

Drumming with Dystonia: Part 2

By Paul Buyer

In 2017, I shared my story about task specific focal dystonia in a *Percussive Notes* article titled “Drumming with Dystonia.” I kept the condition (primarily) to myself because I feared for my job, my credibility, and my future in the profession. In *Percussive Notes* Senior Editor Rick Mattingly’s book, *Your Music Career is Not Over*, he notes that if musicians have suffered an injury, “they may feel there is a stigma attached that might cause other people to think their musical abilities are compromised.”

During this time, I immersed myself in the research, joined a support group, and found a teacher who successfully recovered from a worse case than mine. At first, my confidence and control of my technique declined to 40%. Today, with determination, patience, creative practicing, and support from others, I’ve managed to reach 80%.

I wanted to share my story so I could help people — to serve and give back, which is what PAS is all about. Perhaps other percussionists experienced similar symptoms and feelings and didn’t know what to do or where to turn. Perhaps they felt lost and discouraged when no one could provide an accurate diagnosis or treatment for what was happening to them. Perhaps they lost belief in their playing abilities and skills and were depressed, frustrated, and at their wits end, like I was.

This article includes a look back at my story as a college percussion professor with dystonia and offers new strategies that helped me continue to improve physically and mentally, including Steve Smith’s *Pathways of Motion*, Graded Motor Imagery, and adding value in other ways.

MY STORY

In early 2005, I was playing “Parcours en Duo” for vibraphone, timpani, and baritone saxophone by French composer Edith Lejet. My saxophone colleague and I had been rehearsing intently for weeks when one day, during rehearsal, I noticed something was wrong in my left hand while playing two-mallet vibraphone. My index finger kept coming off the mallet shaft involuntarily, breaking my fulcrum. It felt like my middle finger was forcing my index finger off the stick, as if there was no room for both. There was no pain, but certainly a lack of control and uneasy feeling.

Over the next few days, I continued to monitor my left hand. I started noticing my index finger also coming off when playing matched grip snare drum and timpani rolls, but interestingly, not four-mallet playing. I tried some creative measures like rubber banding my fingers to the stick, but nothing kept them there. I became concerned, and my playing started to suffer.

DIAGNOSIS

After several months searching for answers, I was diagnosed with *task specific focal dystonia* (TSFD), meaning my condition only occurred when playing percussion with two sticks or mallets in my hands.

According to the National Library of Medicine, “Dystonia is defined as a movement disorder characterized by sustained or intermittent muscle contractions causing abnormal, often repetitive, movements, postures, or both.” Dystonia UK states, “Sometimes the effects are quite subtle — but they often prevent playing to a professional standard. It usually affects the body part/area which performs the most complex movement patterns, so the part affected depends more upon the instrument played, rather than hand dominance.”

With practice pad and sticks in hand to show doctors, I visited a chiropractor who tried acupuncture and a TENS-unit, Emory University for Botox treatments, and a hand specialist who prescribed medication, all common treatments for TSFD to relax the muscles in my left hand and arm. Nothing worked. I decided to take some time off from practicing and thought getting away from it would do me some good, but in the end that had no effect. My only option, I felt, was to find another way to hold the stick.

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LEARNING TO COMPENSATE

After several weeks of experimenting, I discovered my fulcrum would stay intact only when I took the middle finger off the stick. My choices were to play with my fulcrum only or to play with a grip *without* the middle finger. While these options were not ideal and quickly led to fatigue in my hand and fingers, I managed to play at a respectable level.

Throughout the process, I kept thinking about the debate between traditional versus matched, Stevens grip versus Burton grip, and the fact that if there was a screen in front of me, no one would care. However, I was a *teacher* and had to lead by example. I had to demonstrate to my students what a professional percussionist looked like when holding two implements in my hands. I started to feel “imposter syndrome.”

FINDING A CURE

For over a decade, I accepted my dystonia and took comfort in the fact that it did not get worse. In 2015, I attended a dystonia support group, only to witness first-hand how devastating dystonia can be in people’s lives. My story of “not being able to play drums with matched grip” paled in comparison to the men and women sitting around the table who were wheelchair bound, struggled to move freely, and needed assistance with daily tasks.

Then in spring of 2016, I received an article from my former professor, Gary Cook, about a drummer in New York City named Shaun Lowecki, who had a case of TSFD that included tremors. According to Shaun in 2011:

I had lost all control of my right hand. I was panicked and didn’t understand why I couldn’t move the way I used to. I had intense involuntary spasming, which

worsened with frustration and anger. I experienced aggressive clenching and compulsively contemplated my fulcrum. I developed severe fear and anxiety and I began searching for an answer. I spent the better part of this year seeking out specialists to help find a solution. I saw a chiropractor, worked with an acupuncturist, visited an orthopedic doctor, had massage therapy, attended a physical therapy course...and nervously searched the internet for an explanation. Unfortunately, none of the specialists I saw had an answer for the spasming or loss of control.

