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GROWING OLD GRACEFULLY WITH THE TRUMPET: A GUIDE FOR THE COMEBACK PLAYER

BY DONALD K. ROEDER

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GROWING OLD GRACEFULLY WITH THE TRUMPET: A GUIDE FOR THE COMEBACK PLAYER

BY DONALD K. ROEDER

The ITG Non-Professional/Comeback Player Committee, led by Dan Hallock, has requested that ITG members submit articles geared specifically toward this demographic. Proposed articles are vetted by The NPP Committee before publication, and

this article is the first to appear. The International Trumpet Guild is pleased to find new ways to serve its members and is grateful for the service of people like Dan and his committee.

I have been asked to discuss issues that I consider to be important to a non-professional / “comeback” trumpet player. In the past, I have served on this ITG committee that represents a significant and ever-growing segment of the trumpet-playing community. This article is based, in part, on that background, my presentation at the ITG conference in Harrisburg in 2009, and my experience in returning to play the trumpet forty-plus years ago. My hiatus of seventeen years was a result of training for my life’s work as a thoracic surgeon in medical school and serving for twelve years in the Medical Corps of the United States Navy.

When I returned to playing the trumpet, I found that there were many similarities to the practice of medicine, especially with regard to my specialty of surgery. Not only does learning both skill sets involve the apprentice system, but they also require one to learn a series of basic fundamentals, how to apply them in a systematic and precise fashion, and how to use them in such a way that the end result is not only a technical success, but an artistic triumph as well.

Additionally, and maybe in a larger sense, the making of music is also a bit of a resuscitative effort. We take dead notes written by someone else on a page and give them life by making music out of them.

General Health Issues

Health issues fall into two broad categories: general conditioning issues and issues related to the aging process. There is a great deal of crossover between these two categories. In the former are factors that are, to some degree, controllable and in the latter, factors that tend to occur despite our best efforts to avoid them.

Playing the trumpet—or, for that matter, playing any wind instrument—is a very physical form of exercise, requiring personal attention to overall well-being and optimal conditioning. It involves more than simple muscular training of the face and core. While good physical conditioning is relative to one’s needs and expectations, it is important that one be involved in a structured program of both aerobic and strength training. Personally, I try to work out at a local health club at least three times per week.

At the top of this list should be attention to the respiratory system and breathing. Never forget that the muscles that control our breathing need to be kept in shape as well other muscles. This includes all those muscles that make up what is commonly called “the core”—or what many of us call “the diaphragm.” Learn to fill the lungs with air, and learn how to use that air most efficiently and effectively. The term “diaphragm,” when applied to playing the trumpet, is a misnomer. While the diaphragm does contain some muscle, it is fairly weak and inconsequential. It is really the abdominal musculature that controls our ability to regulate and use the air we inhale.

Learn how to get air in quickly and out slowly in a well-regulated fashion. The human body is built to do the opposite, inhaling being an active process, and exhaling more of a passive one. As brass players, we do the opposite, making inhaling an almost passive maneuver, while making

exhaling a prolonged and very active process involving much muscular activity. When doing this, we significantly increase both intra-pulmonary and intra-thoracic pressure, because we are exhaling against an area of partial obstruction to airflow, the mouthpiece throat. This leads to a number of potential difficulties.

Particularly as we get older, yearly checkups, including chest x-rays, EKGs, etc., are extremely important. One’s heart and lungs are at the forefront of one’s ability to play the instrument. Be sure that they are in optimal condition!

If you smoke, *stop!* If you don’t smoke, don’t start! While this should be “enough said,” I should add that smoking is more than just a very personal type of air pollution; it carries with it major risks of lung malignancies and emphysema, among other pulmonary problems. It is also a major cause of tongue,

mouth, and throat cancers, especially among pipe and cigar smokers and those who use “smokeless” tobacco products.

