Destinies of Croatian 20th Century Composers

Darko Breitenfeld¹, Vesna Lecher-Švarc¹, Davorka Perić¹, Marija Pranjić¹, Matej Akrap¹, Davor Kust¹
¹Croatian Physicians’ Music Society, CMA, Zagreb, Croatia

Abstract - In this article the authors are presenting medical diseases of the composers. They statistically present the reasons and circumstances of their death in old age (75 composers, medium longevity is 75.1 years, in percentage it is 90.36 % of composers). The majority of composers died from chronic noninfectious diseases, from cancer, heart attack or stroke. Pneumonia is possibly the last stage of the chronic disease because of composers long living. The other infectious diseases happened to younger composers as well as suicide and death in detention camps (8 composers, medium longevity is 52.5 years, in percentage it is 9.64 % of composers); (in total 83 composers, longevity is 72.9 years, in percentage it is 100% of composers).

Key words: Croatia, 20th century, composers, diseases, destinies

Introduction

In the twentieth century, between the two World Wars, the music life was successfully being developed [1-5]. Regarding the composers, we emphasize one of the most famous Croatian composers: Blagoje Bersa (1873-1934). He was originally from Dubrovnik, educated in Zagreb and Vienna, where he also worked and had a successful carrier. He prosperously worked during his whole life-time until he suddenly got ill of jaundice due to a swelling in right abdomen part, which was later found out to be malfunction of gallbladder and had metastatic changes in liver. Soon after the diagnosis, he died due to failed operation.

Franjo Dugan (1879-1948) was a long-living mathematician, physicist, musician, organist and composer and a striking person. He died at old age due to colon cancer.

Josip Hatze (1879-1959) was blind at older age, which was difficult to bear for him. During his life, he was often sick. He was infected with malaria and had suffered from the chronic consequences of the infection. He died suddenly from heart attack.

Vjekoslav Rosenberg-Ružić (1870-1954) was suffering during his lifetime from various lung inflammations, and probably from tuberculosis as well. He died at old age from a stroke.
Dora Pejačević (1885-1923), a well-known Croatian composer, died after giving birth due to puerperal sepsis and afterwards kidney complications and uremia.

Ivan Muhvić (1876-1942) died of stroke.

Vladimir Stahuljak (1876-1960) died at old age in sleep.

Slavomil Grančarić (1878-1941) died of upper jaw cancer.

Franjo Štefanović (1879-1924) died in middle-age from heart attack.

Josip Canić (1879-1933) died from chronic heart failure, as well as Andro Mitrović (1879-1940).

Srećko Albini (1869-1933) died of septicemia.

Gjuro Prejac (1870-1936) died of chronic heart failure.

Ciril Mathodej Hrazdira (1868-1926) died in Czech, his homeland by birth, due to an unsuccessful operation of cancer.

Antun Dobronić (1878-1955), a famous Croatian composer, had cancer and died suddenly from the stroke.

Ivan Matetić Ronjgov (1880-1960), from Istria, lived in exile in Croatia. He was blind for a long time and died of cancer at the old age.

Fran Lhotka (1883-1962), a famous Croatian composer and a pedagogue, Czech by origin, died at the old age of gallbladder cancer with metastases in lungs.

Krstio Odak (1888-1965), also a well-known Croatian composer, suffered from bronchitis and emphysema during his old age, but died of heart failure combined with kidney complications.

Božidar Širola (1889-1956) was a very productive composer and musicologist. He died in the old age of heart failure.

Franjo Lučić (1889-1972), was our famous organist, composer, pedagogue and organizer. He was ill during his old age of many diseases.

Krešimir Baranović (1894-1975) was a famous Croatian composer, conductor and pedagogue. He was educated in Vienna, worked in Zagreb and Belgrade. He died suddenly at old age due to cancer.

Jakov Gotovac (1895-1982) was a very popular and significant Croatian conductor and composer (Figure 1). He became world-famous with a number of his compositions, especially his opera Ero the Joker. Basically of good health, somewhat hypochondriac, he liked to socialize with doctors since he felt lonely during his old age. At the high age he had more and more health problems. He died in sleep.

