

Full-Length Article

When the Composer Has PTSD: Examining the Life of George Lloyd (1919-1998)Jonathan Davidson¹¹Duke University, Durham, North Carolina, USA**Abstract**

Post-traumatic stress disorder (PTSD) can impair cognitive function, attention, memory, mood, initiative, human relationships and self-esteem. Music therapy has been used help to ameliorate some of these problems. Although there is literature on music and PTSD, there is scant information on the musician-composer with PTSD, the process of recovery, and the connections between composition, PTSD and neurocognitive function. Presented here is an account of George Lloyd, a highly regarded young English composer in the 1930s. Following severe trauma in World War II, Lloyd's ability to compose suffered greatly for many years. He took a professional detour into market gardening to recover his health and then subsequently rehabilitated his musical career. Lessons learned from Lloyd's life are described both in relation to approaches he used to achieve recovery from PTSD, and a more general question of composition's potential therapeutic effects in light of recent cognitive neuroscience will be considered.

Keywords: *George Lloyd, composer, PTSD, neuroscience*multilingual abstract | mmd.iammonline.com**Introduction**

Posttraumatic stress disorder (PTSD) is often long lasting, difficult to treat and represents a major public health concern. [1] With this in mind, the development and introduction of novel interventions for PTSD is paramount. Among these is music therapy [2] for which there is a venerable history. In 1919, Anderton employed music to treat Canadian war veterans, [3] and during World War II, the U.S. War Department promoted and disseminated music to over 276,000 service members. [4,5]

While the literature on music in relation to PTSD is growing, little is known about the composer – the creator of the music - who has been exposed to extreme trauma. Yet the topic is of interest, as such individuals are often prominent in their field and well-known public figures. Secondly, questions arise about the relationship between PTSD and musical composition, its effect on a composer's career, and even whether composition is possible. How can a composer overcome the disorder, can composition aid the recovery process and how can recent neuroscience be informative?

Exposure to combat in World War I adversely affected several famous composers, and even when the effects were positive, they were achieved at the cost of significant personal suffering. PTSD clearly emerged in one case, Arthur Bliss, for whom the recovery process took ten years and seemed in part to be dependent on finding the 'right' composition after trial and error. [6] Bliss wrote little about his inner state: just enough to make clear that he did indeed suffer from PTSD, which he overcame through composing. From World War II, there is a unique opportunity to look closely at the life of one composer who developed PTSD from combat. In the 1930s, George Lloyd was a rising star among 20th century British composers. [7] Unfortunately, his career was seriously derailed due to trauma in 1942 and the process of recovery, though successful, was lengthy and involved two decades in the musical wilderness. What follows is an account of Lloyd's recovery, achieved with the critical assistance and support of his wife. The article concludes with comments on the relationship between creativity (exemplified through music) and coping with PTSD in light of recent cognitive neuroscience.

The Early Life of George Lloyd

George Lloyd was born in St. Ives, Cornwall, in 1913. His parents were accomplished musicians and their home was a center for local chamber music. Lloyd began composing at the age of 9, took up serious study of composition at the age of fourteen, with further continuation at Trinity College, London. At the age of nineteen, Lloyd had completed his first symphony, and two more soon followed. His first opera, *Iernin*, was performed in 1934 and then enjoyed a successful

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run at London's Lyceum theatre. By the time of his mid-twenties, George Lloyd had become an established presence in contemporary British music. In 1937, he met Nancy Juvet (1913-2000) from Switzerland, and they were married within a few weeks.

Service in the Royal Marines

George joined the Royal Marines in 1941 as bandsman. The cruiser on which he was to serve, *HMS Trinidad*, was commissioned in October of that year and Lloyd was invited to write the ship's official march. His submission won out in competition with an offering by Ralph Vaughan Williams. In December *Trinidad* joined the Arctic Convoys. As with the other bandsmen (Figure 1), Lloyd's duties included keeping watch and obtaining information on ship speed, swell, wind speed, ship's course, enemy ship location. The data were then used to set turret coordinates for firing of guns and torpedoes. Lloyd performed much of this work in the Transmitting Station (TS) four decks below the waterline in very cramped quarters, and he described these duties as a combination of extreme boredom and extreme tension [8].



