyclothymic hypomania, depressive symptoms dominated his behavior. He showed anxiety, sensitivity, naive and violent contactibility, warmth, harshness, fidelity, honesty and endurance, but no control.

Maurice Ravel (1875-1937)

French composer, pianist and conductor. Maurice Ravel was slightly built, short in stature (1,60 - 1,62 m) with large head. His father apparently suffered from a slowly progressive dementing illness and died at age of 74. He was a good swimmer and enjoyed taking long walks. He was a passionate smoker, and liked strong coffee, heavy wines and hot spices. During his whole life he never had any serious intimate relationship with women (even “Apache” was men only club). Ravel was self declared atheist (even buried without any religious ceremony) and paid special attention to his appearance, always well groomed, dressed elegantly. Before the World War I, his physical health was generally good but in 1908 he had a depression period after the death of his

father (for next 7 months he completed only one small work - a folk song). In 1912, after an exhausting schedule, his health deteriorated and his illness was diagnosed as an incipient neurasthenia. During the World War I, in 1914, he was initially rejected for military service (volunteered) for being underweight and for having a hernia. In 1915, he succeeded to join as an army driver. In 1916, he was assigned to front near Verdun. In his letters he frequently wrote about insomnia and exhaustion. The same year, he had an extended convalescence, when he contracted amoebic dysentery.

In 1917 he suffered the second prolonged state of grief and depression after his mother died. After The World War I he complained again about the symptoms of insomnia and lassitude. This time they were accompanied by bouts of fever and occasional chest complaints. Tuberculosis was suspected and he was sent to an alpine resort Megeve for 3 months. Between 1918 and 1927, no serious health deteriorations were registered.

At the age of only 52, in 1927, the first clear signs of neurological upset appeared - occasional difficulties in playing the piano, writing and also early symptoms of dysphasia.

However, he did not show any signs of uninhibited and socially inappropriate behavior, inappropriate sexual behavior, loss of concern about personal appearance and hygiene, major increase in appetite that leads to constant eating and weight gain (to mention only few of them).

Obviously no conclusive diagnosis can be made. Probably several pathologies affecting Ravel's brain were superimposed. Therefore the latest theory of Ravel's disease belonging to a form of the Pick complex is attractive.

Bela Bartok (1881-1945)

Hungarian composer and pianist. Even as a child he was of delicate disposition and often ailing. After vaccination he developed a recurring eczema with unpleasant itching lasting for five years. Allergy was also the cause of his chronic bronchitis and later the catarrhus of upper pulmonary lobes and pneumonia, probably of a tubercular genesis. All this made him withdrawn, uncommunicative and diffident.

He was nervous, highly hypersensitive and constantly dissatisfied with his things done, craving always for something better (the trait of many researchers). Although of a schizotimous character he was often melancholic and depressive. He was graceful, medium height, browning eyes, rather far sighted (often wearing glasses) early turned grey.

Paul Hindemith (1895-1963)

German composer, violinist and conductor. It could be sad that he was suffering from a father figure complex which resulted in a certain timidity and lack of trust in people, although he was well known for his kindness and generosity. Deep down he was emotionally insecure and probably lonely. Short and rather plump, he suffered from cyclothymia and his moods alternated from extreme activity to melancholy and depression – which he had in common with some other composers and creative artists. His dependency on music making and composing could be understood as a need to compensate a certain degree of emotional insecurity and not only a sign of his general talent. Already in 1959, he suffered a mental breakdown – probably the first signs of progressive arteriosclerosis with high blood pressure.