Josip Štolcer Slavenski (1896-1955) was a great Croat of Jewish ancestors who spent a good part of his life in Belgrade (Figure 2). He lived a neat and peaceful life, but in his late 50s he suddenly started experiencing gastrointestinal disturbances with severe breathing. Due to deterioration, he was admitted at the Intern Clinic in Belgrade where the gallbladder cancer was diagnosed with metastasis in the lungs. He recovered from surgery and died soon after home care.

Rudolf Matz (1901-1988) was a well-known Croatian cello player, pedagogue, conductor and composer (Figure 3). During his 60s he started getting ill and had a light stroke. Being prone to illness, he started to enjoy medical society and had led the Zagreb’s doctor choir. With time, he started to have bigger and bigger problems. At the high age, he had long-lasting pain, was intensively clinically treated and died after long-term failure.
Božidar Kunc (1903-1964) was a well-known Croatian pianist and composer. He was tied to the career of his famous sister singer Zinka Kunc - Milanov. He was living alongside her in America and got married later on. He was partially overwhelmed by concerts. He died suddenly of heart attack.

Lujo Šafranek Kavić (1882-1940) suffered from cholangitis and later died of digestive cancer, shortly after surgery.

Josip Mandić (1883-1959), a composer, diplomat, publicist, mistreated during the Cold War period, operated and died due to increased prostate because of kidney cancer.

Oskar Jozefović (1890-1941), a theatrical conductor and composer of Jewish ancestors, endangered by life, committed suicide at the beginning of the war.

Zlatko Špoljar (1892-1981) suffered from chronic illness and died of a fever.

Andrija Brlić (1893-1931), a doctor and a composer, got syphilis with cerebral complications, died suddenly.

Rudolf Taclik (1894-1942) died in his middle years of pancreatic cancer.

Žiga Hirschler (1894-1941) died in the detention camp at the beginning of the war.

Ivo Tijardović (1895-1976) was a famous Croatian opera composer, as well as a librettist, a scenographer and a conductor (Figure 4). He was during his life very healthy, but within few months at his 80s, health began to decline with always increasing disturbances. He had a cancer operation with a good outcome. He died at the hospital within a year since the diagnosis and operation.

Milan Majer (1895-1967) was a long-term rheumatic patient. His arthritis was treated by cortisol. He got a rupture of his intestine with signs of acute abdominal inflammation. He died despite the surgery.

Miroslav Šlik (1898-1986), a violinist and a composer died suddenly in Prague.

Zlatko Grgošević (1900-1978) died at old age suddenly due to several illnesses.

Stanislav Preprek (1900-1982) was blind in his old age due to many chronic problems. Boris Krcnic (1900-1979) was operated in his old age of a cancer but died after his operation.

Franjo Dugan Jr. (1901-1934) died of cancer at young age.

Juraj Štahuljak (1901-1975) had a traffic accident due to which he had a heavy recovery and died abruptly.

Petar Dumčić (1901-1984) was a famous pianist and composer. He died at old age of a cancer.

Josip Vrhovski (1902-1983) died at old age of heart attack.

Vilim Marković (1902-1992) died at old age.

Antun Goglia (1867-1958) died at old age of lung inflammation.

Janko Barle (1869-1941) died at old age due to abdominal typhus with bleeding and stroke.

Anton Zaninović (1879-1973) died suddenly at old age of chronic illness.

Pavao Markovac (1903-1941) was killed in the detention camp during the Second World War.

Arthur Schneider (1879-1946) suffered of diabetes and died of a stroke.

Vinko Žganec (1890-1976), was a composer of mostly choir compositions. He was operated at an old age. He died suddenly due to operation.

After the Second World War the development of music life in Zagreb and whole Cro-
atia continues to grow; modern struggles are being manifested by organizing the Zagreb Biennale.