Playing the trumpet is one of the most un-physiologic challenges to which the human body can be subjected. We trumpet players exhale

forcibly through a very small aperture (the mouthpiece throat). This is sometimes called a “partial Valsalva maneuver.” This set of circumstances subjects our cardiovascular and respiratory

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systems to elevated intra-thoracic and intra-pulmonary pressures that are potentially dangerous. They may cause all manner of difficulties that include, among others, the potential for collapse of a lung (known as “pneumothorax”) and the potential for decreased venous return to the right side of the heart, resulting in a temporary decrease in cardiac output. This latter difficulty is the reason that trumpet players occasionally experience light-headedness when playing and why some have even experienced loss of consciousness while doing so. To some extent, we learn (without even thinking about it) by practicing how to avoid this. Occasionally, though, it still happens. Staying in optimal physical condition can help us avoid this problem to some extent.

Although most instances of lung collapse are purely spontaneous and not caused by any outside influence, I have personally seen at least two individuals who have experienced a collapsed lung while playing the instrument, and I have heard from several ITG members of other cases as well. The treatment of this problem is a bit outside the scope of this presentation.

It is very important to find a good dentist with whom you can work (and who is willing to work with you) to maintain a stable platform that can stand up to the rigors of playing. Dentures are almost the kiss of death for trumpet players. Yes, you may be able to play with dentures, but if you can save what you were born with, you will be much better off in the long run.

As I approach my eightieth year on this planet, I have come to find that all those lessons I learned in medical school about aging really are true. The saddest fact of all is that I have been no smarter in avoiding many of these issues than anyone else. Someone once told me about forty years ago, “If I had known that I was going to last this long, I would surely have taken better care of myself along the way!” To put that another way, as my Pennsylvania Dutch forebears long ago noted, “We grow too soon old—and too late smart!”

Above all else, strength, flexibility, and a sense of well-being are things to be cherished. As we age, we all lose strength in some muscle groups, particularly in the quadriceps muscles (known to many of us as our “quads”) in our legs, which significantly affect standing and rising from a seated or kneeling position and have a role in walking, running, jogging, and standing for long periods. A graded exercise program can, to some extent, aid in this difficulty. As with any exercise program, however, some degree of supervision should be in place when beginning a new regimen. Daily walking is a low-impact activity and is one of the best forms of exercise. It is also an activity that—barring problems such as hip, back, and arterial vascular issues—can easily be done by most of us on a regular basis.

One of the major aging issues for us as wind instrument players relates to what is called “compliance” problems in the chest. I have already alluded to the fact that, as trumpet players, by vigorously exhaling against an obstruction (the mouthpiece throat), we do things that our bodies were not intended to do. In the simplest terms, the word “compliance” in this context refers to a measure of the lung’s ability to take in air (inhale) and blow it out (exhale). The assumption for us is that we must inhale that air quickly and exhale it both slowly and in a very controlled fashion. Those issues that limit the ability to inhale are referred to as causing low compliance and those that

limit the ability to exhale as producing high compliance. That may confuse some—and, in a way, it has always seemed somewhat curiously backward to me—but that is the way it is.

There are potential problems on either side of this equation. Low compliance results from two main factors: first, fibrosis of the lungs, which limits the ability to inhale because of increased stiffness of the lung tissue itself; and second, loss of flexibility in the chest wall. High compliance is what is seen in emphysema and asthma, where air can be easily inhaled, but either temporary or permanent constriction or spasm of smaller airways greatly limits the ability to exhale it. Thus, in the simplest terms, there are three factors at work here: chest wall issues; lung stiffness issues (each of which limit our ability to inhale, both deeply and quickly); and emphysema (also known by the acronym COPD, Chronic Obstructive Pulmonary Disease), which limits one’s ability to exhale.

