SYPHILIS’ IMPACT ON LATE WORKS OF CLASSICAL MUSIC COMPOSERS

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INTRODUCTION & OBJECTIVE: To present the effects of the tertiary stage syphilis on the last works of some famous European classical music composers who suffered from the disease.

METHODS: The review of the biographies of seven documented syphilis cases of composers, focusing on the events of their last period of life and the review of the critics for their artistic expression under disease-affected circumstances.

RESULTS: The 19th century is undeniably considered as the golden age of classical music but, at the same time, some of the most famous composers were victims of this disease-menace, strongly stigmatizing themselves and their families, the latter trying to keep the shameful secret, aftermath destructing sources and documents. Seven cases of musicians with syphilis have been studied: Franz Schubert died at the age of 31, while Robert Schumann and Hugo Wolf (age at death 46 and 43 respectively), both attempted suicide and passed the rest of their lives in insane asylums. Moreover, Gaetano Donizetti infected his wife, Virginia, who died in childbirth before his own death occurring between catatonic symptoms and bouts of persecution mania. Bedrich Smetana predicted his death entitling his composition “final page” and indeed, he did not compose anymore and died soon in a mental asylum. Frederick Delius lived for fifteen years blind and paralyzed dictating his scores to a young follower of his music, although the quality of the late compositions cannot be compared with the priors. Finally, Niccolò Paganini, who did not appear with mental decline, lost his voice, probably as a secondary effect of mercury treatment.

CONCLUSIONS: Syphilis has been a fatal disease through ages and among its victims, authors and artists died with symptoms of mental deterioration due to neurosyphilis. The influence of the disease upon their last works can be traced
especially in the case of composers, as hallucinations and horrors and psychological conflicts are reflected in their music.

**INTRODUCTION**

Beginning with the Greek word μουσική and the 9 Μούσες of the Greek Mythology, each one devoted to all forms of art, including science, we arrive at classic era when the meaning of the word music was gradually narrowed down to its present use. All those gifted music creators, associated with immortality in our minds, are definitely subject to earthy death. Especially in cases of early depart, at a much younger age than median life expectancy, it was broadly believed that their passing away occurred under mysterious circumstances. The century during which the composers of divine music approached the highest top of art, the 19th century, has also been the time during which infectious diseases –among them syphilis- represented the population’s most common cause of mortality. Seven cases of neurosyphilis of famous composers are presented, as well as the effects of the disease upon their life and late works.

**THE SEVEN COMPOSERS AND THEIR MEDICAL HISTORY**

Nicolò Paganini (1782-1840) was born in Genoa, Italy and died in Nice, France, from syphilis, suffering at the same time from tuberculosis, as two severe episodes of hemoptysis occurred at the age of 51 and 58 (during the last six years of his life). He also suffered from the Ehlers-Danlos syndrome or probably Marfan syndrome [Picture 1]; this hypothesis explains his extraordinary ability to perform the most complex pieces on the violin. Paganini appeared with necrotizing osteitis of the jaw, operated at the age of 46. He might have got infected by syphilis at the age of 40 and his treatment included great amounts of mercury and opium resulting to serious physical and psychological side effects and, consequently, to his early ended career. A severe form of dysphonia prevented him from speaking; recent attempts to explain it include a possible abnormal dilatation of the aorta or side effects of mercury toxicity or syphilitic or tubercular laryngeal lesion. The former is present in patients with Marfan syndrome, (described in 1896) as well as in tertiary syphilis. Héctor Berlioz had asked a performance of his concerto for viola *Harold in Italy* but Paganini in fact
never performed it, because by this time (1834) his declining health forced him to limit his appearances to a minimum\textsuperscript{3}. Four years later, Berlioz met again Paganini, who could not speak and narrated how his 13-year-old son, Achille Paganini, placing his ear to his father mouth, acted as his interpreter\textsuperscript{4}.

