Suffering for Her Art: The Chronic Pain Syndrome of Pianist Clara Wieck-Schumann

Eckart Altenmüller², Reinhard Kopiez³

²Institut für Musikphysiologie und Musiker-Medizin, und ³Institut für musikpädagogische Forschung, Hochschule für Musik und Theater Hannover, Hannover, Germany

Abstract

Clara Schumann was an outstanding pianist, systematically trained as a child prodigy by her father Friedrich Wieck. Married to the composer Robert Schumann she gave birth to 8 children, however, was able to continue performing regularly in public. After the mental breakdown of her husband, she had to increase her public performance activities due to the need to earn a living for her large family. In this time, the first pains in the right arm occurred, which at the beginning were of shorter duration, however increasingly required prolonged periods of rest. Later, when attempting to work on the highly demanding piano works of Johannes Brahms, especially on his first piano concerto, she developed chronic pain, which forced her to interrupt any concert activities for more than 1 year. Obviously, Brahms’ modern treatment of the piano in an almost orchestral way imposed technical difficulties which Clara Schumann was not properly prepared to deal with. Finally, she underwent a multimodal pain therapy in the private sanatorium of Dr. Esmarch, which consisted of an integrated interdisciplinary approach comprising pain medication, psychotherapy, physiotherapy and modification of playing habits. She fully recovered and successfully continued her career as an internationally renowned concert pianist. The case report impressively demonstrates the stressors an outstanding female elite musician had to cope with in the 19th century. Furthermore, it is a convincing example of how the intuition and mere experience of a sensitive and understanding doctor lead to the right conclusions and to a modern multimodal pain therapy in chronic overuse injury. Furthermore the case report demonstrates the important role of prevention, including physical exercises, self-awareness, and reasonable practice schedules.

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'Imagine, I had only just arrived when I felt such pains in my left arm that I had a terrible night and the next morning I had to cancel the concert and journey back, then I had to cancel another concert and various other things here.'


In Germany, Clara Schumann (fig. 1) is remembered with affection as the attractive young woman with the double-parted curls who gazes romantically out from the old 100-D-Mark notes. To many Germans, she was the loyal wife of composer Robert Schumann, who died at the age of 46. But what is less well known is that she was a composer in her own right and also an outstanding pianist, who was one of the first women ever to play concert tours all over Europe. If she were alive today, she would be an international star like Martha Argerich. But Clara Wieck-Schumann’s wonderful performances came at a price: her
This chapter looks at the pain caused by playing the piano. What were the circumstances leading up to this pain? Did Clara Schumann suffer from a chronic rheumatic disease, as her doctors suspected? Or were the pains largely psychosomatic, brought on by the many stress factors in her life: the excessive demands placed on her by caring for a large family; the long, uncomfortable journeys, and the constant financial worries? Did the pains arise specifically because she was a pianist – were they signs of overload caused by too much practicing and playing? Were contemporary composers such as Johannes Brahms making new demands in terms of technique which were physically too much for Clara Schumann?

We will be making a detailed analysis of these questions with the help of musical biography, expert research and modern-day doctors who specialize in musicians’ injuries. In this way we would like to demonstrate how Clara’s medical problems typically reflect the darker side of virtuosity, specialization and the modern concert scene. Pain disorders caused by playing an instrument have always been a common problem, and continue to be so to the present day. The most comprehensive study of this topic was carried out in the USA by Fishbein and Middlestadt [1988]. They ran a survey of 4,025 professionally performing musicians from 48 American orchestras in which they asked specific questions about pain disorders. A total of 2,212 musicians responded to the survey. Of these, 76% stated they had ‘serious problems’ which affected their playing. 49% of those with ‘serious problems’ suffered musculoskeletal pain, its actual location depending on the instrument played and the particular strain involved. Violinists typically had problems with shoulders and arms, while cellists and wind players were generally affected in the neck and back [for a review see, Altenmüller and Jabusch, 2008].

Another study of young pianists showed a lifetime prevalence of 25% for pain syndromes which required at least 2 days away from the instrument [Shields and Dockrell, 2000]. The sheer volume of ailments is astonishing, but it seems that incidental pain when playing is an everyday occurrence for most musicians. So it is not surprising that Joseph Joachim, recipient of the above-quoted letter dated December 1, 1857, should reply by trying to comfort her with the following anecdote:

‘My poor dear friend, you have had so much to bear – having to exist alone without music. How terrible! The same thing happened to me 4 years ago, just after I had taken up my new position of concertmaster. During our first rehearsal of Mendelssohn’s symphony, which should have been my first performance, I strained myself because of my excessive fervor and for the next two weeks I could lift neither bow nor pen – what a debut for me when I had no acquaintances and no support from my fellow-players!’ [Litzmann, 1923, vol I, p 28].

