

# Rachmaninov's Melanoma and Other Skin Changes in Composers

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## ABSTRACT

By examining several hundred pathographies of composers, we identified numerous skin changes. We emphasize Rachmaninov's melanoma. Notable pathographies were studied in more details and shown chronologically by the composers date of birth. Skin changes in composers were usually mild and rarely fatal.

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## INTRODUCTION

Among hundreds of analyzed pathographies of composers, skin changes were observed in 70 cases. Composers are sorted chronologically. Well-known composers and their minor or major skin changes are reviewed in more detail, while less known composers are presented briefly.

### SERGEI VASILIEVICH RACHMANINOV (1873-1943)

Russian composer, pianist, and conductor. A funicle developed on his hand in 1926, which did not heal properly. Rachmaninov could bend his thumb into his palm – fully hiding his thumb. Some think he had Marfan syndrome, i.e. a narrow, long cranium (dolichocephaly) with a normal trunk but extremely long extremities, especially fingers, with underdeveloped tendons and ligaments, enabling extreme flexibility of the fingers making (from the first till the fifth finger) him able to reach an octave plus the fifth above it with one hand simultaneously, and eventually draw his thumb away to use it for playing in the

middle of the range on the piano. He was also rather nearsighted and had vision problems, so he had to use his eyes carefully. However, he had none of the so-called cardiovascular symptoms of Marfan syndrome, namely aortal dilatation and dissection or dislocation of the lenses of the eyes, which are in fact the most severe aspects of the syndrome. He suffered from frequent headaches and painful lumbago and often experienced a tingling sensation in the arm, especially in the finger tips. He also had periods of swelling of the fists and some general arthritic problems. He was ailing in his last years, which could be considered normal because of his age, as he was 60 years old. He also took on excessive strain in performing benefit concerts in America to support the Russian revolution, so his exhaustion and accompanying lumbago were understandable. His friend, the physician Golitzyn, could not establish the exact cause of his condition. Rachmaninov was losing weight, feeling tired and exhausted, with coughing spells and pain in the left side of the chest. Physicians at a clinical institution found pleurisy. He was sent to a hospital, where X-ray revealed some neoplastic

shadows in the left pulmonary lobe. After extensive medical checkup, nodules were found on the skin. The diagnosis of melanoma was pathohistologically established. His state was worsening, especially his appetite for food, with smells becoming repulsive to him. He was breathing with more and more difficulty, eventually passing into a coma and dying soon after. The final diagnosis was melanoma malignum with pulmonary metastasis and cachexia (1,2).

### **JEAN-BAPTISTE LULLY (1632-1687)**

French composer. While conducting during a concert in 1687 he struck his little toe. Shortly thereafter, an abscess and gangrene developed, spreading to his foot and leg. He turned to charlatans who were incapable of helping him. His health deteriorated, and he died of sepsis. It is possible he was a latent diabetic, which accelerated the negative course of disease (1,3).

### **ALESSANDRO STRADELLA (1644-1682)**

Italian composer. He was stabbed in 1677, but he managed to recover with heavy scars. He was stabbed again in 1682 and succumbed to stab wounds (4,5).

### **JOHANN SEBASTIAN BACH (1685-1750)**

German composer. He suffered from myopia since an early age and underwent a surgical procedure on his eye two years prior to his death. As his eyesight did not improve, he was again operated on once again. Treatment with mercury, laxatives, and therapeutic venesection had also been applied (2,6).

### **GEORG FRIEDRICH HÄNDEL (1685-1759)**

German composer. At the age of 52, he survived a stroke with paralysis of his right arm, from which he recovered. After his second stroke in 1742, he was subjected to venesection as a therapy and recovered in a month. A year later, he survived a third stroke, from which he also recovered. At the age of 60 he suffered from another stroke, also with quick recovery. In his sixties, Händel developed a cataract which caused him to go blind in both eyes. At the age of 65, he was badly hurt in a carriage accident. Händel died from the effects of his many strokes, at the age of 74 (1,5,7).

### **JOSEPH HAYDN (1732-1809)**

Austrian composer. After recovering from smallpox at an early age, his face and nose were marked with distinctive scars. Haydn suffered from sinusitis and nasal polyps, which macerated the surrounding skin (1,7,8).