Boris Papandopulo (1906-1991) was a famous Croatian musician, conductor and a composer, he was chronically ill and died from a cancer (Figure 5).

Milo Cipra (1906-1985), a well-known composer of very broad culture, died almost suddenly from stroke.

Ivan Brkanović (1906-1987) was a well-known Croatian composer, died of chronic illnesses (Figure 6).

Slavko Zlatić (1910-1993) was an increasingly difficult patient in his old age with weakness and multiple hospital treatments, due to which he died of.

Nikola Hercigonja (1911-2000) died at the old age due to previous illnesses.

Tihomil Vidošić (1902-1973), a composer and a pedagogue, had various illnesses and he died suddenly from the stroke at the older age.

Mladen Pozaić (1905-1979), at old age diseased of a cancer and died suddenly.

Miroslav Magdalenić (1906-1969) was chronically ill and died suddenly of heart attack.

Bruno Bjelinski (1909-1992), a famous composer and conductor, started getting ill during his last 10 years of life. He suddenly died from heart attack.

Ivo Lhotka-Kalinski (1913-1987) had problems due to cancer and died peacefully.

Stjepan Šulek (1914-1986) a famous composer, violinist and pedagogue, worked even at his old age, and died suddenly of heart attack.

Natko Devčić(1914-1997), a famous composer and pedagogue, had problems during his old age due to which he died.

Ivo Kirigin (1914-1964), a composer, was diagnosed with diabetes at a young age, combined with bronchitis and lung inflammation, died suddenly of heart attack.

Silvije Bombardelli (1916-2002) died at high age relatively suddenly.

Branimir Sakać (1918-1979), a prominent avant-garde composer due to long-lasting health problems died suddenly.

Miroslav Špiler (1906-1982), a Croatian composer of Jewish ancestors, worked after the war in Sarajevo, occasionally ill, and died suddenly of heart attack.

Ljerko Špiler (1908-2008), Miroslav’s brother, a famous violin virtuoso, died recently at the age of 101.

Vladimir Berdović (1906-1980) died at old age of cancer.

Alfred Švarc (1907-1986) died at old age of cancer.

Krešimir Fribec (1908-1996) was at high age weak and died suddenly.

Josip Kaplan, (1910-1996), originating from Slovenia, died suddenly at old age.

Hubert Pettan, (1912-1989) had more and more problems in his old age and died due to sudden illness.


Marijan Burić (1913-1979) died at old age due to cancer.

Mladen Stahuljak (1914-1996) was hardly bearing the whirlwind of the Homeland war and went to live with his relatives in Germany. He died soon-after from the signs of old age.

Dubravko Stahuljak (1920-1988) survived an accident at an older age and died suddenly.

Milko Kelemen (1924-2018) was a famous composer (Figure 7). He humorously
listed his thirty diagnoses in the Medical Journal that the doctors had given him, but he still felt relatively well. He worked, composed and traveled relatively a lot. „I do not have the intention to become ill, except if I suddenly do“, he had said. He died at the age of 94 years.

Lovro Županović (1925 – 2004) died in older age feebles.

Zvonimir Marković (1925-1983) died early due to cancer.

Stanko Horvat (1930-2006) suffered from chronic disorders. Within the hospital treatment, there was aggravation of his health condition and due to that he died.

Boris Ulrich (1931-1983) died due to cancer.

Vjekoslav Gržinić (1932-1970) died suddenly.

Igor Kuljerić (1938 -2006), a well-known composer, conductor and pianist, was sick during his lifetime. The signs of cancer occurred suddenly, due to which he died within several months despite medical treatments.

Adalbert Marković (1929-2010) died suddenly due to stroke.

Emil Cossetto (1918-2006), a Croatian composer of mostly choral music, a remarkable choir conductor, was active very long and died abruptly at high age due to a series of strokes.

**Results**

The statistical output of composers longevity and total rate of death per disease is given in Table 1.