Clara Schumann’s Pain Syndrome
Clara Wieck's Musical Training

It is worth taking a closer look at the training which Clara received from her father, Friedrich Wieck. What methods did he use to enable her to gain international recognition and to develop Clara’s resilience, technical perfection, creativity and spontaneity? In his teaching did he in fact use knowledge of ‘music physiology’?

Friedrich Wieck was born in 1785 in Pretzsch an der Elbe, about 45 km from Leipzig. His parents were merchants, but business was not good and they lived in humble circumstances. Friedrich was passionate about music from an early age, and was particularly interested in piano technique. However, he followed his parents’ wishes and first studied theology, though he was never appointed to a parish. Instead he took a position as tutor for Baron Seckendorff in Querfurth, and he became friends with the musician Adolph Bargiel, who was later to marry Wieck’s first wife.

One of Friedrich Wieck’s striking characteristics was his interest in pedagogical matters. He had read the educational treatises of Johann Heinrich Pestalozzi and Jean-Jacques Rousseau and later used their main pedagogic principles in his piano teaching. In 1815 he opened a music shop and educational establishment in Leipzig (today it would be called a ‘private music school’) where he taught piano and music theory and his wife Marianne also taught piano, as well as giving singing lessons. Here he was able to develop his pedagogical interests and begin to use them to aid the progress of his daughter Clara [for a review see, de Vries, 1996].

Clara Wieck was born on September 13, 1819. By the age of four she was playing melodies and short pieces on the piano by ear. When she turned five, her father started her on his ‘complete’ musical training, which did not simply concentrate on finger dexterity but encompassed the development of musical expression, singing, and the avoidance of excessive tension. Wieck taught her how to play with great expression while keeping her wrists and elbows relaxed and using the greatest possible economy of movement [Köckritz, 2007; Classen, 2009]. Her flawless legato and ‘song-like’ melodic lines attracted the admiration of the famous violinist and composer Louis Spohr, who was amazed by the consummate smoothness of 12-year-old Clara’s playing and attested that she ‘made the instruments sound more beautiful’ [Walch-Schumann, 1968].

Another important principle of the training was the avoidance of physical and mental exhaustion. So as a child, Clara was allowed to practice piano for no more than 3 h/day, and she had to spend at least the same amount of time exercising outside in the fresh air. Friedrich Wieck’s method also included physical exercises to improve playing technique, such as specific finger-stretching...
exercises to increase the span of Clara’s hand. Indeed, later on Clara was able to play tenths with a loose wrist and also included wide-spanning chords in her own compositions.

Once Clara was 7 years old, the ‘complete’ training method was supplemented with a thorough schooling in music theory. She received lessons in music theory, counterpoint and composition, and regularly attended concerts by the Gewandhaus orchestra, as well as visits to the Leipzig opera house and theater. And in order to develop her own teaching skills, when she was 11 years old she was assigned the task of teaching her younger brother Alwin to play the piano [Steegmann, 2001].

Up to the age of 12, Clara’s repertoire consisted mainly of ‘virtuoso, popular, brilliant pieces which were in currency at the time’ as Monica Steegmann [2001] describes in her biography of Clara Schumann. It was dominated by the works of Hummel, Moscheles, Czerny, Herz, Kalkbrenner und Field. But from 1833 onwards a canonized repertoire, as described by Kopiez et al. [2009] was already becoming established. It was now dominated by Chopin, Mendelssohn, Robert Schumann and Beethoven, but their works did not really conform to popular taste at the time and their compositions were considered avant-garde. We are fortunate enough to have detailed knowledge of Clara Schumann’s repertoires. Litzmann [1923] gives a chronological listing of Clara’s study pieces and repertoire from page 615 onwards in volume 3 of his above-mentioned biography. We also have at our disposal a complete set of her 1,312 concert programs, which have recently been critically analyzed using statistical methods [Kopiez et al., 2009].