Figure 1. Bandies in barracks 1942– Lloyd on far right

Extreme Trauma at Sea

On March 29, 1942, in the region of Murmansk- the ship was attacked by enemy destroyers. *Trinidad* was set ablaze but was still able to fire her guns and torpedoes. Unfortunately, one torpedo malfunctioned, pursued a circular arc and blew a 60 x 20 foot hole in the *Trinidad*'s hull, rupturing its oil tanks and cutting off communication between the TS and the gun turrets. In semi-darkness, a cascade of oil began to engulf those who were in the TS, few of whom were able to escape through the hatch.

Lloyd remembered the scene vividly and described seeing his colleagues standing, as though paralyzed, with oil up to their groins. 17 of the 21 bandsmen died, as well as another 15

members of the crew. As the catastrophe unfolded, Lloyd was ordered to shut the hatch, being last to climb up the ladder to the galley, where he recalled passing out. Most probably, the strain of climbing the ladder against the force of the oil coming down, and while pushing another bandsman ahead of him, required extreme physical effort and may have caused physical injuries.

On April 2nd, Lloyd was transferred home to the Royal Naval Auxiliary Hospital at Kingseat, Scotland. In 10 weeks of hospitalization, he made little progress. Initially he was very disturbed, unable to walk, speak or see clearly; his limbs shook markedly, he displayed facial contortion, experienced blackouts and his writing was described by Nancy as childlike. Because of his grossly disturbed condition, George asked Nancy not to visit. However, she was undeterred and persisted in visiting. The doctors were pessimistic about any recovery taking-place and indicated their opinion that he may require indefinite hospitalization. Eventually Nancy concluded that her husband would be better off under her care and she persuaded the doctors to discharge him, which they did with the admonishment that he would never get well and the responsibility for his recovery rested entirely with her. He received a discharge diagnosis of *psychoneurosis*, and subsequently was granted a disability pension of 30%.

In the summer of 1942, George and Nancy found a home in Sussex, where Nancy began the daunting task of restoring her husband back to health, an undertaking that occupied them both for the rest of George's life.

Long-term Course of His Illness

Between 1942 and 1946, Lloyd was subject to sleeplessness, nightmares and panic. After that time, there was some improvement, although bad dreams occasionally resurfaced over the next 40 years and many years later Nancy warned George's nephew, Bill Lloyd, who was staying at his uncle's home, about nocturnal agitation. Guilt was a major problem, related to the fact of his survival and to the possibility in George's mind that he could have done more to help the men below. When he was lying exhausted and damaged on the deck above the TS, he heard a voice calling down from the deck above: 'Is there anyone below?' He was unable to speak, and had he been able to speak he would have told them about the men in the TS. Depression, impaired self-esteem, irritability and explosive volatility were intermittently present. The two latter problems at times interfered with relationships between George and colleagues in the musical establishment. Beyond these typical PTSD symptoms were behavioral manifestations such as trouble speaking and marked shaking over a six year period from 1942 to 1948; it was not until 1946 that George was able to undertake any serious composition, at which time his shaking had abated sufficiently for him to hold a pen, which at first he could only manage for brief periods [9]. It was at this time that he composed Symphonies #4 (in

1946) and #5 (in 1948), and orchestrated his *HMS Trinidad* march for performance by Ernest Ansermet and L'Orchestre de la Suisse-Romande in 1946. An opera, *John Socman*, was completed, but its unsuccessful production in 1952 left George dispirited and unable to pursue a public musical career for nineteen years. Symphony #4 was not performed for 35 years until its premier at the 1981 Cheltenham Festival.

