BOOK REVIEW

Neurological Disorders of Famous Artists, Part 2
J. Bogousslavsky and M. G. Hennerici, editors
Karger, Basel
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240 pages, $112
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This text represents a sequel to an earlier book by the same title, and readers may also wish to study J. Bogousslavsky and F. Boller, eds., Neurological Disorders in Famous Artists, Vol. 19, Frontiers of Neurology and Neuroscience, ISBN 3-8055-7914-4, Karger, Basel, 2005. The editors of part 2 have assembled 14 chapters by 19 authors. The presentations are loosely connected and about equally divided into medical biographies of selected artists and descriptions of diseases such as a stroke and dementia, and their effect on creativity and style. The covered art forms are painting, music, moviemaking, and poetry. This reviewer counted 28 artists whose illnesses and work after organic brain disease received more than cursory attention. Most neurologists are familiar with left hemi-neglect and declining emotional expressivity after right hemispheric lesions. Nevertheless, right-sided lesions do not invariably reduce creativity in painters, and progressive recovery may bring about a change in style and the introduction of more vivid colors. The chapter dealing with 13 painters who had a right hemispheric stroke is clearly the strength of the book, and readers will especially enjoy the progressive post-stroke changes in the self-portraits by Otto Dix and Lovis Corinth. Left-sided strokes with aphasia do not always reduce creativity in painters but are devastating in poets (as described for Charles Baudelaire). Dementing illness clearly affects creativity and style of painters. Willem de Kooning’s work is often cited as an example of how Alzheimer disease changes an artist’s performance.

The book beautifully illustrates how the paintings by William Utermohlen changed in the course of the dementia. Some chapters do not deal with established neurological disorders but examine the available evidence in an effort to reconstruct the artist’s fatal illness. Marcel Proust had an intense interest in medicine and especially neurology but was not ill with a disease of the nervous system. The physicians of Heinrich Heine may have thought that the German poet had tabes dorsalis. He received antisyphilitic drugs that were customary in the middle of the 19th century, such as mercury and potassium iodide. The chapter is fascinating because it reflects the lack of knowledge about neurosyphilis and the widespread paranoia about its pathogenesis. It is difficult to understand why the author of this chapter about Heine elected to present a full-page illustration on the anatomy of coitus by Leonardo da Vinci, merely to highlight the prevailing thought of the day that frequent ejaculations deplete the spinal cord. Also, a full-page color illustration of syphilitic skin lesions in the face has limited value. Many have speculated about the cause of death of Wolfgang Amadeus Mozart who died at 35. His high creativity close to his death excludes a fatal neurological disease with cognitive impairment. Homicidal poisoning is often cited but there is very little evidence that Mozart had Tourette syndrome. His occasional off-color writings are clearly inadequate for a retrospective diagnosis of a movement disorder like Tourette syndrome. Neuropathologists may enjoy reading those portions of the text that deal with established organic diseases of the brain. The book is quite demanding because of complex style and emphasis on neuropsychological phenomena such as synesthesia and heutoscopy. References are abundant and will help readers who wish to study the disease of a specific artist in greater detail. The index is sparse. The cost of this thin volume is quite high.

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