<table>
<thead>
<tr>
<th>Diseases</th>
<th>Number of composers</th>
<th>Longevity</th>
<th>Rate of death in %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cancer – in general</td>
<td>8</td>
<td>66</td>
<td>10</td>
</tr>
<tr>
<td>- digestive</td>
<td>1</td>
<td>68</td>
<td>1</td>
</tr>
<tr>
<td>- upper jaw</td>
<td>1</td>
<td>68</td>
<td>1</td>
</tr>
<tr>
<td>- gullet</td>
<td>1</td>
<td>85</td>
<td>1</td>
</tr>
<tr>
<td>- gallbladder</td>
<td>5</td>
<td>68</td>
<td>6</td>
</tr>
<tr>
<td>- pancreas</td>
<td>1</td>
<td>78</td>
<td>1</td>
</tr>
<tr>
<td>- colon</td>
<td>2</td>
<td>81</td>
<td>2</td>
</tr>
<tr>
<td>- ileus</td>
<td>1</td>
<td>72</td>
<td>1</td>
</tr>
<tr>
<td>- lungs</td>
<td>1</td>
<td>81</td>
<td>1</td>
</tr>
<tr>
<td>- kidney</td>
<td>1</td>
<td>76</td>
<td>1</td>
</tr>
<tr>
<td>- prostatic gland</td>
<td>1</td>
<td>74</td>
<td>1</td>
</tr>
<tr>
<td>- melanoma</td>
<td>1</td>
<td>58</td>
<td>1</td>
</tr>
<tr>
<td>- acute leukemia</td>
<td>1</td>
<td>52</td>
<td>1</td>
</tr>
<tr>
<td>CANCER TOTAL</td>
<td>25</td>
<td>69</td>
<td>30</td>
</tr>
<tr>
<td>HEART ATTACK</td>
<td>26</td>
<td>76</td>
<td>31</td>
</tr>
<tr>
<td>HEART FAILURE / COPD</td>
<td>4</td>
<td>84</td>
<td>5</td>
</tr>
<tr>
<td>STROKE</td>
<td>10</td>
<td>76</td>
<td>12</td>
</tr>
</tbody>
</table>


Discussion and Conclusion

This selection includes most of the great Croatian composers but covers only about half of our Croatian patographic data [6-10]. Remaining data are archived, as well as the other data in Croatian Academy of Sciences and Arts (HAZU) for further eventual, statistical and scientific processing. It is likely that there will be no need for publishing them later on. They were used partly in the first Croatian patographic master’s degree on neurological and psychiatric disorders of the composers [5] and they can be used for these purposes. In this paper we did not enter into detailed patographic data of composers who died within the last fifty years, but we used real diagnoses of all 83 composers in the statistic. All data are as well being stored in the HAZU. In this article are presented destinies of composers that were living in nearby past when the medical diagnostic procedures developed as well as the successful medical therapy was forwarded. Because of that the life of these composers was prolonged. They were suffering mostly from already mentioned chronic noninfectious diseases and regarding that they died at older age. Younger composers happened to suffer from infectious diseases, committed suicide or died in detention camps.

Acknowledgements

None.

Conflicts of interest

None to declare.
References

Sudbine hrvatskih skladatelja dvadesetog stoljeća

Sažetak - U radu autori iznose medicinske bolesti skladatelja. Većina skladatelja umrla je od kroničnih ne zaraznih bolesti, od raka, srčanog i moždanog udara uglavnom u starijoj dobi (75 skladatelja, doživljavanje je 75,1 god., u postocima 90,36%). Pneumonije su zbog dugovječnosti vjerojatno bile zadnji stadij kroničnih bolesti. Ostale zarazne bolesti su se događale kod mladih ljudi kao i samoubojstva i pogibanja u logorima (8 skladatelja, prosječno doživljavanje je 52,5 god., u postocima 9,64 % skladatelja); (sveukupno: 83 skladatelja, prosječno doživljavanje je 72.9 god., u postocima 100% skladatelja).

Ključne riječi: Hrvatska, 20. stoljeće, skladatelji, bolesti, sudbine