Over time, the above symptoms and behaviors improved, subject to occasional recurrence. Although the involuntary shaking diminished, it never completely disappeared. In the 1970s, George experienced severe depression and almost quit composition. According to Bill Lloyd, the roots of this depression may have lain in serial rejections of his compositions after 5 years of trying to get concert performances and finding that all doors were closed, [10] (personal communication). Throughout the wilderness years Lloyd never gave up hope that his works would be performed, but after realizing the strength of resistance to his style, he came close to despair. The breakthrough came with the broadcast of Symphony No 8 in 1976, and the enthusiastic public response, which confirmed in his mind that his work had value, and that he was being deliberately excluded from the 'inner circle' of composers. Symptomatic of his depression in the mid 1970s was his burning of many early manuscripts, which Nancy was unable to stop. He would have burned Symphony No 3, but Nancy pointed out that if he did so he would have to renumber everything that came after it, so he relented and let it stand.

In 1987 Lloyd considered himself recovered, functional and able to take on new projects, such as learning about new digital recording techniques as he set up his own recording company. He was able to travel unaccompanied to the United States and Hong Kong on conducting and recording tours in the 1990s. To fully grasp the extent to which George recovered, the following comments from his nephew are revealing: "His recovery was extraordinary when one considers on the one hand the detail of what happened to him, and on the other hand the mental discipline and physical control required to compose and notate some truly enormous large-scale works for full orchestra, choir and soloists. His manuscripts would be an astonishing achievement for a strong person in good health, but for someone who had been through his devastating experience, they are so remarkable as to challenge my (conventional) understanding of both shell-shock and orchestral composition. It appears to me that there is something highly unusual about the scale of his recovery" [11].

Therapeutic Strategies

Nancy had always wanted to marry a composer and, in the 61 years of their marriage, dedicated herself wholeheartedly to George's recovery and the rebuilding of his career (Figure 2). Nancy possessed innate therapeutic skills that she used on

behalf of her husband in the following ways: (i) helping George deal with his initial PTSD symptoms in the early years after trauma, and thereafter (ii) boosting George's confidence, (iii) recognizing impending crises and taking preventive action, (iv) serving as gatekeeper to protect or guide George in dealing with the media and musical establishment. The manner in which Nancy and George accomplished these tasks will be described.



Figure 2. George and Nancy Lloyd, 1960s

Important to George was the daily use of affirming catechisms of an inspirational or devotional nature, albeit non-denominational in type: it could be said that there was a mantra-like quality to these activities. Catechisms or prayers were created to address specific problems, such as sleep, depression, paranoia, eye or muscle weakness and general affirmation. He would write down and repeat stock phrases that he and Nancy had devised, emphasizing the positive aspects of life, the inherently healthy nature of the world of

spirit, and the (optimistic) possibility that personal mental health could ultimately be attained. To achieve these aims, George made extensive use of imagery and a refusal to entertain any negative thought or outcome or to dwell on his illness. Of this, George's nephew said "I was always impressed by his ability to use his mind to control his emotions." Integral to this element in George's recovery was the work of Frederick Bailes, and his book "*Your Mind Can Heal You*", heavily annotated copies of which were owned by both George and Nancy [12]. Secondly, George engaged in vigorous daily exercise, the value of which had been instilled from his years of hard work as a market gardener (see below).

Third, Nancy encouraged and structured George's day so that he undertook as a matter of routine the following activities: composition, proof reading, attention to business matters, correspondence, afternoon rest and a highly controlled healthy diet.

Fourthly, George took various pills on a daily basis, including vitamin supplements, Bach flower remedies and gentian. It is notable that he never saw a GP in forty years, until his final illness when he developed heart failure.