LIST OF ALL COMPOSERS AND THEIR DIAGNOSES

Name	State	years of birth and death	Type of accident
Rolande (Orlando) de Lassus	NLD	(1530-1594)	strokes, depression
Carlo Gesualdo	ITA	(1560-1613)	asthma, depression
John Dowland	GBR	(1562-1625)	old age, melancholia
Claudio Monteverdi	ITA	(1567-1643)	plague [?] , depression
Thomas Weelkes	GBR	(1576-1623)	alcoholism
Girolamo Frescobaldi	ITA	(1583-1643)	personality disorder
Lawes William	GBR	(1602-1645)	killed, alcoholism
Robert Cambert	FRA	(1627-1677)	alcoholism
Michael Wise	GBR	(1647-1687)	alcoholism
Arcangelo Corelli	ITA	(1653-1713)	failing health, depression
Jeremiah Clarke	GBR	(1674-1707)	alcoholism, suicide
George Frederic Handel	GBR	(1685-1759)	alcoholism, blindness, stroke
Francesco Geminiani	ITA	(1687-1762)	old age depression
Wilhelm Friedemann Bach	DEU	(1710-1784)	personality disorder, alcoholism, pneumonia
Jean-Jacques Rousseau	FRA	(1712-1778)	personality disorder, kidney failure
Johann August Bodinus	DEU	(1725-1800)	arm paralysis, depression
Antonio Sacchini	ITA	(1730-1786)	alcoholism, gout
Jean - Baptiste Krumpholtz	CZE	(1742-1790)	anxiety
Louis - Henry Paisible	FRA	(1748-1782)	suicide
Frantisek Koczwara	POL	(1750-1791)	sexual perversion
Emanuel Schikaneder	DEU	(1751-1812)	alcoholism
Johann Christoph Vogel	DEU	(1756-1788)	alcoholism
Wolfgang Amadeus Mozart	AUT	(1756-1791)	bipolar disorder, depression
Adelheid Eichner	DEU	(1762-1787)	depression
Vojtech Jirovec	CZE	(1763-1850)	old age, depression
Ludwig van Beethoven	DEU	(1770-1827)	personality disorder, alcoholism, deafness
Friedrich August Kanne	AUT	(1778-1833)	alcoholism
John Field	IRL	(1782-1837)	alcoholism
Daniel Auber	FRA	(1782-1871)	old age, depression
Friedrich Kuhlau	DNK	(1786-1832)	blindness, tuberculosis, depression
Carl Czerny	AUT	(1791-1857)	blindness, disability
Gioacchino Rossini	ITA	(1792-1868)	depression

Name	State	years of birth and death	Type of accident
Franz Schubert	AUT	(1797-1828)	alcoholism
Alexey Nikolayevich Verstovsky	RUS	(1799-1862)	psychosis, depression
Andrey Petrovich Esaulov	RUS	(1800-1850)	drowned
Joseph Augustine Wade	IRL	(1801-1845)	alcohol and opium addiction
Lortzing Gustav Albert	DEU	(1801-1851)	hypertension, headaches, stroke, anxiety
Antonio d' Antoni	ITA	(1801-1859)	suicide, depression
Friedrich Theodor Frohlich	CHE	(1803-1836)	suicide, depression
Adolphe Adam	FRA	(1803-1856)	hypertension, heart failure
Hector Berlioz	FRA	(1803-1869)	opium addiction
Robert Fuhrer	CZE	(1807-1861)	anxiety
Karl Friedrich Kuhmstedt	DEU	(1809-1858)	loss of wife, depression
Norbert Burgmüller	DEU	(1810-1836)	alcoholism
Robert Schumann	DEU	(1810-1856)	schizo affective disorder, alcoholism, neurosyphilis
Samuel Wesley	GBR	(1810-1876)	head trauma, alcoholism
William Vincent Wallace	IRL	(1812-1865)	alcoholism
Charles Henri Valentin Morhange Alkan	FRA	(1813-1888)	depression
Thomas Attwood Walmisley	GBR	(1814-1856)	alcoholism
Carl Wilhelm	DEU	(1815-1873)	alcoholism
Theodor Furchtegott Kirchner	DEU	(1823-1903)	old age, anxiety
Anton Bruckner	AUT	(1824-1896)	phobic and obsessive disorder
Louis Moreau Gottschalk	USA	(1829-1869)	apendicitis, peritonitis, depression
Kalman von Simonffy	HUN	(1831-1888)	psychosis, schizophrenia, neurosyphilis
Mily Alexeyevich Balakirev	RUS	(1837-1910)	headaches, influenza, heart failure
Peter Ilyich Tchaikovsky	RUS	(1840-1893)	alcoholism, suicide
Antonin Dvořák	CZE	(1841-1904)	obsessive disorder
Edvard Hagerup Grieg	NOR	(1843-1907)	asthma, tuberculosis, depression
Gabriel Faure	FRA	(1845-1924)	tuberculosis, anxiety
Engelbert Humperdinck	DEU	(1854-1921)	arteriosclerosis, stroke, pneumonia
Leosh Janacek	CZE	(1854-1928)	heart failure, anxiety
Rudolf Dellinger	DEU	(1857-1910)	neurosyphilis, anxiety
Edward Elgar	GBR	(1857-1934)	cancer with metastasis, depression
Hugo Wolf	AUT	(1860-1903)	neurosyphilis, phobia
Anton Stepanovich Arensky	RUS	(1861-1906)	alcoholism, tuberculosis
Claude Debussy	FRA	(1862-1918)	depression