Franz Schubert (1797-1828) was born and died in Vienna, Austria from syphilis, as well as from typhoid fever. His health problems appeared in February 1823, when mood changes, depression, headaches and dizziness obliged him to be hospitalized in the General Hospital of Vienna, where syphilis was diagnosed and treated. The primary infection occurred in the last days of 1822 and since then, times of hospitalization alternated with home stay for the rest years of his life. Two eminent physicians attended Schubert: Dr Ernest Rinna von Sarenbach and Dr Joseph von Vering and had no doubts about the diagnosis. He dealt with mercury inhalation therapy sessions, repeated 20 times, accompanied by severe side effects. He spent his two last months of his life at the flat of his brother Ferdinand in the Vienna suburb of Neue Wieden continuing the therapy\textsuperscript{5, 6}. The diagnosis of typhus contradicts his symptoms because there was not mention of rush or fever and, moreover, no typhoid epidemic existed in the city at that time\textsuperscript{7}.

Gaetano Donizetti (1797-1848) was born and died in Bergamo, Italy, in an insane asylum, psychotic, paralyzed, speechless, suffering moreover from convulsions and incontinence, all symptoms of tertiary syphilis. After his death an autopsy was performed resulting to confirm the suspected neurosyphilis diagnosis\textsuperscript{8}. He probably got infected before his marriage at the age of 31; his wife, Virginia Vasselli, died nine years later, after having given birth to three infants (the first born deformed) who did not survive. He suffered from fevers, severe headaches, and convulsions and was examined by the famous specialist in venereal diseases Philippe Ricord and two more Parisian specialists in mental diseases and all diagnosed neurosyphilis recommending his hospitalization in a mental institution\textsuperscript{9}.

Robert Schumann (1810-1856) was born in Zwickau, Germany and died in Bonn, Germany from syphilis. At young age he had to abandon his ambition to become a piano soloist because of a self provoked hand injury, by the use of a mechanical device trying to increase the strength and the flexibility of all his fingers\textsuperscript{3}. He suffered from a lifelong mental disorder, first manifesting at the age of 23 as a severe
melancholic depressive episode, alternated with phases of exaltation. Conquered by delusional ideas of being poisoned or threatened by knives he made two suicide attempts. He probably got infected at the age of 20 and reached to neurosyphilis early: this may explain the avoidance of infection for his wife Clara, as the disease might have remained latent during most of his marriage or entered the third stage, where is rarely contagious\textsuperscript{10}. He spent his two last years in an insane asylum reporting visual and auditory hallucinations and successive demonic and angelic visions.

Bedrich Smetana (1824-1884) was born in Litomyšl, Czech Republic and died in Prague, Czech Republic, in an insane asylum. At the age of 11, a bottle of gunpowder injured his face an osteomyelitis of the right temporal bone had complicated the infection, leading to a face asymmetry. Smetana’s first symptoms occurred at the age of 38 as auditory hallucinations, followed by tinnitus and hearing difficulties\textsuperscript{11}. In 1849 he married Katerina Kolarova but three of their four children died between 1854 and 1856\textsuperscript{12}. After 12 years he became completely deaf, although examined and treated by the most eminent specialists in Paris. The last years of his life he slipped into mental insanity with violent behavior. He mentioned visits of non-existing persons and he addressed letters to imaginary friends. Moreover, he showed memory impairment and confusion between the Czech and the German languages. After his death, an autopsy performed attributed his mental disease to neurosyphilis and a century later, when his body was exhumed and examined, all tests for syphilitic infection were positive and huge concentrations of mercury were found in his tissues\textsuperscript{13}.

Hugo Wolf (1860-1903) was born in Windischgrätz, now Slovenj Gradec, Slovenia, and died in Vienna, Austria, in an insane asylum. He first had a period of severe depression after his father’s death. At the age of 31 the effects of syphilis and the recurrence of depression obliged him to stop composing for several years. After six years he definitely slipped into insanity only occasionally finding some lucid intervals, trying to finish his works. At the age of 39 he attempted to drown himself\textsuperscript{13,14}, and after his death another suicide occurred: Melanie, wife of his friend Heinrich Köchert, who faithfully visited Wolf during his mental decline, could not bear her unfaithfulness to her husband and followed him to death three years later\textsuperscript{15}. 
Frederick Delius (1862-1934) was born in Bradford, UK and died in Grez-sur-Loing, France. He probably got infected with Syphilis during his stay in Paris (1888-1897) living the bohemian pleasures of the city, accompanied by Gauguin, Munch and Strindberg. He married the painter Jelka Rosen and enjoyed good health during his first time of marriage. During a visit to England at the age of 48, he developed severe headaches and back pain, followed by blurred vision. Ten years later he had wheelchair dependence and complete blindness [Picture 2] and, at the end of his life he suffered from unbearable pains requiring morphine administration\(^\text{16}\). Referring to his late works, he was lucky enough to dictate several compositions to a young admirer of his music, Eric Fenby for six years. His wife followed him to death four days later.