In conclusion, Clara Schumann’s training as a pianist was developed in accordance with remarkably modern considerations relating to music physiology. Limiting daily practice to 3 h, avoiding monotonous, purely mechanical finger exercises, bringing diverse aspects of musical theory into the training, paying attention to health issues by promoting stretching exercises and regular walks in the fresh air – what we would today call ‘mild endurance training’ – all these are pedagogic principles which can help to develop great resilience and an accelerated rate of learning [Altenmüller and McPherson, 2007]. In this way, Friedrich Wieck was a step ahead of his contemporaries, who overemphasized the value of long hours of practice. Even as children, the pianists Clementi and Czerny were spending 8 h/day in ‘solitary confinement’ at their pianos, while Kalkbrenner was practicing 12 h and Henselt as much as 16 h/day. However, leading performers and teachers reacted to such feats of endurance with a note of irony. In the foreword to his 1811 piano tutor, Hummel writes: ‘I can assure you that regular, attentive practice of at most three hours per day is sufficient; longer practice dulls the spirit and leads to playing which is machine-like rather than soulful’ [quoted according to Gellrich, 1992].
Stresses and Strains of Piano Playing

Systematically building an international career as a pianist required – and still requires today – great physical and mental resilience. From the age of 11 Clara went on regular concert tours which placed her under enormous stress. Friedrich Wieck’s letters are full of complaints about uncomfortable carriages, poor accommodation, defective instruments and local complications [Walch-Schumann, 1968]. It is clear that there was no respite for Clara: in a letter from her father to his wife dated February 20, 1837, he describes the triumph of her concert in Berlin and then adds: ‘Clara is suffering with her eyes because of the brightness of the lights, and almost all her nails have split – but her fingers do not hurt. …’ Clara was obviously extremely resilient in terms of her piano playing because of the solid training she had received from her father, her clever choice of repertoire and her optimal practice technique. For example, she withstood the heavy demands of her first stay in Vienna from November 1837 to April 1838, where she played up to three concerts or private recitals every day, without adverse effects on her health. And this was despite the enormous emotional pressure caused by the intensive exchange of letters she was having with her suitor Robert Schumann, which she was keeping secret from her father. The diaries and letters of Clara and her father up to 1857 show no clear evidence of overuse injuries caused by playing. Nevertheless, her physical wellbeing was always a concern. On September 16, 1836 Clara took a fall while on her way to a concert in Naumburg. In Litzmann [1923, vol I, p 106] we find the following account:

'It could have been a day of great misfortune for Clara. She took a tumble on her way to the concert … as a result her left hand swelled up hugely and caused her severe pain for several days.'

Wieck talks unequivocally about this event:

'We were on our tour of the cities, and in Naumburg the sword of Damocles hung over her precious head.'

There is also no evidence in later years of any ailments, even short-term ones that restricted her ability to perform, particularly as Clara’s concert appearances became much less frequent after her marriage to Robert Schumann in 1840. Before her marriage, from 1828 to 1840, Clara averaged 17 concerts per season, while after her marriage, in the years 1840 to 1854, she averaged 10 concerts per season, the number of concerts varying between 22 (season 1844/45) and 4 (season 1845/46), due to her confinements [Kopiez et al., 2009, fig. 3]. It should be noted that Clara Schumann bore eight children and had two miscarriages between 1841 and 1854.

It is not hard to imagine the tremendous strain that Clara must have been under at that time. The large Schumann household found themselves under con-
stant financial pressure and they needed her successful concert performances in order to survive. But the demands of running the household, supporting her husband and organizing her own concerts – without the help of her father – meant that Clara had no time to regularly work on her repertoire. This came to the fore during her second trip to Vienna at the end of 1846. Clara travelled there with her husband and their two eldest daughters, 5-year-old Marie and 3-year old Elise, and she organized her own concerts there. Before the third concert she wrote: ‘I feel like a hunted animal. I only had one hour to prepare for the concert. I fear tomorrow’s concert will be unremarkable’ [Wendler 1996].

Clara’s responsibilities increased still more after her husband was admitted to hospital in Endenich on March 4, 1854. Now Clara not only had to earn a living to support herself and her 7 surviving children (her son Emil, born 1846, died 1 year later), but she also had to cover the high costs of Robert Schumann’s treatment at the clinic. So in October 1854 she undertook her first long concert tour since her marriage, playing 22 concerts in the months before Christmas.

It was during this more intensive period of public performances that she first began to feel more persistent pain, which was clearly brought on by playing the piano.

Onset of Overuse Problems due to Playing the Piano

The circumstances surrounding the onset of the more persistent pains which Clara Schumann felt in her left arm are typical of overuse injuries. In her letter to Joseph Joachim of November 27, 1857, quoted earlier, Clara herself alluded to them:

‘On the morning of the day when my problems began, I had another very enjoyable rehearsal with the orchestra. I was supposed to play Robert’s concerto but I really overreached myself. I have never felt such a sense of enthusiasm emanating from the orchestra as after this concerto; I felt it penetrate to my core and I also became so inspired that I totally forgot myself and everything which lay ahead of me.’