### **WOLFGANG AMADEUS MOZART (1756-1791)**

Austrian composer. He developed laryngitis in 1762. After approximately two weeks of constant throat pain, high fever and malaise started developing, along with back and hip pain as well as skin changes in the form of soft, red, mildly elevated circles on the elbows, buttocks, and lower legs. The doctor diagnosed scarlet fever with rash. The skin alterations Mozart had showed a much closer resemblance to erythema nodosum than to scarlet fever. In 1767, he recovered from a harsh form of the pox infection, with temporary blindness and scars. Mozart also developed temporary icterus. In 1790/91 he suffered from severe malaise, headaches, and arthralgia. His hand and foot joints swelled, while his skin became covered with pustules and vesicles. The disease was thought to be an inflammation, so the doctors subjected him to unnecessary and harmful venesection. The inflammation evolved into fever with rash, resulting in coma and death. (1,7-9).

### **LUDWIG VAN BEETHOVEN (1770-1872)**

German composer. His face was furrowed with scars from smallpox. Subsequently, his finger became infected and required surgical drainage. This condition is called paronychia. He developed icterus in 1821. Some believe that Beethoven suffered from systemic lupus erythematosus. One of the typical symptoms, butterfly rash (erythema), can be seen on some portraits of Beethoven. He had hemorrhoidal problems. Beethoven died from cirrhosis of the liver with ascites (punctions with a trocar around the infected skin surface). Lead poisoning (hair and skull inspections) was not demonstrated to have been fatal and manifested with diarrhea, dementia, and dermatitis (7,8,10).

### **NICCOLO PAGANINI (1782-1840)**

Italian composer. In childhood, Paganini suffered a measles infection and later contracted a severe form of scarlet fever. He also suffered from hemorrhoids, but there never was any significant rectal bleeding. He had tuberculosis, chronic gonorrhea, and syphilis (rash). In the last two decades of his life, he was almost constantly ill. The origin of his disorders was syphilis, so he was treated with mercury products, which caused many somatic complications and mental problems such as erethism. Paganini was subjected to venesection, which only worsened the condition of his health. He died at the age of 57 from respiratory disease (probably tuberculosis) (2,5,8).

### **CARL MARIA VON WEBER (1786-1826)**

German composer. At the age of 27 he contracted miliaria, a small papular rash. He suffered from tuberculosis, which caused his death. As a chronic complication of it, among other diseases, he suffered from bleeding hemorrhoids (1,7,8).

### **GIOACCHINO ROSSINI (1792-1868)**

Italian composer. He became sexually active at 15 and contracted gonorrhea. The disease became chronic. In 1838, his health started to worsen, and he suffered from chronic urethritis. Rossini also had severe joint pain, probably due to gonorrhoeic arthritis. He developed hemorrhoids and eczema of the surrounding skin, which manifested as a severe rash. He was treated with leeches for hemorrhoids. In 1867/68, Rossini developed erysipelas on his leg. He suffered from severe anal itching with increasing pain in the rectum. Doctors discovered an abscess by rectal exam. This was the rectal carcinoma which caused his death (1,11).

### **FRANZ SCHUBERT (1797-1828)**

Austrian composer. He contracted a mild form of pox at an early age which resulted in scars. He contracted syphilis which, at its secondary stage, manifested with itching, edema, and rash (roseola syphilitica), accompanied by hair loss (alopecia specifica areolaris). He immediately started with mercury treatment. Unfortunately, in 1824, a syphilitic exanthema (rash) appeared along with mucosesyphilides (lesions) of the oral cavity and throat. His hair began to fall out once again, but the symptoms disappeared after mercury treatment. In the summer of 1828, he complained of headache and vertigo, soon followed by anorexia, nausea and lethargy. A venesection was performed. A fever and delirium arose, and he fell into a coma. Schubert died at the age of 31, probably due to typhoid fever (5,7,8).

### **VINCENZO BELLINI (1801-1835)**

Italian composer. In 1830 he suffered from digestive disorders, accompanied by appetite loss and gastric and gall fever, so he was subjected to venesection and treated with emetics. In his later years, this condition reoccurred. It is likely he suffered from dysentery syndrome (1,2,8).

