

**PRESIDENTIAL HEALTH SECRETS:  
RECLAIMING HISTORY'S MEDICAL UNKNOWNNS**

**by**

**Joyce E. Latham**

**A thesis**

**Presented to the faculty of**

**Towson University**

**in partial fulfillment**

**of the requirements for the degree**

**Master of Arts in Humanities**

**Towson University**

**Towson, Maryland 21252**

**December 2016**


© 2016 by Joyce E. Latham  
All Rights Reserved

ORIGINAL

to: Robin W.  
TU - OGS


TOWSON UNIVERSITY  
OFFICE OF GRADUATE STUDIES  
THESIS APPROVAL PAGE

This is to certify that the thesis prepared by Joyce H. Latham, entitled "Presidential Health Secrets: Reclaiming History's Medical Unknowns," has been approved by the thesis committee as satisfactorily completing the thesis requirements for the degree Master of Arts.

	<u>Marlana Porolano</u>	<u>11/17/16</u>
Chairperson, Thesis Committee Signature	Type Name	Date

	<u>Karl Larow</u>	<u>11/17/16</u>
Committee Member Signature	Type Name	Date

	<u>Allaire Stallsmith</u>	<u>11/17/2016</u>
Committee Member Signature	Type Name	Date

	<u>Paul Miers</u>	<u>11/17/2016</u>
Committee Member Signature	Type Name	Date

	<u>Janet DeLany</u>	<u>11/17/2016</u>
Dean of Graduate Studies	Janet DeLany	Date

## Acknowledgments

Parts of this document appeared in the *Journal of Historical Studies*, Spring 2014, vol. 11, pp. 7-31, published by Towson University's honorary history society (Theta Beta Chapter, Phi Theta Alpha). That article "White House Health Secrets: How Historians View the Hidden Maladies of FDR and JFK," by Joyce Latham, focused only on those two presidents.

## Personal Acknowledgments

Many thanks to Thesis Committee members for reviews, contributions, and/or oversight: Dr. Marlana Portolano, Committee Chair; Dr. Karl Larew, Dr. Allaire Stallsmith, and Dr. Paul Miers, all of Towson University, and to Mr. Max Rose for help with fact checking. Special thanks to Dr. Portolano for giving her sabbatical time to coordinating this effort.

Abstract  
Presidential Health Secrets: Reclaiming History's Medical Unknowns

Joyce E. Latham

This thesis analyzes the role of illness in the administrations of three twentieth-century presidents—Woodrow Wilson, Franklin D. Roosevelt (FDR), and John F. Kennedy (JFK)—who had serious health problems unknown to the mass media and the public in their respective eras. Some of that hidden information has been uncovered by historians and others. Wilson, for example, had a devastating stroke in October 1919, after which his wife and physician hid him in the White House, with the former functioning as an unofficial acting or co-president for many months. FDR hid the long-term effects of his polio and, in the last part of his life, a number of major illnesses were not acknowledged during his campaign for an unprecedented fourth term in 1944. JFK was ill most of his life with various maladies. He denied nearly all of them and projected false vigor in the early 1960s, as FDR had done. These three represent very different paradigms of illness but, in each case, the public was misled by various means and historians could not write full and accurate accounts of their presidencies. This paper considers whether historians now have a more comprehensive picture of these secret actions and any harm they may have done to the nation. Developments in three areas influence the analysis: changes over the century in historiography itself; in society's medical mores, which moved away from restricted communication on health matters; and in media practices, which were altered in part by the growing presence of female journalists, starting in the 1970s. As conventions changed in all these areas, so too did historians' perceptions of the presidency.

Contents:

Chapter 1: Introduction and Background	1
Chapter 2: Presidential Precedents in Secrecy	12
Chapter 3: Woodrow Wilson: The Long Deception	17
Chapter 4: Franklin D. Roosevelt: A Twofold Cover-Up	40
Chapter 5: John F. Kennedy: Prisoner of Illness	64
Chapter 6: Summing Up	92
Bibliography (annotated)	98
<i>Curriculum Vitae</i>	113

## Figures

Figure 1. <i>Children with polio in iron lungs, 1950s</i>	61
Figure 2. <i>Rare photo of FDR in a wheelchair</i>	62
Figure 3. <i>FDR before his death in April 1945</i>	63
Figure 4. <i>Jackie and John F. Kennedy campaigning, 1960</i>	91