Clara was obviously in that positive emotional state which can be termed as ‘flow’ [Czikszentmihalyi, 1990] and in this inspired condition she was not aware of the physical signals which were warning her of overload. It is well known that the release of endorphins linked to a flow experience can cause pain to be suppressed [Suaudeau and Costentin, 2000]. On top of that, rehearsals are always particularly physically demanding for orchestral soloists. The requirement to be heard against the sound of the orchestra can easily lead to a forced style of playing, and, unlike in solo practice, the time spent playing is controlled by the conductor, meaning that necessary breaks are often not taken.
Medical studies show another typical factor which often leads to the onset of pain, namely general physical debility due to an infection. In the above-mentioned letter we read:

‘A medical examination has shown that the problem was a rheumatic inflammation, caused partly by excessive strain and partly by a head cold’ [Litzmann 1923, vol III, p 27].

Treatment of the pain largely followed the same principles as modern-day treatment. Clara was given a strong analgesic in the form of opium, she was ordered to rest from playing and her arm was immobilized in a sling. The symptoms quickly improved but flared up again 10 days later, understandably causing her considerable concern. On December 6 she wrote in her diary: ‘Sleepless night, very afraid that I will have to return home because of the pains in my arm which are getting worse and worse’ [Litzmann 1923, vol III, p 29]. Nowadays we know that worrying about pain actually increases the likelihood of it becoming chronic. A pain is described as chronic if it lasts for longer than 3 months. It is not quite clear how long Clara suffered from pain in her left arm, but it seems it was still plaguing her in early 1858, for Johannes Brahms writes to her in a letter dated February 24: ‘I cannot wait until I hear from you. I have to learn patience due to your injured arm and probably also the agitation about the concerts’ [Litzmann 1927, vol I, p 216]. However it seems unlikely that the pain was chronic at this time, as at the end of December 1857 Clara was performing some very difficult works, including on December 19 Robert Schumann’s ‘Symphonic Studies’ in Zurich and on December 25 his piano concerto in Munich. From January 27, 1858, Clara was once again on tour in Switzerland and there is no mention of any health problems in her letters or diaries.

**The Perils of a Demanding Repertoire**

In the years that followed, Clara extended her repertoire. In the autumn of 1861 she rehearsed Brahms’ Händel Variations Op. 24, writing about them to her daughter Marie: ‘they are terribly difficult, but I have just about learned them’ [Litzmann 1923, vol III, p 111]. She recounts in her diary her first public performance of them on December 7 of that year: ‘I was scared to death while playing them, but I was successful and received loud applause’ [Litzmann 1923, vol III, p 112].

On December 3, 1861, she performed for the first time Brahms’ Piano Concerto No. 1 in D minor, conducted by Brahms himself, in Hamburg. Clara noted in her diary:

‘… I was probably the happiest person in the whole hall, because although it was physically demanding and I was very nervous, everything was outweighed by my enjoyment of
the piece and the fact that he was conducting it himself. I was not even irritated by the stupid audience who understood nothing and felt nothing …’ [Litzmann 1923, vol III, p 112].

In February 1858 Brahms wrote to Clara shortly after completing this work: ‘I have been practicing the first movement furiously. I do not think you will be able to sustain it. But I would love just once to hear you play the Adagio and Rondo in public’ [Litzmann 1927, vol I, p 219].

Brahms was obviously aware of the difficulties presented by this piano composition. In particular, the formidable fortissimo octave trills in the first movement required a new wide-spanning ‘shaking movement’ of the forearms, a technique which Clara had never tried before (fig. 2). But he underestimated the enthusiasm and sheer willpower of his loyal friend and supporter – she was not to be denied the opportunity to perform it in Brahms’ hometown.

Although Clara retained a life-long love of Brahms’ compositions, she avoided performing them in public in the years that followed. She felt that these piano works were too much for her physically. This is why she performed Brahms’ works quite rarely compared to other composers in her repertoire: Brahms lay in 7th place with 2.3%, behind Schumann (28.4%), Mendelssohn (12.0%), Beethoven (11.5%), Chopin (10.8%), Schubert (6.9%) und Bach (3.1%) [Kopiez et al., 2009, fig 1c]. She only twice performed his Piano Concerto No. 1, whereas she gave public performances of her husband’s concerto (Op. 54) 110 times, Beethoven’s Piano Concerto No. 4 (Op. 58) 59 times, and Mendelssohn’s Piano Concerto No. 1 (Op. 25) 56 times.