### **HECTOR BERLIOZ (1803-1869)**

French composer. In 1827, a severe infection of tonsils led to abscess formation, intense neck pain, and swallowing difficulties. In 1844, he developed

symptoms of temporary icterus, which was probably caused by hepatitis A. A few months later he became severely ill and was diagnosed with typhoid fever, and was therefore subjected to venesection. He became addicted to opium. Berlioz died after several strokes (1,2,8).

### **JOHANN STRAUSS SR. (1804-1849)**

Austrian composer. He developed scarlatina (rash) and died due to cerebral complications (high blood pressure, bleeding – stroke) (1,12).

### **FELIX MENDELSSOHN-BARTHOLDY (1809-1847)**

German composer. At the age of 18 he started complaining of headaches, which later increased in frequency and intensity. In 1830 he recovered from measles, but he suddenly fell ill in 1847. He first reported a cold and stiff feeling in his hands, his hands subsequently becoming numb, and he had a relentless headache. A doctor treated him with leeches. His headaches worsened, and he experienced temporary seizures and unconsciousness. In the end, he died, probably due to subarachnoid hemorrhage (6-8).

### **FRÉDÉRIC CHOPIN (1810-1859)**

Polish composer. At the age of 16 he contacted a cough and a headache, along with swelling of neck lymph nodes, which was treated with leeches. Throughout his whole life he suffered from respiratory issues accompanied by systemic symptoms such as malaise. He died from tuberculosis at the age of 39 (1,2).

### **ROBERT SCHUMANN (1810-1856)**

German composer. He contacted syphilis. It primarily affected his penis, with burning pain around the ulcer. Schumann never described evidence of secondary syphilis manifestation, but tertiary neurosyphilis emerged twenty years later. He suffered from temporary unconsciousness, gout pain, obesity, and hemorrhoids. He probably used mercury ointments for treatment (5,7).

### **FRANZ LISZT (1811-1886)**

Hungarian composer. He was prone to injuries and falls. In 1841 he suffered from a head contusion and left radiocarpal joint straining during a carriage ride. He also broke his ribs and suffered an open wound on his left thigh after falling down the stairs in 1881. His affinity for alcohol (in large amounts, including absinthe for a short period) led to cardiac failure due to alcoholic cardiomyopathy (1,8).

### **RICHARD WAGNER (1813-1883)**

German composer. He had a recurrent erythema from an early age, especially around the eyes and lips, and sometimes developed an unpleasant rash. This could have been caused by erysipelas, but eczema or atopic dermatitis seems a more reasonable explanation. Erythema was followed by the loss of eyebrows. His problems were most likely caused by erythema of allergic etiology, possibly atopic dermatitis. Hemorrhoid problems started when he was about 30 years of age. Between 1856 and 1880, he experienced a remission of facial erythema, but it recurred when he was 67. He also suffered from coronary disease and died from a heart attack (1,8,9).

### **LOUIS MOREAU GOTTSCHALK (1829-1869)**

American composer. In 1869 he developed high fever. One doctor thought it was yellow fever, while another suspected malaria and prescribed him quinine, which resulted in damage to the inner ear. By the end of the same year, he became highly febrile and had progressive abdominal pain which abruptly subsided. Gottschalk died several days later from the repercussions of peritonitis (1,3,4,11).

### **JOHANNES BRAHMS (1833-1897)**

German composer. In 1896 he developed escalating icterus along with considerable increase of abdominal mass and body weight loss. No doctors had the courage to perform surgery on him. A few days before his death he started feeling pain in his back, his skin turned brown, almost black, and his condition worsened, accompanied by hemorrhoid and other types of bleeding until his death (1,7).

### **GEORGES BIZET (1838-1875)**

French composer. In 1858 he contracted a severe throat inflammation which was treated with leeches. In 1875, he developed severe pharyngitis, followed by intense ear pain with hearing loss and auditory hallucinations. He died of heart attack (1,2).