It should come as no shock that, over time, we lose the flexibility we once took for granted when we were younger. For instance, we know that as we age it is not as easy as it once was to bend down and touch our toes. If you are similar in age to me, you may have noticed that it is no longer as easy to bend down, put on your socks, and tie your shoes in the morning. Many have developed some arthritic changes in the hands, causing a loss of dexterity. Our chest wall (rib cage) also becomes less flexible. Our costal (rib) cartilages become calcified and less able to allow for as much expansion of the chest cavity as in our younger days. Maybe, more importantly, we develop decreased “compliance” because of fibrotic changes, which cause our lungs to become “stiffer” and make us less likely to be able to maintain the breath control we all used to take for granted. Most of these issues are not associated with any disease process; they are simply the result of natural loss of elastic tissue through aging.

Individuals with emphysema/COPD—in some areas, it is called simply “chronic bronchitis”—on the other hand, have little or no difficulty inhaling. However, they have great difficulty exhaling. If anyone wants to have some idea of the problems emphysema patients face, they need only to inhale a full breath, exhale only a part of it, and then try to breathe that way for a few moments. It will not take long for most of us to recognize the problem. The major issue in emphysema is what is generally referred to as “air trapping.” This can and does lead to a number of physiological and biochemical problems.

For any who would like to look into this more fully, I would suggest starting with a basic Internet search on “Pulmonary Compliance.” One might also benefit from an in-depth reading of the book about Arnold Jacobs, entitled *Song and Wind*.

Over the years, I have talked with several ITG members who have mentioned that they have begun to develop problems related to phrasing because of each of these issues. I, too, have come to note the problem of decreasing compliance.

Of these issues, emphysema is the one that is, at least in part, preventable and may be, in part, treatable—though not curable. The others are, for the most part, a natural result of the aging process, and short of trying to regain some degree of chest wall flexibility with various exercise regimens, it is probably best to try to learn to live with and cope with them. In the case of emphysema, I should add again that some of the things I have mentioned previously may slow its development,

“We grow too soon old—
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particularly smoking factors and avoidance of pollution of the air we breathe.

I believe it was Don Jacoby, whom I met some years ago at the ITG conference at LSU and who was troubled by emphysema, who quite candidly made the following observation to me, "I've learned to cheat a lot!" As I've gotten older I've thought quite a bit about that bit of very practical wisdom.

Technical Issues

Practice routines: There are all manner of practice routines. What works for one may very well not work for another. Possibly the best advice I have heard and learned over the years is, "Don't think that playing what you already know and are capable of playing is helping you." A corollary to this is that playing in a band rehearsal (or other similar activities) is not the same as practicing and growing with the instrument. You must always be willing to challenge yourself! If you do not do that, it is highly unlikely that anyone else will either.

Practice time: I have heard it said that practice time should be divided between warmup, technique maintenance, etudes, and repertoire. I believe this is true, and I also believe that there is a great difference between simply playing the instrument and practicing the instrument. Practice should be done not for hours, but for results. It is perfectly reasonable to practice in fifteen- or twenty-minute intervals, spaced throughout the day. In fact, I have often heard this recommended by some very distinguished teachers.

Don't forget about scales! Are they boring to play? I once thought so, but I have long since come to realize that they are a challenging and very necessary part of both learning and maintaining technique. I have learned that, at least for me, it seems more important to play them while looking at the notes on paper, not from memory, because I think that visualizing each note played while listening to it is important. I once heard the late, great Jimmy Burke ask the question, "If you can't play scales, please tell me, just what can you play?" He was right!

My routine consists of the following, but just as with questions about equipment, "one size does not fit all." This routine is simply what I have found to work for me. You may find that something else entirely works better for you. Always remember that you will never finish learning how to play this instrument.