Clara explicitly refers to these excessive physical demands in a letter to Brahms written in London on April 8, 1871, during her English concert tour: ‘… then my fatigued muscles played a trick on me – I did not dare to attempt such an arduous piece, as I had to play three times a week, which required of me a great deal of energy. The problem lay with your Händel Variations, which I absolutely wanted to include

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Fig. 2. Johannes Brahms, Piano Concerto in D minor Op. 15. Even today, the formidable octave trills in the first movement present a challenge for pianists.
in my recital but which in the end I had to admit were too hard for me. I am unspeakably sad that these Variations which I love so much are simply beyond me’ [Litzmann, 1927, vol I, p 639].

From early 1872 onwards, we see more and more evidence of her ailments. The excessive demands of her annual English tour caused the symptoms to reappear. While in London she wrote a letter to Brahms dated February 21, 1872, in which she says:

‘I have good news for you in that I am being afforded an enthusiastic reception, people say I have never played so well, etc.; but I am suffering terribly with rheumatism in my arm and finger muscles, so that I am quite afraid to look ahead from one engagement to the next. Although I am practicing everything pianissimo, I am still absolutely exhausted after an hour – of course the rheumatism is afflicting the parts which are under the most strain’ [Litzmann, 1927, vol II, p 6].

So first of all Clara reduced the volume when practicing, but practice sessions of 1 h (probably without a break) would still be considered too long when measured by today’s medical criteria relating to musicians. Interestingly, the ‘enthusiastic reception’ mentioned in this passage was in respect to a work by Brahms, namely his arrangement of the Gavotte after Gluck [Litzmann, 1923, vol III, p 272]. It is not clear whether the uncomfortable ‘Brahmsian’ movement in the arrangement was too much for Clara, but a few days later she wrote in another letter:

‘I have just requested your Hungarian duets from Simrock – I wonder whether I will be able to master any of them?’ [Litzmann, 1927, vol I, p 8].

Clearly, these works with wide-spanning chords which necessitated an excellent leap and octave technique were also a challenge for Clara. But she was also worried about other playing techniques, as evidenced in a letter to her friend in Hamburg, the pianist Theodor Avé-Lallement, concerning the students at the Stuttgart Conservatory:

‘… firstly, as a matter of principle, I do not accept any students from the Stuttgart Conservatory, because I do not approve of their technique and no matter how hard I try I cannot eradicate it from their playing. … their fingers are like storks’ legs walking up and down the piano and the worst thing is that they are compromising their health by practicing in this way: most of them become nervous and develop weak fingers or weak chests. This outcome is inevitable; I only have to play in this way for a few moments before I get terrible pains in my arm muscles’ [Litzmann, 1923, vol III, p 276].

This once again shows how Clara looked at things very much from a physiological standpoint – in this respect she was very much her father’s loyal student. By ‘storks’ legs’ she probably means exaggerated widely stretched finger movements which disregard the weight of the arm and the flexibility of the wrist.

After the summer break, during the 1872/1873 season there is no mention of any pain. But it may be that Clara was preoccupied by other sad events. Her
daughter Julie was in her third pregnancy and seriously ill with tuberculosis. In August she came to the Schumann family house in Baden-Baden with her husband and eldest son, and on November 10 she died of her illness. As was the case later on when her son Felix died, Clara was away on a concert tour when she received the sad news, but she continued with her engagements. Once again we see evidence not only of her enormous self-discipline and will-power, but also her professional desire not to disappoint her public or let down her fellow musicians.

In winter 1872 she was still suffering from physical problems when playing the piano, as is shown in a letter she wrote to Brahms from London dated March 6, 1873:

‘Now I would so love to be able to play the Händel Variations, but I can hardly practice at all. I will just be happy if I can get through the concerts, for the pains in my hands and arms are becoming so bad that I am often seriously worried’ [Litzmann, 1927, vol I, p 15].

We once again see evidence of the difficulties presented by Brahms’ works. Her doctor advised her to avoid writing, which suggests that her right hand was most badly affected. On April 12 she wrote in a letter from London:

‘… by being extremely cautious I was able to fulfill all my engagements: I only ever practiced at half volume and did not do any writing. I was very happy that I managed to get through them, but during the final engagement last Monday I could only move my fingers. I could no longer lift my arms and I needed poultices for the rest of the week. I have now started with homeopathic treatment, which is supposed to be very effective for this kind of pain’ [Litzmann, 1927, vol I, p 16].