**IMPACTS OF SYphilis ON THE LATE COMPOSITIONS**

**The shock of the diagnosis**

As Schubert was informed about his disease, it is said that he decided never to return and finish his *Unfinished Symphony\(^\text{12}\).* One can imagine the circumstances of the composer’s life at that critical time: a gifted young musician has just been informed that he has syphilis (presenting symptoms such as rashes, hair loss, pains, fever) and that his promising career will never reach at the top of his expectations. Nobody has ever given an explanation for his decision; he surely could have added two more movements. Biographers and musicologists have not given other interpretation except that of a psychological shock which connected the onset of symptoms with the symphony he was composing. The reminder of mortality might have discouraged him from keeping the convention of a four-movements-symphony\(^\text{6}\).

The effects of syphilis can be detected in this famous composition (1822), which reflects the changes of mood and the beginning of a period of darker compositions. [Picture 3] While his youth symphonies depict the joy of life, his last one emerges out of a soul in pain and fear of death, especially in the first movement. Although there are moments of calm in this composition, the clouds are always present. As he was treated drinking “tea of mercuric content” and lost his hair, he was haunted by death-agonies composing lieder and other compositions reflecting his bleakness, despair,
and presentiments of death such as Die Winterreise (Winter journey) and Der Tod und das Mädchen (Death and the maiden)\textsuperscript{10}. Reacting in a similar way, Smetana realized the future loss of mind and noted the words “final page” at the middle of a composing score.

**Tinnitus**

One of Smetana’s best-loved works, his *First String Quartet*, subtitled “From my Life” [Picture 4] completed in 1876 is of great neurological interest because it describes in graphic terms the onset of his illness. He thought it as the origin of his deafness *which has cut me off from the enjoyment of the art of music* as he wrote. The quartet is autobiographical and a great example of artistic self-reflection and musical depiction of a neurological symptom. The last movement expresses the composer’s joy at his professional success, however, suddenly interrupted by a silence after a diminished seventh chord. At that point, the three lower instruments play a quiet, agitated tremolo chord, whereas the first violin plays a harmonic extremely high E (a high and sustained E), which tries to replicate the whistling sound of the A-flat major chord that the composer associated with his tinnitus. The quartet never recovers its optimism from that point on and ends in a resigned, sad fashion; anyway, it is considered as one of the great string quartets of the 19\textsuperscript{th} century but it is also one of the great examples of artistic self-reflection and of musical depiction of a neurological symptom\textsuperscript{17,18}.

Schumann’s work *Ghost Variations for piano* was written just after his suicide attempt and was his last published work. But if the “syphilitic sound” to his last works differentiates the final result (also a single note sounding in his ear, possibly evidence of tinnitus), the underlying declining brain that produces one of the saddest music pieces represents a triumph of the human spirit\textsuperscript{19}.

**Auditory hallucinations**

During Schumann’s long mental illness some events of playing non-sense music at the piano obliged his environment to drag him away preserving his fame and dignity.
Ten months before his death the *Violin Concerto in D minor* [Picture 5] he composed was ready and the violinist Joseph Joachim played it for Schumann’s wife Clara. The latter did not like it claiming that it “showed definite traces” of her husband mental decline; she even asked Joachim to recompose it and after his refuse, finally said she wanted the manuscript destroyed.

Myths about the concerto accrued that it was a mess and that the first movement was evidence of declining mind focusing on the orchestral accompaniment. The second slow movement was said to having been composed after a night inspiration of the composer, who saw a dream that a ghost dictated a “spirit theme”\(^\text{12}\). During the last years of his life he was tormented by angels and demons fighting in his mind\(^\text{20}\). On the other side, the third movement containing a repetitive polonaise was long considered as unplayable, because of Schumann’s marking “Lively but not too fast” inhibiting the soloists to show their virtuosity and make this “awkward” music flow. It is generally accepted that because of the neurological damage, Schumann heard music at a different speed from other people and this may explain the slow way of interpretation that the composer himself demanded\(^\text{19}\).