Warmup: In March 2014, I presented this material at the National Trumpet Competition. Prior to giving my talk at NTC, I decided to attend a warm-up session. I was introduced to leadpipe buzzing, which I have found to be very helpful in a number of ways. It has not changed much else of what I do during my full practice routine, but it seems to have speeded up my ability to feel comfortable playing the instrument, particularly when I have overplayed the day before and my embouchure feels stiff and sore. I set the mouthpiece on my lip and blow through the instrument without producing sound. I then remove the tuning slide and blow through the mouthpiece and lead pipe, letting the

embouchure produce buzzing very gently and with little or no pressure. In reality, the lowest note that can be securely produced with a full, resonant sound on the leadpipe of a B-flat trumpet is concert E-flat or E, depending on the precise length of the leadpipe. I repeat this exercise several times briefly and then play several 20- to 25-second long tones without articulating the initiation of the sound. I then follow with single tongued notes, gradually speeding up the articulations and increasing the number of them. At that point, I slur to and play some long tones in the upper octave. Following this, I replace the tuning slide and go about whatever I am going to do for that day, whether it be my practice routine, a rehearsal,

or whatever. I have become quite comfortable with this and have found, much to my surprise, that I seem to be ready to play almost anything much more quickly and with much better tone quality than before. I am quite sure that many of you have discovered

this long ago and are probably wondering what took me so long to find out about it for myself!

If I am going to proceed with my usual practice routine, I follow that with long tones, mouthpiece buzzing, and a modification of some of the James Stamp exercises, including pedal tones, that I play on trumpet—not mouthpiece alone. Dr. Richard Burkart suggested this to me at one very brief lesson I had with him, and I have found it most helpful. I then do some of the Arban slurring and articulation studies. It seems to me that if the articulation studies were important enough for Rafael Méndez to record for posterity, I should pay attention and work on them. My preference is to do all of the 2/4 studies (#19 through 27), and four or more of the 6/8 exercises (usually #28, 29, 31, and 32). Unfortunately, I did not rediscover the importance of these until I was about sixty years old and found out about the Méndez recordings. I also

play through some lip slurs before or after the articulation studies.

Technique maintenance: I generally use the Arban method or the Ernest Williams treatise *The Secret of*

Technique Preservation (mostly the former) for technique maintenance. There are many other method books available as well, including Saint-Jacome. However, the Arban method is what I use most frequently. I play major and minor scales in keys chosen at random for the day's routine. I then play chromatic scales, grupetto exercises, intervals, and arpeggios using that same key. I then follow that with multiple tonguing exercises from the Williams treatise noted above. As I have grown older, it has become quite apparent that double- and triple-tonguing are techniques that are lost rather quickly if not practiced.

Etudes: I generally use the Arban *Characteristic Studies*, the Charlier *Transcendental Etudes*, or the Tyrell and Hovey etude book (recently republished by Boosey and Hawkes). No matter how many times I play through any of the Charlier etudes, it

always seems like the first time I've looked at them! And I believe that they are as much an exercise in mathematics as they are in making music. I also try to work in some lyrical

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"If you can't play scales, please tell me, just what can you play?"

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etudes, such as those by Phil Snedecor, which force me to think about phrasing.

Repertoire: After all of that, I work on repertoire if I have the time, endurance, and need to do so. In dealing with the few students I have been privileged to teach, it somehow seems better to try to teach them basics than to teach them how to play tunes and/or repertoire. I have tried to carry that over into my practice routine as well. I do not know how others feel about this, but it seems to me that it is better to get students to the point at which they can play anything, rather than just one thing.

Returning to playing after a long layoff can be a major source of frustration, and overcoming that requires considerable patience and attitude adjustment. The problem lies in facing the memory of skills that were once present, but that are now long gone; it takes time to regain those lost skills. In my humble opinion, it is best to start back at “square one,” slowly progressing over time and not rushing things to regain those lost skills. I have found this extremely humbling and frustrating. Patience is the key—something not always easy for “Type A” individuals, which I believe many trumpet players are.

Find a teacher, or at least someone to help guide you, who will listen to your playing and offer honest advice. Although a professional trumpet teacher might be best, a voice teacher or a teacher of another wind instrument can be of great help as well. In my case, when I came back to the trumpet, there was no teacher locally whom I could find to help me. I was fortunate to find a very talented high school student to help me with several issues I had noted. It turned out that the student I chose ended up as a student of Gerard Schwarz at Juilliard and is now a professional musician. Not everyone is so fortunate.