In accomplishing all she did, the evidence suggests that Nancy was given help by her brother-in-law, George Estabrooks (1885-1973), a world-renowned Canadian-American expert on hypnosis, which he employed to treat shell-shock in World War 2, as well as in top secret work with the Central Intelligence Agency. Estabrooks offered to assist George in obtaining musical opportunities in the US, but there is no indication that he provided any direct therapeutic input, even though they met several times. Although Nancy seems not to have been a good hypnotic subject, Estabrooks is thought to have instructed her in techniques that she could pass on for George's benefit. These techniques helped him to relax, focus attention, preserve optimism and attain greater control of his thought content and emotions, and enabled George to banish involuntary recollections of trauma. Nancy supplemented these skills with a general broadening of knowledge in the areas of psychology and psychiatry.

The Course of Lloyd's Professional Life: 1945-1998

In 1953 the Lloyds returned from Switzerland and purchased a small cottage in Sherborne, Dorset, where they began a market gardening business, raising carnations and mushrooms. This involved exhausting work: the couple built large greenhouses on the property and the business eventually became a great success. The Lloyds sold the business in 1972 and moved to London. In George's mind, much of the secret of their success lay in his diligent use of the therapeutic practices described above, and when he was once asked if he regretted this phase of his life, he answered that it enabled him to regain his health, a process that took almost 25 years.

Although George was by then out of contact with the music world, throughout the market-garden period, he would rise by 5 am to compose for two hours, without much hope that his works would ever be performed. During this 19-year period, he completed three symphonies and three piano concerti.

The Best and Worst of Times: Musical Rehabilitation

In 1972, Lloyd moved to London and resumed full time musical activity, completing Symphony #7, which he had begun in Dorset but left incomplete while he composed Symphonies 8 and 9 [13] and then commenced a new work, Symphony #10.

Over the coming decade, George Lloyd encountered the best and the worst of reactions on the part of the music community. Partly because of his lingering PTSD, relationships could be difficult and he was not always his best advocate. His unfashionable compositional style was no longer considered attractive for broadcasting. He encountered numerous rejections of his symphonies from the BBC, often without comment. At times things looked bleak.

Of encouragement, however, was the interest taken by conductors Charles Groves and Edward Downes, who did much to promote Lloyd's music, as did the pianist John Ogdon, who cunningly arranged for the BBC to accept one of Lloyd's symphonies under the subterfuge of composer anonymity when he presented the manuscript to the BBC. Ogdon also commissioned and performed a piano concerto. In the late 1970s, Gavin Henderson, chief executive of the Philharmonia Orchestra, influenced the BBC to perform Symphony #8. In the United States, Lloyd accepted an invitation to become principal guest conductor of the Albany Symphony Orchestra. Lloyd's experience in Albany was positive and audiences greeted his performances enthusiastically. Further British and US exposure to Lloyd's work included a performance of Symphony #6 at the London Promenade Concert series in 1981 and release of three recordings by Lyrita Records. In 1988, Neeme Järvi conducted Symphony #8 with the Chicago Symphony Orchestra. Lloyd went on to compose many more works, including Symphonies 11, 12, a Symphonic Mass and Requiem. Besides orchestral output, Lloyd is known for brass band compositions of such a high standard that he was commissioned to write three test pieces for the National Brass Band Championships that have become part of the worldwide brass band repertoire.

Discussion: Understanding George Lloyd in the Light of Recent Science

Two questions arise: (i) in light of recent clinical science, is it reasonable to conclude that Lloyd's daily practices were in themselves inherently therapeutic or was progress attained as

the result of spontaneous improvement over time, which can occur with PTSD; (ii) can the composition of music be therapeutic for those suffering from PTSD?

Self-designed therapy:

In relation to the first question, Lloyd's mantra-like practices formed an important part of his daily activity. Many decades later, it was shown that Mantra Repetition (MR) cultivates mindfulness, promotes focus, calmness and relaxation and a randomized controlled clinical trial (RCT) in veterans with PTSD demonstrated superior benefit of MR and Usual Care (UC) to UC alone [14]. Bormann, Oman, Walter & Johnson [15] found that mindful attention is one mechanism for change from MR.