**Madness on scene**

Donizetti not only in the “Mad scene” of his opera *Lucia di Lammermoor* depicted his own mental disorder but also created some of opera’s most powerful scenes of psychosis in *Anna Bolena* and at least four more of his 65 operas\(^\text{9}\). In the latter Donizetti has created a musical dramatization of a mind fragmented by mental derangement (the prison mad scene) and, 16 years later, he would be obliged to have a similarly unbalanced state when he was locked against his will not in jail but in a mental insanity asylum in Ivry, France. Five years later the heroine of his opera, Lucia, [Picture 6] describes her visual and auditory hallucinations, while the audience notes her tendency to confuse fantasy with reality. The composer leaves his mark in the history of opera by portraying in musical terms the psychological and physical effects of psychosis on a human being. Physicians and historians knowing about Donizetti’s mental disease can add the personal participation and suffering of human beings trapped in the prison of a brain subjected to a gradual devastation of insanity.
and psychosis. Most sopranos append cadenzas to the end of the “Mad Scene”, sometimes ending them on a high keynote (E-flat or F).

**Depression and mourning**

The Ouverture from Schumann’s *Szenen aus Goethe Faust* is one of the last works of a very disturbed Schumann. It carries the disease stigma of this period and sounds charged with profound anxiety. Experts support that “it is a tormented orchestral score of certainly debatable unity and control”\(^{21}\). A “peaceful melancholy” is obvious also at the *Third Violin Sonata*. Although it was rumored that Clara Schumann and Johannes Brahms had destroyed many of the composer later works, which they thought to be evidence of his mental disease (known that the *Five Pieces for Cello and Piano* indeed followed this destiny) the Violin Concerto, the Violin Sonata and the Fantasy for Violin and Orchestra remain into the universal repertoire.

A well known composition of Schubert that dates from his last year is the Lied entitled *Doppelgänger* [Picture 7] which describes the meeting of a man with his double. Literally meaning the “double-goer”, the idea of a spirit double, an exact but usually invisible replica of every human or animal is an ancient one and appears in the tradition, when somebody is about to die. Some biographers interpret the song as revealing Schubert’s two-sided nature of his personality, additionally pre-announcing the common fate he shared with the circle of his friends. A letter of 1824 is reflecting his pessimism: *Imagine a man whose health will never be right again, and who in sheer despair over this ever makes things worse and worse, instead of better*... The song based on a poem of Heinrich Heine seems to represent Schubert’s feelings that death was approaching him\(^{22}\). Similar approach can be traced in the last opera of Smetana *The Devil’s Wall*. The hero, the hermit Benes and his devilish counterpart, Rarach, appear together, indistinguishable from each other, but to the other characters, either one or the other is invisible\(^{12,18}\).

Wolf shared with Schumann and Schubert all the psychological and neurological symptoms that interfered with their artistic expression, especially in respect to Lied compositions\(^{23}\). Wolf left his last opera, *Manuel Venegas* [Picture 8] unfinished, trying desperately to end it before he lost his mind completely; he also created three
songs based on the poems of the famous painter and sculptor Michelangelo Buonarroti, *Rima 21* and baptized this work *Drei Michelangelo-Lieder* when he realized the coming end of his life. Their titles “Often do I reflect”, “Does my soul feel” and “All that is created must perish” depict the psychological situation of a desperate man:

*All that is created must perish*

Chiunche nasce a morte arriva       _all that is created must perish_,
nel fuggir del tempo; et ’sole       _everything around us passes away_,
niuna cosa lascia viva.             _for the time flies and the sun sees_

Manca il dolce e quel che dole       _that everything has an ending_
e gl’ingegni e le parole;          _thinking, speaking, joy and sorrow._
e le nostre antiche prole           _And our children’s children die away_
al sole ombre, al vento un fummo.   _like night’s shadow in the daylight_

Come voi uomini fummo,              _or like a mist in a breath of wind_
lieti e tristi, come siete;         _We also were human beings,_
e or siàn, come vedete,             _merry or sad like you._
terra al sol, di vita priva.        _And now we are lifeless here,_

Ogni cosa a morte arriva.            _Nothing but dust, as you see._

Già fur gli occhi nostri interi
Con la luce in ogni speco;
or son voti, orrendi e neri,
e ciò porta il tempo seco.

