Jazz is considered to be one of America’s native art forms. However, the life of a jazz musician has been surrounded by substance abuse, and many of its greatest exponents died at a young age from the complications of cirrhosis and hepatocellular carcinoma. This is a changing scene, with improvements in working conditions for some jazz musicians and advances in prevention and treatment of viral hepatitis. However, the evolution of jazz has been affected by the premature deaths of many of America’s greatest musicians and innovators.

The origins of American jazz can be traced back to New Orleans (USA), and its early pioneers assimilated musical influences from Africa, South America and the Caribbean. Although popular throughout the 1920s and 1930s, many jazz musicians were dealing with racial and financial difficulties throughout their careers. Jazz clubs were the performance platform and alcohol was a common addiction among jazz musicians (1,2). Cannabis, and later, intravenous heroin, became common drugs in the jazz community. The reasons for the high prevalence of substance abuse continue to this day. Jazz musicians often feel isolated from popular music culture (3) and are financially disadvantaged despite having formidable musical skills on their instruments. Some musicians turned to drugs in an attempt to stimulate creativity, whereas others used drugs to dampen the drudgery of smoky bars, the loneliness of being on the road and as a pathway to social camaraderie among their peers (3). A review of 40 eminent jazz musicians with regard to psychopathology showed a similar prevalence to other creative groups, with the exception of substance-related problems (4).

The age at death of 80 great jazz musicians has suggested that the stressful lifestyle of jazz musicians may lead to a decreased life span (3). The end result of years of alcohol and drug abuse was a high prevalence of cirrhosis among jazz musicians, which led to premature death. It is likely that many of these cases would be related to both hepatitis B and C, and the chronic effects of alcoholism. Antiviral therapies and vaccinations became available only in the 1980s and health care may also have been unavailable to many jazz musicians. Hepatic encephalopathy, ascites, variceal bleeding, jaundice and hepatocellular carcinoma were all reported in jazz musicians.

Charlie Parker demonstrated clinical features of cirrhosis, with ascites and variceal bleeding, and he spent time in a mental health hospital in Camarillo, California (USA). He died at 35 years of age in 1955.

John Coltrane was a major innovator of avant-garde jazz in the 1960s and yet he passed away at 41 years of age in 1967 from hepatitis B and hepatocellular carcinoma. Hepatocellular carcinoma also claimed major saxophone stylists Stan Getz in 1990 and Steve Lacy in 2004. Variceal bleeding...
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It is difficult to estimate the prevalence of cirrhosis in jazz musicians because the denominator is not known and many unheralded musicians have likely died without public attention. Hepatitis B vaccination could improve longevity, but alcoholism and hepatitis C remain major health issues among jazz musicians. The solution to these problems include better health education of musicians, but should also include a system to allow jazz musicians to escape the ravages of poverty. A safety net for artists exists in many European countries but this seems to be an unlikely solution in America. It is interesting to speculate where jazz may have gone if John Coltrane and Charlie Parker lived into their 80s rather than succumb to the ravages of liver disease in their 30s. If we assume an average life span of 75 years for an adult man, the jazz musicians depicted in Figure 1 have lost a combined 461 years of jazz productivity as a consequence of cirrhosis.

DISCLOSURE: All of the information in this report is from public documents and no private medical information has been presented.

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