Exposure to trauma can result in attention being preferentially focused on threat or its avoidance, and a disregard of peripheral information [16]. One aim of treatment therefore is to promote greater personal control over attention and keep concerns with threat from being disproportionate. The strategies adopted by the Lloyds may well have led to greater control over George's involuntary recollections, emotions, physical symptoms, hyper arousal and better sleep. Other gains included the ability to put more distance between the trauma and the present moment, to cultivate a compassionate self, to re-frame maladaptive thoughts and improve attention. In this respect, the therapy program devised by the Lloyds achieved similar results to those of currently fashionable psychotherapies. Also not to be dismissed was the adamant self-discipline required for George to carry out these practices on a daily basis for almost fifty years. While it is reasonable to suppose that Lloyd's recovery made possible his return to composition, it is also conceivable that composition itself might in fact be therapeutic for those with PTSD. In a neuroscience review, Legge [17] has noted that of the four main categories of music therapy: receptive, re-creating, improvisational and compositional, it is composition that is least well understood scientifically.

Musical composition as therapy for PTSD:

Musical composition represents a process by which order is created out of chaos – something of clear importance to PTSD. Menuhin has opined that rhythm imposes unanimity on the divergent, melody imposes continuity over the disjointed and harmony imposes compatibility upon the incongruous [18]. Similarly emphasizing the idea of order, Bliss wrote that the composer must “bring something significant under recognizable control. He must stand as a master of order,” and that the act of composition is like “bending an intractable and springy piece of steel into the exact shape which you intend it to have. It will invariably tend to spring back...” [7].

In other words, a sustained determination to overcome resistance appears to be part of the composition process. Bliss

also comments that the impulse to create represents a state of heightened awareness that generates a sense of power (“higher voltage of living” as he calls it) in moments of creation. An activity that creates order from chaos and which can mobilize and direct emotional energy would seem intrinsically beneficial in PTSD.

Lloyd always recognized the vital role played by the unconscious mind in composition and he looked for clues that could lead him into the maze of the unconscious then guide him out again. In the words of Bill Lloyd [19], this process allowed George to “empty the well....clear his conscious mind of all musical ideas in order to allow a flow of new, clear, musical lines.” Storr [20] wrote that “Unconscious processes are just as much concerned with pattern and structure as they are with emotional expression.”

Levitin and Tirovalas [21] stated that composition can act as preparatory training for cognitive flexibility, and that rearranging elements of pitch and rhythm stimulate executive function and networks of attention, both of which are substantially impaired in PTSD. Zatorre and Salimpoor [22] note the importance of dopaminergic reward pathways in the mesolimbic and nucleus accumbens regions, and their links with frontal and auditory cortical loops in the human ability to enjoy and value music. Taking into account the aforementioned observations, could it be that composing itself can alter brain activity and produce psychological wellbeing in those suffering from PTSD?

Conclusion

Throughout his career, Lloyd employed a style that resembled late Romanticism: he favored tuneful music which audiences would find entertaining and, as he put it, “I write what I have to write”. Lloyd held true to his philosophy of music and to the compositional methods that were already evident in his first opera.

Due to the long-lasting effects of serious war trauma, and because his musical idiom was at variance with the prevailing trends of post-World War II, British music, Lloyd experienced many tough years in the musical wilderness. Continuing mild PTSD at times caused prickly relationships with those who could help him. He persevered with writing the kind of music to which was committed, and eventually re-established his reputation. The account describes how George Lloyd (Figure 3) overcame the most problematic aspects of his PTSD and the important role of his wife in this process. His story invites consideration about the relationship between composition and mental function in PTSD, and the potential value of investigating the neurobiology of musical composition and its effects on cognitive functioning.



Figure 3. George Lloyd in later life, 1991.

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