### **MODEST PETROVICH MUSSORGSKY (1839-1881)**

Russian composer. He was prone to alcohol abuse. Signs of chronic alcoholism can be observed on his portraits, such as redness around the nose. In 1881 he experienced seizures from alcohol-induced epilepsy. Signs of delirium, nephritis, hepatomegaly, and cardiomegaly were present, as well as signs of paralysis and erysipelas on his legs. Mussorgsky died from the effects of alcohol poisoning (1,2).

### **PYOTR ILYICH TCHAIKOVSKY (1840-1893)**

Russian composer. As a child, at the age of 8, he recovered from measles (skin lesions). His hypersensitivity evolved into irritability and a nervous breakdown. Tchaikovsky was depressive, prone to alcohol, a passionate smoker, and had homosexual tendencies. He died from cholera or, less likely, from arsenic poisoning (suicide) (1-3).

### **GIACOMO PUCCINI (1858-1924)**

Italian composer. In 1903 he was injured in a car crash: a fractured tibia and multiple contusions. During recovery, a particularly slow healing laceration led to a physician diagnosing him with diabetes. Puccini underwent surgery for laryngeal cancer which caused sudden cardiac death (1,8).

### **GUSTAV MAHLER (1860-1911)**

Austrian composer. In 1897 he contracted a severe case of tonsillitis with abscess. Doctors proposed tonsillectomy. Mahler experienced frequent rectal bleeding, consequently undergoing surgery for hemorrhoids. In 1911, his fever and angina recurred along with splenomegaly and small areas of hemorrhages on the skin. Pathologists established tonsillogenic (streptococcal) sepsis with septic endocarditis as the main cause of death (1,8).

### **FREDERICK DELIUS (1862-1934)**

English composer. He suffered from syphilis (rash). In 1910 he was hospitalized with symptoms of neurosyphilis. Wasserman's test was positive, so a therapy with Ehrlich's preparation of arsenic was proposed, but Delius refused it. Tertiary syphilis progressed over the next ten years, causing abdominal and leg pain (tabes dorsalis), blindness, and partial paralysis. Delius died from complications of syphilis (2,5).

### **ALEXANDER NIKOLAYEVICH SRIABIN (1872-1915)**

Russian composer. In 1915, a furuncle and subsequently a carbuncle appeared on his upper lip. It was a recurrence of the ulcer from the previous year and was very painful. After surgical removal of the carbuncle, his health started recovering, but this was followed by the development of sepsis. Scriabin fell into a coma and died (1,4).

### **BELA BARTOK (1881-1945)**

Hungarian composer. He suffered from tuberculosis since his youth. After vaccination, he developed a recurrent eczema with a rough rash which lasted for 5



years. His health problems began in 1942. An inexplicable sense of fatigue accompanied by a weight loss of 35 kilograms was, at first, thought to be a relapse of tuberculosis, but several years later he was diagnosed with leukemia, which caused his death (1,11).

### **IGOR FYODOROVICH STRAVINSKY (1882-1971)**

Russian composer. In childhood he contracted scarlatina, and later he developed pleuritis of tuberculous origin. At the age of 76, he was diagnosed with polycythemia and was treated with radioactive phosphorus. When he was 85, polycythemia led to ischemia and almost to gangrene of his left hand, with pain and blackness of the skin. He developed herpes zoster the same year. He was later subjected to several embolectomies. He died of cardiac failure and pulmonary edema (1,2,13).

### **ALBAN BERG (1885-1935)**

Austrian composer. In 1935, he developed an ulcer as a result of an insect bite, which progressed to a carbuncle. He started to feel exhausted and was transported, highly febrile and with sepsis, to a hospital where he underwent immediate surgery, but developed cardiac problems, became delirious, fell into a coma, and died (1,8).

### **DMITRI DMITRIYEVICH SHOSTAKOVICH (1906-1975)**

Russian composer. He was frequently falling ill since his childhood, with paresthesia and finger paralysis, especially of the right arm, developing early on. These signs spread onto the legs, occasionally making him immobile. A narrow spinal canal and rheumatoid arthritis were considered as the cause, along with cervical spondylosis and cervical myelopathy. Transverse myelitis was a significantly less likely. The most probable cause was amyotrophic lateral sclerosis, which manifested with spastic gait and difficulties playing the piano (2,6).