Today we would say that it was high time she took a break from playing, but she did not cancel her concerts, indeed she planned a final matinee performance on April 26. But in order to give her hand a little respite, Clara began to dictate some of her correspondence. On November 24, 1873 she dictated a letter to Brahms:

‘… my hand and arm joints are really painful so I am dictating almost everything’ [Litzmann, 1927, vol I, p 16].

In view of her poor health it was quite amazing that Clara risked performing for the second (and last) time Brahms’ Piano Concerto No. 1 in D minor at the Leipzig Gewandhaus on December 3. It was a pyrrhic victory, for in a letter to Brahms dated December 12, 1873, she wrote

‘Your concerto has given me so many pleasant, even happy, hours. It is so beautiful and I performed it successfully in Leipzig … I would need to play it every year, another 3–4 times, so that the audiences could also become familiar with it. But who knows whether I will ever play it again, for the pains in my arm are now very bad – at the moment I cannot play at all, and indeed I should not be writing’ [Litzmann, 1927, vol I, p 32].
Finally – A Consistent Treatment Regime

After her concerts in Leipzig, Clara finally decided to seek out a consistent treatment regime for her now chronic pain. For the first time in her long artistic career she took a break from playing and performing from mid-December 1873 to March 1875. She cancelled her tour of England and refused an invitation to play 100 concerts in America, and ‘The piano has been closed for weeks – that is so hard!’ [Litzmann 1927, vol I, p 41].

Her diagnosis was now reviewed, and according to the Berlin doctors it was not ‘rheumatism’, but ‘overstimulation of the muscles’. From February 1874 her arm was treated using:

‘A stroking and kneading treatment from a lady who has had considerable success with other patients. She thinks she will be able to help me recover, but I have to be patient because the pains are of a long-standing and persistent nature. … Of course at the beginning it was very painful’ [Litzmann, 1927, vol I, p 41].

This treatment is probably very close to ‘classic massage therapy’, which today is still one of the standard methods used by physiotherapists to treat chronic muscular tension and pain. But unfortunately the treatment was not successful. In May, Clara went to Teplitz for 6 weeks of rehabilitation therapy. The pain in her arm meant she still had to dictate her letters and refrain from playing the piano. In particular this long period away from the piano seemed to gradually drive her to depression. Clara wrote in her diary on New Year’s Eve 1874:

‘A sad New Year’s Eve – this year has been a difficult one for me and my travails are not yet over. I have not been able to practice my art, my consolation in difficult times. How hard it has been!’ [Litzmann, 1923, vol III, p 316].

At the end of January 1875 Clara went to Kiel to be treated by the renowned surgeon Friedrich von Esmarch, who treated chronic pain syndrome in a very modern way even by today’s standards. Clara wrote in her diary:

‘I began the treatment on 27 (January), which consisted of massage, which was very painful at first but which improved after a few weeks, and douches. … Even on the first day I had to play piano for an hour, despite the pain – Esmarch insisted on this, whereas all the other doctors had strongly recommended rest – and the pains did not get worse as a result of it … Esmarch and his wife (the Princess of Schleswig-Holstein) are very kind people. Whenever he left (he visited me every morning) I felt happier than before he came. … The pains in my arm improved a little, though not significantly, it was painful to play, but I played nonetheless, I now had the courage to do it – it was also a kind of treatment for the mind … they tried to persuade me to play a concert, which at first really terrified me … but Esmarch quickly brought the matter to a head when he said he was going to write a prescription for me – “Play a concert”, he needed to see how I coped with playing in public … On March 18 I gave my first concert for nearly 18 months. It went very well and everyone was very sympathetic. Among many beautiful flowers I received an anonymous bouquet from Berlin with the words:

Altenmüller/Kopiez
Play without pain  
Heartfelt wishes  
A Berlin admirer’ [Litzmann, 1923, vol III, p 318].

Esmarch was successful with his combination of physiotherapy, supportive psychotherapy and a cautious return to the piano. He can be considered to be the first of those modern-day doctors who specialize in musicians’ injuries. He utilized a multi-dimensional, holistic pain therapy which is still in use today. The main elements of this therapy are:

1. Release of muscle tension through physiotherapy and massage.
2. Psychotherapeutic treatment of the accompanying anxiety and negative self-image which is often observed in these cases, along with the patient’s loss of confidence in their own abilities.
3. Promoting positive experiences at the instrument through resumed playing, systematic, structured training and through encouraging the patient to temporarily ignore the pain. In this way the negative associations which have been stored in the central nervous system relating to playing the instrument and the pain are gradually erased and the pain memory is ‘overwritten’.