*All that is created must perish*

Delius said his own farewell with the song cycle *Songs of Farewell* with words selected by his wife Jelka, from the “Leaves of Grass” poems of Walt Whitman (1819-1892). [Picture 9] His initial idea has been sketched in 1920 but in 1925, blind and paralyzed, could not collaborate with his wife in order to dictate it. Only when Eric Fenby joined the Delius household, the composer achieved to complete his unfinished works or even to initiate new ones in days of relative health. The concluding poem is a “hymnically sibylline exordium”: *Now Voyager, depart* dictated
with great rapidity and accompanying mood of frenzy until the composer’s exhaustion.

*Now finale to the shore,*

*Now land and life finale and farewell,*

*Now Voyager depart, (much, much for thee is yet in store,)*

*Often enough has thou adventur’d o’er the seas,*

*Cautiously cruising-studing the charts,*

*Duly again to port and hawser’s tie returning;*

*But now obey the cherish’d secret wish,*

*Embrace thy friends, leave all in order,*

*To port and hawser’s tie no returning,*

*Depart upon thy endless cruise old Sailor.*

**Discussion**

In the pre-antibiotic era, syphilis was an extremely common disease. During the 18th and the 19th centuries, many artists became victims of the disease-menace, among them poets, painters, composers and philosophers\(^1\). In our days neurosyphilis is observed in 5-10\% of untreated patients and may occur at any stage of the disease. Psychiatric symptomatology is the most common clinical manifestation but radiologic differential diagnosis is not easy. In neurosyphilis medium and small vessels are usually involved and in cases of invasion of the central nervous system, the most frequently involved arteries are the middle cerebral and branches of the basilar artery\(^25\). Neurosyphilis has been the cause of the seven syphilitic classical composers’ loss of cognitive functioning and change in personality, dysarthria and tremor, loss of vibratory sense, impotence, paralysis, blindness and deafness. However, in spite of the severe neurological and psychological disorders, the creativity and the continued efforts for finishing their musical compositions never stopped. Even, towards the end of their lives, some of them into insane asylums or paralyzed or blind or deaf, they found a lucid interval to show their music genius and said their farewell with works reflecting their feelings and fears before death.
Mercury poisoning was another source of severe side-effects that tortured the syphilis sufferers. The only recommended remedy of the era was mercury, either orally, in vapor baths or topically, and no later than 1910, Paul Erlich’s chemotherapeutic (Salvarsan), was the first effective therapy against syphilis before penicillin was introduced. Headaches, nausea, loss of hair and teeth are attributed to the intoxication of a heavy metal such as mercury, and it seems probable that some drugs and medications might have affected the productivity and the creativity of the artists.

All the late works of the suffering from syphilis composers were created under the menace of definite loss of sense or during painful and uncomforted circumstances allow a unique view on music physiology. Syphilis has been a great stigmatization in the times of the great classical composers of the 19th century, and this stigma included the whole family. All the composers tried to hide the disease while in life, while the latter tried to keep the shameful secret, aftermath destructing sources (letters to close friends, personal diaries), medical documents, and, in cases of autopsy, changing the findings, therefore, resulting to a general and indefinite diagnosis i.e. dementia or inventing imaginative illnesses such as the typhus of Schubert, greatly disputed by historians. Syphilis was often the presumed etiology of progressive cognitive dysfunction in a young person.

Depression, anxiety, bipolar disorders, despair intense maniac phases were common and during the latter, visual and auditory hallucinations, visions and paranoid ideas tortured the composers and influenced their musical scores. Tinnitus, hearing loss and “sounds” confused the harmony and punctuality of the compositions, although these experiences were often transformed to intense creations enriched with powerful sentiments. All these classical composers gained the immortality they deserved by their divine music, still capable to inspire modern audiences.
REFERENCES


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FIGURES

1. A 1831 bulletin advertizing a performance of Paganini

2. Frederick Delius towards the end of his life, blind and wheelchair-dependent with his wife Jelka and his admirer and collaborator Eric Fenby

3. Schubert’s *Unfinished Symphony*

4. Smetana’s *Quartet No 1 From my country*

5. A page from Schumann’s *Violin Concerto*

6. Fanny Tacchinardi-Persiani as *Lucia di Lammermoor*, heroine of the homonymous opera of Donizetti, first production in London, 5 April, 1838

7. A page of Schubert’s Lied *Der Doppelgänger*

8. Wolf’s unfinished opera *Manuel Venegas*

9. Delius’ *Farewell Songs*