## Chapter 1

### Introduction and Background

This descriptive and comparative historical study focuses on three modern U.S. presidents: Woodrow Wilson, Franklin D. Roosevelt (FDR), and John F. Kennedy (JFK)<sup>1</sup> and what scholars have said about their hidden health issues. These three offer especially good examples of promoting certain rhetorical standards and practices, in which an inaccurate image of presidential health, capability, and competence was carefully crafted by White House occupants and their staffs. The paper explores and assesses their concealed physical<sup>2</sup> maladies while in the White House,<sup>3</sup> as well as the falsehoods and deceptions employed for them to gain access to their high position and to maintain their secrets. These three cases represent very different paradigms of illness but, in each situation, the American public was misled or not informed about the commander-in-chief's ability to lead effectively. Moreover, historians, biographers, journalists, and others were not

---

<sup>1</sup> Physician Kenneth Crispell and coauthor Carlos Gomez wrote about these three in their 1988 book from Duke University Press: *Hidden Illness in the White House*.

<sup>2</sup> See "Caveat" on mental health issues at end of this chapter. For valuable insights on politicians and their physical/mental health, see especially the research of political scientist Robert Gilbert, including his contributions to the Special Issue (vol. 33, no. 2, Fall 2014) of *Politics and the Life Sciences*. It features papers from an April 2014 conference, organized by Gilbert, on presidential disability and succession.

<sup>3</sup> This topic has long fascinated historians and other scholars. Since the 1990s, more physicians have been writing about the issue, sometimes with historians as coauthors. The arts/entertainment sphere has dealt with presidential health in such productions "Sunrise at Campobello," a 1958 play and feature film on FDR and his polio; "Warm Springs," a 2005 FDR drama on HBO; the 1993 film "Dave," about a president disabled by a secret stroke; and an episode on the president's multiple sclerosis in the NBC-TV series "West Wing" (1999-2006).



able to write full and accurate accounts on these presidencies until many years later, after information was released, found, or revealed through legal, medical, and journalistic routes as well as scholarly research.

Whether these secret actions harmed the nation is also discussed here, as are significant changes over the century in society's medical mores (away from limited communication on health matters) and media practices (altered in part through a growing representation of female journalists by the 1970s). Also raised in this paper is the question of whether some presidential health secrets were acceptable, given the circumstances in which they occurred.

In keeping these matters away from public attention, presidents were often abetted by the news media of their times. Many journalists in the print press, radio, movie house newsreels, and emerging television, along with photographers, had some knowledge about the private lives of public figures, especially those they wrote about regularly.<sup>4</sup> However, for a number of reasons—including the potential career damage of incurring Oval Office displeasure—media people often chose not to write about or visually depict what they observed. It should be acknowledged, however, that photographers who *did* try to snap revealing photos of President Franklin Roosevelt in a wheelchair were quickly deterred by an aggressive Secret Service detail. These federal bodyguards were even known to damage or destroy film and other photographic equipment.<sup>5</sup>

---

<sup>4</sup> The White House Correspondents Association (WHCA) was established in 1914, but its origins go back to the 1890s. Woodrow Wilson did not like press conferences and stopped doing them in his first term. Successor Warren G. Harding revived the custom in 1921. See WHCA website, "The Early Years (1914-1921)" at: [www.whca.net/history.htm](http://www.whca.net/history.htm)

<sup>5</sup> As described in Matthew Pressman. "How the Press Handled FDR's Disability and How FDR Handled the Press." *Journal of the Historical Society*, vol. 13, no.3, Sept. 2013, pp. 325ff.

There were also unwritten codes on what the press should cover. Until the 1970s, its representatives were mostly Caucasian males; their collective view held that the medical conditions and sexual behaviors of major officeholders (also white males) were private matters, not news. This practice is often referred to as that of an unspoken “good-old-boy network” or “gentlemen’s agreement.”<sup>6</sup> Note that a similar protective attitude exists today in the limited attention from journalists to children growing up in the White House.

Among 35,000 still photos at Roosevelt’s Presidential Library and Museum in Hyde Park, New York,<sup>7</sup> only two or three are easily identifiable representations of him in a wheelchair.<sup>8</sup> He was almost never clearly shown chair-bound in moving images, either, especially in movie house newsreels,<sup>9</sup> which his Oval Office actively oversaw. True, one of the statues at his outdoor national memorial—in Washington, DC, erected in 1997—shows him in an old-fashioned armless wheelchair, much like the one he designed for himself from an ordinary kitchen chair. However, the decision to include that sculpture

---

<sup>6</sup> For more on these and other practices, see media professor David Greenberg, *Republic of Spin*. W.W. Norton, 2016, and other experts in this area—flagged in the bibliography as (M).