Admittedly, Clara was not now totally free of pain, but in the years that followed she understood how to avoid overstraining herself by paying attention to her choice of repertoire, planning her concerts carefully and making sure she took sufficient respites. It is interesting to see how this affected her playing of Johannes Brahms’ works: in the 1872–1873 season, 2 years before her break from playing, she performed an unusually high number of works by Brahms, making up 9.3% of her repertoire. When her condition was at its worst during the season of 1873–1875 and even after her recovery in 1876–1877 she never again performed one of his works. After recovering from her chronic pain syndrome she obviously decided to avoid playing Brahms’ potentially hazardous works.

Her health may also have improved because of the inner serenity she had achieved and the more secure financial situation she found herself in due to her appointment as teacher at the Hoch Conservatory in Frankfurt and the growing royalty income from her husband’s works. Her friends also showed a tender concern for her health. A final example is the story of how Brahms came to arrange Johann Sebastian Bach’s violin Chaconne in D minor for the piano left-hand:

‘Dear Clara,

I think it is a long time since I have sent you anything [the arrangement of Bach’s Chaconne for the left hand, ed.] as enjoyable as this – if your fingers can withstand the enjoyment! The Chaconne is one of the most wonderful, unfathomable pieces of music. … Try it out, I have written it for you. But do not overstrain your hand! It requires a great deal of

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sound and power, for the time being just play it mezza voce. But make sure the finger positions are manageable and comfortable …’ [Litzmann, 1927, vol II, p 111].

Clara replied on July 6:

‘Dearest Johannes,
That was certainly a wonderful surprise! It was really strange – on the day after my arrival I pulled a tendon in my right hand while I was opening a drawer, but the Chaconne has now become a real refuge for me. Only you could do such a thing … Admittedly, my fingers cannot quite sustain it, at the part with the repetition of the chords (notation of four repeated d-minor chords in octave distance consisting of quarter notes, [authors]). I always break down and my right hand too almost goes into cramp, but otherwise there are no insurmountable difficulties and I am taking great pleasure in it’. [Litzmann, 1927, vol II, p 112].

**Diagnostic Classification**

At first, Clara Schumann’s condition is identified as ‘rheumatism’ by herself in her letters and diary entries and by the doctors who treated her. In the 19th century this term was often used to describe all forms of musculoskeletal pain, and does not mean that it was a rheumatic disorder in the modern sense of the word. The term ‘rheumatism’ was coined as early as 1683 by the Parisian doctor Guillaume de Baillou to describe what we now call rheumatoid arthritis. Over the following centuries, the meaning of the term expanded so that gout, prolapsed discs and other neuralgic pain was referred to as ‘rheumatism’ [for a review see, Gerabek et al., 2005].

It is always challenging to make a precise posthumous diagnosis, as the critical criteria for the diagnosis are normally not available. In Clara’s day it was not possible to detect signs of inflammation through blood tests or to take X-rays of the fingers and arms. But rheumatoid arthritis seems unlikely, as there is no evidence of the symptoms included in the Criteria for Rheumatoid Arthritis as classified by the American College of Rheumatology: swelling or reddening of the joints, morning stiffness, pain occurring mainly in the mornings and at night, and rheumatic nodules [Hammer, 2006].

Diagnostically all the signs point to a chronic myofascial pain syndrome linked to overuse. This term describes pain which is caused by excessive strain on muscles, tendons, joints and soft connective tissues and which is characterized by tight muscles and dull, often shifting pains which get worse on exertion. No abnormalities show up in laboratory tests or X-rays. Characteristic symptoms include painful trigger points, particularly at tendon insertion points. The pains that Clara felt during her ‘kneading treatments’ suggest that she had these trigger points. The diagnosis of ‘overstimulation of the muscles’ which was made in Berlin in 1874 also fits in with this diagnosis.
Myofascial pain syndrome linked to overuse is by far the most common medical condition suffered by musicians and, more specifically, by pianists. The pain normally occurs in that part of the body which is put under strain due to repetitive movements over a long period. So pianists typically suffer from pain in the forearms, hands and finger joints, and occasionally also in the upper arms and shoulders. Clara Schumann also had problems in these areas. The pain is normally set off by overuse and at first is only felt while playing the instrument. There is evidence that this was Clara’s experience. The pain is often not felt during everyday activities. It is triggered by extended periods of playing while preparing for important concerts and practicing unaccustomed techniques under time pressure. These were also clearly factors for Clara Schumann, if we think of the unfamiliar technique required to play the Brahms’ piano concerto. Sometimes, after a certain age, pain can suddenly occur during particular playing actions which were never previously a problem. This pain can be attributed to diminished physical capacity and cumulative damage to the affected areas. Along with longer, more intensive playing sessions and practicing new exercises, non-musical activities such as writing can cause myofascial pain. Clara’s medical history has abundant evidence of this too. Infections, mental strain and depression also increase susceptibility to chronic pain syndromes [for a review on this topic see, Brandfonbremer and Kjelland, 2002].