### **EDWARD BENJAMIN BRITTEN (1913-1976)**

English composer. He recovered from measles with a severe rash in 1943. After tonsillitis (dental abscess) he developed endocarditis and underwent a surgical procedure because of stenotic aortic valves. He suffered from a stroke and cardiac weakening (2,6).

### **OTHER COMPOSERS:**

DAVID RIZZIO (c. 1525-1566) ITA, infection of stab wounds (3)

CLAUDIO MERULO (1533-1604) ITA, venesection (11)

PABLO BRUNA (1611-1679) ESP, pox infection in childhood (scars) (11)

IGNAZIO ALBERTINI (c. 1644-1685) ITA, infection of multiple stab wounds (11)

ANTONIO CALDARA (1670-1736) ITA, died from icterus with high fever (1)

JEAN-MARIE LECLAIR (1697-1764) FRA, three chest stab wounds (11)

LOUIS-GABRIEL GUILLEMAIN (1705-1770) FRA, multiple stab wounds infection (11)

GEORG WAGENSEIL (1715-1777) AUT, gout (3)

LEOPOLD MOZART (1719-1787) AUT, lower leg lacerations (4 7)

PHILIP PHILE (c.1734-1793) USA, died during yellow fever (11)

LUIGI BOCCHERINI (1743-1805) ITA, chronic inflammation of the elbow and finger (1,4)

JAN DUSSEK (1760-1812) CZE, alcoholism with skin changes (1)

MICHEL-JOSEPH GEBAUER (1763-1812) FRA, finger injury (11)

JOHANN NEPOMUK HUMMEL (1778-1837) AUT, edema, blood stasis in the legs (11)

NIKOLAUS KRAFT (1778-1853) HUN, finger injury (11)

JOSEF MERK (1795-1852) AUT, dog bite on the left shoulder (11)

FELIKS HORECKI (1796-1870) POL, right hand finger injury (11)

CHARLES GOUNOD (1818-1893) FRA, eczema, hemorrhoids (2,6)

STEPHEN FOSTER (1826-1864) USA, neck lacerations and forehead hemorrhages (11)

VATROSLAV KOLANDER (1848-1912) HRV, syphilis with papular rash (12)

HUBERT PARRY (1848-1918) GBR, multiple infected skin cysts (11)

GEZA ZICHY (1849-1924) HUN, right arm injury during hunting (11)

EUGENE YSAYE (1858-1931) BEL, arthralgia (1)

EDWARD MACDOWELL (1860-1908) USA, syphilis with papulose skin changes (5)

AMY BEACH (1867-1944) USA, abscess, surgical wounds after cholecystectomy (11)

JOSIP IPAVEC (1873-1921) SLO, syphilis (rash) (5,12)

ARNOLD SCHÖNBERG (1874-1951) AUT, embolisms in leg arteries (surgeries) (1,8)

JAMES EUROPE (1880-1919) USA, neck stab wound (11)

MARIJ KOGOJ (1892-1956) SLO, syphilis (rash) (12)

SLAVKO OSTERC (1895-1941) SLO, syphilis (tabes) – rash (12)

VIRGIL THOMSON (1896-1989) USA, right arm injury in a traffic accident (1,11,14)

BORIS ARAPOV (1905-1992) RUS, hand injury (11)

OLIVIER MESSIAEN (1908-1992) FRA, face lacerations (1,3)

PEGGY GLANVILLE-HICKS (1912-1990) AUS, hemorrhoids (11)

XAVIER DARASSE (1934-1992) FRA, right arm injury in a traffic accident (11)

KARL WELIN (1934-1992) SWE, chainsaw leg injury (11)

## CONCLUSION

Skin changes in composers were usually mild and rarely fatal. They were more frequent than we had supposed before conducting our research. Abscesses, measles, eczemas, syphilis wounds, rashes and gummas, pox infections, yellow fever, jaundices, erysipelas, paronychias, herpes zoster, stab wounds, lacerations, hemorrhoids, blood clots, venesection, and application of leeches were all observed in composer biographies.

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