<sup>7</sup> This facility at the former Roosevelt home has many artifacts reflecting FDR’s longtime penchant for collecting stamps, art, and other historica. Established by FDR himself, this was the first of thirteen such libraries at this writing. A history lover, Roosevelt was mindful of what had happened to the papers of his predecessors: Many were destroyed, sold to private collectors, damaged, or otherwise lost to history.

<sup>8</sup> According to Jerrold Post, M.D., and political scientist Robert S. Robins. *When Illness Strikes the Leader: The Dilemma of the Captive King*. Yale University Press, 1995 paperback, p. 25. It is possible that other such pictures were extant but purposely not included in this official collection. However, most scholars agree with Post and Robins on this matter.

<sup>9</sup> Communications expert Betty Houchin Winfield. *FDR and the News Media*. Columbia University Press, 1994, pp. 16, 19, 116-118. Black-and-white newsreels, cartoons, and other “shorts” preceded the main film(s); double features were common.

came only after emotional, much-publicized debates between disability rights advocates and those seeking to show what FDR had said he preferred.<sup>10</sup>

By the 1970s, media norms and practices were changing dramatically, and the tacit, long-standing agreement on personal privacy for U.S. heads of state was starting to fade. The fourth estate became much more powerful after the Pentagon Papers' leak in 1971<sup>11</sup> and the Watergate scandal (1972-1974) that led to President Richard Nixon's resignation. One observer has described the seventies as a period focused on truth telling.<sup>12</sup> It was also a time when journalists became nearly as famous as the personalities they wrote about—to wit, *Washington Post* Watergate reporters Bob Woodward and Carl Bernstein. Even the venerable CBS news anchor Walter Cronkite had abandoned journalistic objectivity in a 1968 broadcast called "Report from Vietnam," in which he unfavorably described the U.S. war effort there.

---

<sup>10</sup> Roosevelt rejected not only being shown in a wheelchair but the idea of a memorial to him. However, at its dedication, his granddaughter pointed out that "Memorials are for us." See Chris Clausen. "FDR's Hidden Handicap." *Wilson Quarterly*, Summer 2005, 1ff. Also at: [archive.wilsonquarterly.com/essays/fdr-hidden-handicap](http://archive.wilsonquarterly.com/essays/fdr-hidden-handicap)

<sup>11</sup> These Department of Defense papers on the Vietnam War were classified documents leaked to the press by Daniel Ellsberg, the Pentagon military analyst who had helped compile this information.

<sup>12</sup> According to *American Spectator* journalist Rick Perlstein on the National Public Radio program "On Media," 8 July, 2016. Another observer referred to the 1970s as a decade of dystopia in this country, with murder sprees, guerrilla groups, and a mass suicide of U.S. citizens in Jonestown, Guyana. See Gary Krist review of book on Patty Hearst kidnapping, in *Washington Post*. 31 July, 2016, p. B-5. This era also ushered in the environmental movement and a major energy crisis.

The tumultuous 1970s, now considered an early phase of the Information Age,<sup>13</sup> was followed by the electronic deluge of free, often faulty data on the Internet.<sup>14</sup> In the 1990s, a shift toward privacy was apparent in the complicated HIPAA law (Health Insurance Portability and Accountability Act of 1996). Its mandates include privacy in health information for all, including politicians. As a result, those public people are not required—but they are expected—to disclose such data, and they usually do so when campaigning.<sup>15</sup>

Along with media changes,<sup>16</sup> the once-private medical records of historical figures were becoming available to the public. Scholars could research and write more freely about topics that once were only rumors. Another valuable research tool was the Freedom of Information Act of 1966. Because these doors were opening, historians in the later

---

<sup>13</sup> In *Future Shock* (1970), the late Alvin Toffler identified the Information Age as beginning in the 1960s, as television grew more prominent. Others link it to development of the Internet (see note below).

<sup>14</sup> From the 1960's to the 1980s, the Defense Department worked to develop key Internet technologies, including its digital infrastructure. However, the language (HTML) and protocol (HTTP) were conceived by European researchers. See “WWW25,” a *Washington Post* special section on the World Wide Web's twenty-fifth anniversary, 21 August, 2016.

<sup>15</sup> Sen. John McCain, a 2008 presidential contender and former prisoner of war, released almost 1,200 pages of health documents to the news media, per WGNO TV News (ABC affiliate in New Orleans) McCain was seventy-one then, compared to his fortyish opponent, Barack Obama, and needed to show that he was still fit. See at: [wgno.com/2015/12/15/fit-to-lead-presidential-health-stirs-new-questions-of-public-right-to-know/](http://wgno.com/2015/12/15/fit-to-lead-presidential-health-stirs-new-questions-of-public-right-to-know/)

<sup>16</sup> As of late 2016, the press (and pollsters as well) might be due for another round of change, after their shocking failure to grasp or predict the appeal of, and support for, then presidential candidate Donald Trump.

twentieth century and beyond have reclaimed much information that had been hidden or lost. The results have been many notable works, as cited in this paper and its bibliography.

