

A symphony of second opinions on Mozart's final illness

BY **DR. HOWARD MARKEL** December 5, 2016 at 12:47 PM EST

For classical music lovers, December 5 may be the saddest day of the year. At 12:55 a.m., 225 years ago, Wolfgang Amadeus Mozart drew his last breath. Later, he was unceremoniously buried in a common grave — as was the custom of his era — in the St. Marx cemetery, just outside the Vienna city limits. Mozart was only 35.

Ever since, generations of doctors have been obsessed with figuring out what caused Mozart's premature death. At last count, there were more than 136 post-mortem

diagnoses in the medical literature. This list is almost guaranteed to expand in the years to come.

During his last few months of life, the preternaturally prolific Wolfgang completed the score for "The Magic Flute" and conducted its premier and several subsequent performances. He also composed the lilting Clarinet Concerto in A, a Masonic cantata, some new cadenzas for a few of his piano concerti, and began writing his haunting Requiem in D minor.

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A week after Mozart's death, a Berlin newspaper falsely reported that the composer was poisoned to death. Fans of Peter Shaffer's 1979 stage play, and the 1984 Hollywood film, "Amadeus," incorrectly believe his colleague and rival, Antonio Salieri, did the deed. Others went as far as to spread a false rumor that on his deathbed in May 1825, Maestro Salieri confessed to the crime. (He didn't). Mozart added a bit of fuel to this fire: while composing the Masonic cantata, he told his wife he felt ill, was likely to die, and that he must have been poisoned. Feeling a bit better by mid-November 1791, Mozart retracted claims to being poisoned and turned to writing his Requiem.

Diagnosing Mozart's final illness is complicated by the fact that the doctors who attended him at the close of the 18th century understood disease and practiced medicine in very different ways when compared to today. Mozart's personal physician, Thomas Franz Closset concluded that the composer died of hitziges Frieselfieber, or acute miliary fever. The



Wolfgang Amadeus Mozart (1756-1791) in his study in Kahlenberg, Vienna. Image courtesy of De Agostini /A. Dagli Orti and Getty Images

symptoms of this syndrome included a high fever and the eruption of tiny, millet-seed shaped (hence the name, miliary), red bumps that blistered the skin.

Mozart's sister-in-law, Sophie Haibel, provided the most detailed commentary of his final days and hours. Unfortunately, she gave this testimony some 33 years after the event, when her memory may have been less than reliable. During his last two weeks of life, Mozart developed severe edema (swelling of the hands, feet, legs, abdomen, arms and face due to retained body fluid). Mozart complained of pain all over his body, a fever, and a rash of some kind. The evening before his death, December 4, he was well enough to invite some friends to his bedside to sing parts of his Requiem. He was unlikely to have experienced shortness of breath on his last day of life because he was still singing parts of the Requiem to Franz Süssmayr, an Austrian composer and conductor who was serving as Mozart's copyist (rather than Salieri in the fictional "Amadeus") and who, after Mozart's death, completed a commonly performed version of the Requiem. Sophie insisted that Mozart remained conscious until about two hours before his death.

The many modern medical diagnoses explaining Mozart's death include tuberculosis, mercury poisoning, syphilis, rheumatic fever, kidney failure due to chronic glomerulonephritis, Henoch-Schönlein purpura (a syndrome of bruising, arthritis, and abdominal pain, often accompanied by kidney problems), scarlet fever, and trichinosis from eating poorly cooked or raw pork.

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Perhaps the most impressive of the lot was a 2009 retrospective epidemiological study published in the *Annals of Internal Medicine* (2009; 151: 274-278). A team of intrepid scholars from Amsterdam, Vienna, and London collected reports of all the recorded deaths in Vienna between December 1791 and January 1792, as well as the corresponding periods in 1790 to 1791 and 1792 to 1793. They then studied the death patterns of 5,011 adults (3,442 men with a mean age of death at 45.5 years and 1,569 women with a mean age of death at 54.5 years).

The epidemiologists discovered a marked increase in the deaths of younger men in the weeks corresponding to Mozart's fatal illness when compared to the previous and following years. Also of import were reports of an epidemic in Vienna around the time of Mozart's death, where many people died of the same constellation of symptoms as he did.

All this data led the researchers to retrospectively diagnose a streptococcal infection, which virulently progressed to an acute nephritic syndrome (a swelling and dysfunction of the kidneys, hence Mozart's severe edema), caused by post-streptococcal glomerulonephritis (inflammation of the kidney cells after the infection).

The doctor in me is intrigued and muses, in pianissimo, "Maybe." Soon enough, however, another thought emerges, this time in fortissimo: "Does it really matter?" Speculating how the famous shuffled off this mortal coil is, of course, a fun parlor game for medical detectives. Nevertheless, I think December 5 is best spent celebrating the short life and enjoying the long-lived music of Wolfgang Amadeus Mozart.



Dr. Howard Markel

Dr. Howard Markel is the director of the Center for the History of Medicine and the George E. Wantz Distinguished Professor of the History of Medicine at the University of Michigan.