I contacted Shaun and asked if we could schedule a virtual lesson, and he agreed. My goal was to retrain and relearn how I think when I play. I had to change my focus, let go of control, and trust that, deep down, I already knew how to play everything. Following that first lesson, Shaun sent me a link to an excellent YouTube documentary called *Focal Dystonia: Understanding and Treatment as an Emotional Condition*, by Joaquin Fabra. According to *Focal Dystonia: A Musician’s Resource*, “Fabra is a trombonist/euphoniumist who was struck with focal dystonia many years ago and managed to rehabilitate himself completely. Fabra believes that focal dystonia is a behavioral disorder and not a neurological one.” For over twenty years, Fabra has been treating musicians who have traveled from all over the world to see him in search of a full recovery.

Through Fabra’s instruction, I learned to “pay attention to the person I used to be when I enjoyed playing the instrument, not to fight against tension, to shift my focus on playing freely rather than on not playing badly, and to loosen mentally and physically.” Fabra says, “Take responsibility for your dystonia. In a bi-

zarre way, you chose to have it. You can also choose not to have it, by changing the way you think and emotionally feel about yourself.”

BEGINNER’S MINDSET

While working with Shaun once a month and practicing these strategies, I came across an excellent resource by Rob Knopper, Principal Percussionist of the Metropolitan Opera Orchestra, called, “How to Develop the Perfect Snare Drum Grip.” In it, Rob provides a video and five diagrams of the hand, showing exactly how he holds the sticks when playing loud singles, loud rolls, soft singles, soft doubles, and soft rolls. I started studying these diagrams carefully and tried modeling my grip after his, all with a beginner’s mindset. By learning to hold the sticks again from square one, I was retraining myself to play. What I continue to notice is that the physical change in my grip, in conjunction with the mental and emotional skills I learned from Shaun and Joaquin, have resulted in moderate improvement in my playing. According to Shaun:

Over the course of my rehabilitation, I learned many techniques to deal with the ups and downs of dystonia. I had to retrain the way I approached drumming on a physical, mental, and emotional level. In conjunction with my mentors, I discovered my own approach, which ultimately led me to a full recovery. There were times when I wanted to quit. There were times when I doubted I’d ever improve. There were times when I couldn’t handle the intense emotional roller coaster. But looking back on the struggle, I can say that I am grateful. I have become a stronger player because of dystonia and look at it as a positive experience.

MY ULTIMATE GOAL

Many professional musicians have been affected by “embouchure” or “hand” dystonia, including classical pianists Leon Fleischer, Glenn Gould, André Previn, and Gary Graffman; Chicago Symphony Orchestra members Dale Clevenger (horn) and Alex Klein (oboe); guitarist Billy McGlaughlin; and Tokyo String Quartet violinist Peter Oundjian, just to name a few. Despite playing different instruments, their stories are eerily similar, with dystonia failing to discern they were at the top of their game in the music world. After reading their stories, I immediately felt a shared bond with them. We are part of a club – a fraternity – who experienced confusion from the symptoms, shock from the diagnosis, and fear from not being able to play again – at least not at the level we want or need to play to do our job at the standard our audiences, students, and music deserve.

There are musicians such as Shaun Lowecki who have fully recovered from task specific focal dystonia. *Why not me?* My ultimate goal is to play better than I did before, and I firmly believe this is possible – with practice, trust, and the help and support of all those who stuck with me during this process.

MEDICAL BREAKTHROUGH

In the November 2018 issue of *Percussive Notes*, University of Toronto Percussion Professor Aiyun Huang published an interview with Eric Phinney, a founding member of the Ethos Percussion Quartet, about his journey with focal dystonia. An accomplished percussionist, orchestral timpanist, and tabla player, Eric’s symptoms began in 2009 when his right index finger started curling up after one week of a tabla-intensive workshop. To prepare for the workshop, Eric did an incredible “three *chillas* – intense sessions of continuous practice from morning to night for seven days – in a traditional way that all tabla players do at some point in their careers.”

Eric’s story is a familiar one – at least at first. His finger curled up only when play-

ing tabla, and it “really didn’t affect any other part of [his] percussion playing.” It was task specific. He never experienced pain. He took time off to rest. He taped his index finger to his middle finger to keep it straight. He tried acupuncture and saw a specialist who works with fascial massage therapy. Nothing worked. “Over the course of three summers,” Eric said, “I tried to regain control of my hand without success, so I had to make peace with the situation and move on with my life...I had basically given up on playing tabla ever again.”