A Musical-Medical Assessment

How would Clara’s ailments be treated today? Acute overuse injuries are very common and generally do not require any specific medical treatment. A few days rest, cold or heat treatment and careful stretching exercises are all that is needed for the majority of these injuries to clear up very quickly. If the pain lasts longer than 3 days, then non-steroidal anti-inflammatories should be taken under a doctor’s supervision. Clara Schumann’s pains lasted longer than 3 months, so we must assume they had become chronic. Our understanding of chronic pain has changed over the last decades. Nowadays it is believed that chronic pain is mainly due to maladaptive central nervous plasticity. Via increasing efficiency of synaptic transmission in the dorsal horn of the vertebral column and downregulation of pain-inhibiting circuits, persistent pain leads to increased afferent inflow to the thalamus and the more centrally located neural networks relevant for pain processing [for a review see, Fields and Basbaum, 1999]. Moreover, the anxiety caused by what is perceived as a serious pain event – which Clara clearly experienced – promotes a change in the somatosensory representation of the painful limb in the parietal cortex. According to Flor et al. [1997] and Tinazzi et al. [2000] as a correlate of chronic back or hand...
pain, the homuncular topography is distorted, enlarged and dedifferentiated. Obviously, this prominent change in neural representations correlates to pain memory. Typical for pains, related to such an associative network of pain-memory, symptoms mostly arise when playing and they occur in different locations and in different forms. A crucial part of therapy is to allay the patients’ anxieties in order to break the vicious circle of feeling under threat and the pain becoming fixed in the pain memory. The sufferer should once again start to play their instrument, and it has been shown at first it is best to play for no more than 10 min at a time, several times a day. Clara’s doctor Friedrich Esmarch used these basic treatment principles. In terms of medical history, this is a very fine example of how an effective therapy can be developed through intuition and empiricism, 100 years before the inception of experimental pain physiology and theories about how the central nervous system deals with pain.

**Coda**

Clara Wieck-Schumann’s medical history is instructive in many ways. She received excellent training from her father and developed a technique which was both economical and physiologically sound. Unlike her husband Robert, in her youth she was not inclined towards compulsive overworking, a self-destructive lifestyle, nor to making excessive demands on herself [for a review of Robert Schumanns’ compulsive working behavior see, Altenmüller, 2005]. She instead adopted a forward-looking, considered, very sound style of working. She was extremely resilient and even when under great pressure – such as during her second trip to Vienna – she was capable of performing at a high level. It is hardly an exaggeration to say that it is quite amazing how she stayed healthy for so long! This was thanks to her strong physical constitution and excellent training.

So what was the cause of her problems? We believe that the demands of Johannes Brahms’ new style of playing were a prominent factor in causing the overstrain. This style, which as Robert Schumann said: ‘transformed the piano into an orchestra of wailing and jubilant voices’ [Schumann, 1962], was a new pianistic hurdle for Clara to overcome. She had grown up with the fluent technique of Hummel, Moscheles, Chopin and Mendelssohn, and was now confronted by pianistic problems to which she had no solution. At the same time she was facing a dilemma, for in her role as an influential artist she particularly wanted to promote this young composer. This was her motivation for performing his Piano Concerto No. 1 – with the consequences described. Social stresses, her tendency to anxiety, and the often adverse external circumstances surrounding her also contributed to the pain becoming chronic.
From a musical-medical point of view this is a unique case, because we are fortunate enough to have at our disposal source material which allows us to trace every small detail of a major historic artist’s case history. The onset of pain, the various courses it took, the desperate efforts to fulfill all her concert commitments, the vain search for a ‘fast’ cure, and finally her patient rehabilitation under the aegis of an empathetic doctor are so clearly described and at the same time are so typical that every textbook of musical medicine should mention Clara Wieck-Schumann’s case as a prime example of ‘suffering for one’s art’.

References


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Univ. Prof. Dr. med. Eckart Altenmüller
Institut für Musikphysiologie und Musiker-Medizin
Hochschule für Musik und Theater Hannover
Hohenzollernstrasse 47
DE-30161 Hannover (Germany)
Tel. +49 0511 3100 552, Fax +49 0511 3100 557, E-Mail altenmueller@hmt-hannover.de