Musicianship

Listen to other trumpet players. Decide who is worth emulating, and imitate them. In my youth, my trumpet/cornet heroes were Jimmy Burke, Harry James, Louis Armstrong, Maynard Ferguson, and several others. During my college years, I added Rafael Méndez, Roger Voisin, and Leonard B. Smith to that list. Later, I added Bud Herseth, Timofei Dokshizer, and, of course, Maurice André, along with Wynton Marsalis, Sean Jones, and Jon Faddis. The list grows on a regular basis.

Long ago, my teacher told me that I should listen to all kinds of music and all kinds of musicians. He also told me that I would come into contact with two broad types of other trumpet players—those who did not play as well as I did and those who were better players than I was—and he beseeched me to learn from both. However, more importantly, he said I should always be willing to help those who were struggling to improve if they so desired. He also mentioned that I should

seek the counsel of those who were better than I, to see if they might be willing to impart some of what they had learned along the way in order to improve my own skills. This was good advice nearly 65 years ago and is just as good today.

Listen to all genres of music—especially other brass instrumentalists and vocalists! We brass players share with vocalists one very important similarity; we are the only musicians who use our own living tissue to produce sound and make music. And yes, there is a difference between producing sound and making music. Some years ago at the ITG conference at SUNY Purchase, Bud Herseth was asked how he taught students how to phrase. His answer? “I tell them to purchase every Frank Sinatra recording they can find and listen to them—and learn.” It is by critically listening to others and applying the lessons learned to our own playing that we, in turn, learn the most about musicianship.

As I noted earlier, I put away my cornet for about seventeen years when I graduated from college and went to medical school. At the time, I assumed that would be forever. During that period of time, however, I listened to a lot of music, both live and recorded. When I returned to playing, I was able to overcome my frustration and return to an acceptable level of technical ability with time and effort. However, I was surprised to find that I was a much better musician—not a better technician, but a better musician—because of the listening I had done.

Experience

Find opportunities to perform in public both as a solo performer and with ensembles. I cannot stress this enough! I frequently hear the comment, “But there are no opportunities for me to perform.” Many communities have municipal bands that are looking for members. Search out groups of this sort and join them. Once in groups of this sort, it is often possible to develop smaller ensembles, such as brass quintets, to play together and grow musically. Check with local veterans groups (VFW, American Legion, AMVETS, etc.) or with your county Veterans Affairs Office to see if they have an Honor Guard that might be looking for a live bugler to play *Taps* for military funerals. Make yourself available to local churches that may have a need for trumpet soloists for weddings and funerals or for soloists or brass groups to play for festival services such as Easter, Pentecost, and Christmas. Some churches still have orchestras that play on occasion. Check with local schools and colleges to see if they have any musical groups looking for members.

Though they may not be initially apparent, the possibilities truly are limitless. I am quite sure that there are also many other ways to gain playing experience in addition to these.

If you have not already done so, join the International Trumpet Guild and, by all means, go to one of the ITG con-

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ferences. You will be amazed at how many other like-minded people you'll find there!

I recently spent six weeks in a Florida community called The Villages, a community populated by senior citizens—and very vital senior citizens at that. While there, I had the occasion to sit in with two bands and a trumpet ensemble. What a joy that was! In these groups were several hundred people—most who had stopped making music many years ago, but who have, so to speak, returned to their musical roots. They are enjoying themselves immensely and making good music while doing so. They are interacting with their neighbors on an entirely new level, and they are creating something of lasting benefit for both themselves and their listeners by performing. They also supplied me with some of the thoughts I have expressed here. I had the opportunity to listen to other groups as well, including a Dixieland ensemble and a big band.