In 2016, Eric was invited to participate in a “double-blind clinical trial [at the NYU Medical Center] studying the effects of using low doses of botulinum toxin treatments on only the very specific areas where muscle contractions are happening. The research aims to refine the doses, the amount injected, the specific location, and their impact on the muscle movements.” After two injections in the trial, Eric had regained 90% function, and in 2017 after his second post-trial injection, he was 100% symptom free.

As of this writing, Eric told me he has “basically been in the same place the last four years or so.” While his dystonia comes back mildly over time, he gets boosters every 18–24 months, which has allowed him to play tabla with the New York Philharmonic, Cleveland Orchestra, and St. Louis Symphony. Eric says, “The Botox treatment hasn’t been a cure, but the dystonia problem is totally manageable now.”

PATHWAYS OF MOTION

Though Eric’s success story is one I have considered looking into further for myself, I am at peace thus far with my efforts, progress, and how much time, energy, and mental bandwidth I can expend on my recovery.

Since first sharing my story in 2017, I have continued to search for anything that might help my confidence and control in my left-hand grip. Like my deep dive into Rob Knopper, I came across a 2018 article in *Percussive Notes* from drum

set legend Steve Smith called “Matched Grip Variations,” which is extracted from his book, *Pathways of Motion*. In his article and videos, Smith describes four different matched grips he uses in his drum set playing – each of which serves a different purpose and produces a different sound. I immediately found this fascinating and started to wonder if practicing with these grips could help my dystonia.

Grip 1: German grip with closed fulcrum



Grip 2: German grip with open fulcrum



Grip 3: French grip



Grip 4: Tony Williams grip (French grip with back finger fulcrum)



Playing with different grips reminded me of a strategy Shaun taught me when we first started working together. He asked me to set up a pair of concert snare sticks, drum set sticks, rutes, and brushes, and to practice basic exercises with each of them. I would start with 8's or a *Stick Control* exercise and rotate between sticks, rutes, and brushes, noticing my hands adapting to a different feel each time. I did this for several weeks until my grip felt more comfortable, regardless of what implement I was holding.

The title of Smith's book, *Pathways of Motion*, also struck a chord. Although not written with dystonia in mind, the book not only helped train the pathways of my hands, but also the pathways in my mind. As Smith says, "Examine the *pathways of motions* made by both hands and truly match each hand so they are symmetrical and evenly developed." By intently focusing on the pathways my hands and sticks were making with each of the four grips, my mind was occupied, and my control improved.

GRADED MOTOR IMAGERY

Graded Motor Imagery (GMI) is an innovative and science-based rehabilitation technique for training and retraining your brain used primarily to treat pain

and movement problems. According to the GMI website, "Graded motor imagery is broken down into three unique stages of treatment techniques, each exercising your brain in different ways." For TSFD, stage 3 of GMI called "Mirror Therapy" was recommended:

1. Set up two snare drums or pads and put a mirror in between them. With sticks in hand, put your right hand on the right drum and your left hand on the left drum.

2. Play any exercise with both hands at the same time (double stops/cloning) and watch your right hand in the mirror.

3. The mirror tricks your brain into thinking the hand you see in the mirror is the left hand, but it is actually the right hand.

4. Behind the mirror, your left hand clones the right hand by default, based on the connections formed by looking at the reflection in the mirror.



I credit my friend and University of Utah Percussion Professor Michael Sammons for recommending Mirror Therapy for my TSFD and for reminding me of the many benefits of "cloning" as a sound pedagogical approach to practicing.

CLOSING THOUGHTS

One final strategy that has helped me through the ups and downs of dystonia is to find other ways to contribute and add value. For me it was writing and speaking, and I am grateful to have written four books during this chapter in my life, and I am currently working on a fifth. My books led to professional speaking opportunities, presentations, and workshops across the country, podcast appearances, and serving as a Band Leadership Facilitator for the Janssen Sports Leadership Center. Because my dystonia was task specific, it had no effect on other ways I could express myself and make a difference.

Adversity makes us stronger, and while I wouldn't say dystonia was the best thing that ever happened to me, it did give me the time and perspective to think, reflect, and apply the habits and mindset I developed as a percussionist — and as a leader — to other creative pursuits. As Julie Fournier, Director of Player Development for Clemson Women's Basketball, said, "Great leaders wake up every morning hellbent on getting better. They crave learning, growing, and progress of any sort. Fight complacency, chase excellence; that's leadership."

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