Name	State	years of birth and death	Type of accident
Eugene d' Albert	DEU	(1864-1932)	heart failure, depression
Ferruccio Busoni	ITA	(1866-1924)	heart failure, anxiety
Franz Lehar	AUT	(1870-1948)	cancer, depression
Wilhelm Stenhammar	SWE	(1871-1927)	depression
Max Reger	DEU	(1873-1916)	alcoholism, heart attack
Sergey Vasilevich Rachmaninov	RUS	(1873-1943)	depression
Arnold Schoenberg	AUT	(1874-1951)	triskaidekaphobia
Joseph-Maurice Ravel	FRA	(1875-1937)	head trauma, anxiety
Manuel de Falla	ESP	(1876-1946)	heart attack, anxiety
Joseph Holbrooke	GBR	(1878-1958)	old age, depression
Bela Bartok	HUN	(1881-1945)	leukemia, depression
Anton von Webern	AUT	(1883-1945)	depression
Dora Peyachevich	HRV	(1885-1923)	puerperal sepsis, kidney failure, depression
Ivor Gurney	GBR	(1890-1937)	schizophrenia, tuberculosis
Peter Warlock	GBR	(1894-1930)	suicide, depression
Paul Hindemith	DEU	(1895-1963)	neurosyphilis, kidney stones, pancreatitis, stroke
Marc Blitzstein	USA	(1905-1964)	anxiety, personality disorder
Willy Ferrero	ITA	(1906-1954)	alcohol cirrhosis
Dmitry Dmitriyevich Shostakovich	RUS	(1906-1975)	hepatal cancer, heart attack, anxiety
Lou Harrison	USA	(1917-2003)	depressive states, psychosis, heart attack
Charlie Parker	USA	(1920-1955)	alcohol and drug abuse, suicide

Discussion and Conclusion

This is the world's largest sample of collected pathographic data concerning this pathology. It includes a distinct representation of certain subspecies. While other subspecies

are less represented. The consequence of these pathologies is a reduced life duration of composers from over sixty years to just over fifty, which also shortened the period of their creativity and productivity.

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Anksiozni i depresivni poremećaji u kompozitora

Sažetak – U ovom radu iznijeli smo pregled bolesti skladatelja u posljednjih pet stotina godina. Prikupljeni podaci dobiveni su iz biografija više od deset tisuća skladatelja i preko tisuću patografija. To je najveći svjetski dosad obrađeni uzorak. Spomenute bolesti kao i njihovi komorbiditeti utjecale su na živote skladatelja i na njihovo stvaralaštvo te su skratile njihov životni vijek sa nešto iznad šezdeset godina u prosjeku na približno pedeset godina.

Ključne riječi: bolesti skladatelja, anksioznost, depresija