It does not matter what style of music in which you involve yourself; the important thing is to do so to the best of your abilities and to do it with an ensemble, not just as an individual player.

Equipment

Of all the topics I have mentioned, equipment is by far the most overrated and the least important! Just as with practice routines, one size definitely does not fit all. If it were true that there were one secret instrument, bore size, or mouthpiece configuration that held the key to making beautiful and perfectly played music effortlessly, there would be only one instrument manufacturer and only one maker of mouthpieces. We all know, however, that that is not the case. I have heard some very beautiful music made by people playing student-model trumpets, and some bad stuff played by the owners of superb professional-model instruments. Choose what works for you, not what works for someone else!

Additional Thoughts and Bits of Advice

Always strive to produce the very best sound you can. “Make each and every note you play a symphony of sound!” I have forgotten who it was who first expressed this to me, but I am sure that it has been mentioned at one of the many ITG conferences I have attended over the past 35 years. However, I consider it to be a very profound bit of advice that I do my best to heed.

Find and purchase a copy of the Arnold Jacobs book entitled *Song and Wind*. Read it and keep it so you can re-read it every so often. I know of no finer or more accurate way to learn about practical respiratory physiology, particularly as it relates to playing a wind instrument. It is the result of Mr. Jacobs's lifelong obsession with learning about breathing as it relates to playing wind instruments. At one of the International Brass Congress sessions long ago, I was introduced to Mr. Jacobs and had the opportunity to spend about an hour discussing this subject with him. I know of no individual who knew more

about practical respiratory physiology than Arnold Jacobs—including my mentors in medical school, in residency training, and throughout thirty-plus years of thoracic surgical practice.

David Hickman's scholarly treatise *Trumpet Pedagogy* is also a worthwhile addition to one's library. It contains a wealth of very practical information and tips to aid in both practice and performance, as does all of the written material which most of us—myself included, I'm sorry to add—seem to skip while playing the exercises, characteristic studies, and solo works in the Arban method book!

Finally—and maybe most importantly—along with listening to others, learn to listen to yourself and to your own playing! I have found playing in a brass quintet to be more valuable than anything else in learning to listen to myself. It forces me to listen in the context of a small group in which one must play alone on a part. Be your own best teacher, be your own best critic, and be your own best listener. Always do so honestly! Try never to let a mistake go uncorrected. No matter what or where you are playing, play for yourself as if you are your own best audience and, by all means, play as you would like to hear the instrument played by someone else if you were listening to a performance in a concert hall, church, jazz venue, or wherever you might be.

All of that will help you gain needed confidence in your own ability, which is, to my mind, the very best hedge against stage fright and a number of other calamities that can adversely affect our playing and performing.

I have found great similarity between learning to play the trumpet and learning about medicine and especially about surgery. If you want to play an instrument about which you can learn and know everything, it is definitely not the trumpet. In the case of a career, it is also not medicine and certainly not surgery. Be prepared for a lifetime of learning—new music, new techniques, and all manner of new things—and never think for one instant that that will ever change. Every day is a new challenge!

About the author: Donald K. Roeder, MD, FACS, is a retired thoracic and vascular surgeon from Carlisle, Pennsylvania. He began the study of the trumpet in New Jersey at the age of nine at the Union County Band and Orchestra School in 1945. In 1947, he became a student of Forrest A. Bartlett. He ceased playing following his graduation from Franklin and Marshall College in 1957, believing at that time that he would never play the trumpet again. He is a graduate of the Jefferson Medical College and completed residencies in both general and thoracic surgery at the Bethesda Naval Hospital. He is a diplomate of the American Board of Surgery and the American Board of Thoracic Surgery. After moving to Carlisle in 1974, he became a “comeback player” and has continued to work at it ever since. He currently serves as cornet soloist for the Carlisle Town Band, sounds *Taps* on a regular basis for military funerals and commemorative ceremonies with the Cumberland County Honor Guard, and performs in various churches as a soloist and with brass ensembles.



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