Historiographic approaches evolved in the previous century, too—from “great man” and mainstream history, for example, to revisionism, counterfactualism, psychohistory/psychobiography, and specialty studies on minority groups, women, and other social movements. Some of those trends have weakened, and academic jobs have recently dropped in key subgroups—notably, political, military, and diplomatic history.<sup>17</sup> Developments such as these are discussed for the periods analyzed below.

Like the press, medicine and its mores<sup>18</sup> in U.S. society also were changing drastically. Privacy about illness began to relax in the second half of the twentieth century, resulting in more open discussion both publicly and between doctor and patient. The mid-century consumer movement helped to produce new generations of better informed health consumers. They were far more likely than earlier patients to question, even challenge, the medical establishment. Another factor contributing to more openness was the first televised U.S. war: Vietnam, 1964 to 1975. Images of real casualties now came into the homes of American families via the nightly TV news, although they were edited to be far less graphic than the reality. At any rate, the corporal destruction of war was no longer a mystery sanitized in choreographed newsreels.

---

<sup>17</sup> According to two historians in the *New York Times*: “Why Did We Stop Teaching Political History?” 29 Aug., 2016, Opinion Page. U.S. political history may be suffering academically, but it is well reflected in contemporary popular culture—e.g., theatre/cable TV shows on Alexander Hamilton and Lyndon Johnson, and a possible new film on Woodrow Wilson.

<sup>18</sup> For more information on medical mores, see Hugh E. Evans (2002) and Jean Edward Smith (2007), both cited later and listed in bibliography.

In 1971, the federal government launched a research “war on cancer,” which helped to bring that malady out of the shadows. Earlier, throughout the South and in many other areas, the word “cancer” did not generally appear in newspaper obituaries until around mid-century. Instead, an individual was routinely reported to have “passed away after a long illness,” a phrase generally recognized as meaning death from cancer.<sup>19</sup> Other designations included “bad blood” for syphilis, “consumption” for tuberculosis,<sup>20</sup> “falling sickness” for epilepsy, and “apoplexy” for stroke.

Also in the 1970s, feminists criticized the way predominantly male physicians dealt with female patients, which helped to erode the common perception of doctors as godlike authorities. In addition, the women’s movement contributed to the creation of a rising legion of reporters and columnists no longer relegated to a newspaper’s “society beat” or women’s page, or to magazines aimed at female audiences. These newcomers helped to transform the way health and other topics were handled in the media. In the next decade, HIV-AIDs victims and their supporters were vocal in pushing for a cure, not allowing that disease to be hidden and ignored.

---

<sup>19</sup> In comparison, before the tuberculosis vaccine in the 1940s, that ancient scourge was not hushed up, nor was the frightful polio epidemic from early to mid-century, with its heavy leg braces and encasing iron lungs (see figure 1 in FDR chapter). These conditions were quite public, with many U.S. cities having TB sanitariums and, later, special “hospitals for crippled children.”

<sup>20</sup> Also of note: romanticizing TB in literature and films--see, e.g., Mahito Fukuda. “The Romantic Images of Tuberculosis: A Cultural History of a Disease,” a 1996 conference paper from the Institute of History and Philology in Taiwan, available at: [www.ihp.sinica.edu.tw/~medicine/conference/disease/fukuda.htm](http://www.ihp.sinica.edu.tw/~medicine/conference/disease/fukuda.htm) /

To some observers, the new openness in medical matters had a downside. One internist noted a growing potential for endangering the once confidential relationship of doctor and patient.<sup>21</sup> As for politicians, a rather strident right-to-know sensibility arose in late-twentieth-century American culture, suggesting that public servants from the top down have lost the right to personal privacy. That view persists today. A reviewer of *Ill-Advised*, written in 1992 by historian Robert Ferrell, observed that for much of our past, factors such as suppressed or absent data, political chicanery, and physicians' malpractice were major aspects of keeping presidential infirmities undercover.<sup>22</sup> Passive or co-opted media can be added to that list, since the earlier twentieth-century press often chose not to pursue certain frailties in politicians.

#### Caveat on Mental Health

Not discussed in this document are presidents beset by what are now viewed as undisclosed mental/emotional problems. Diagnoses for those conditions were not sophisticated until the second half of the twentieth century and are still evolving, so accurately discussing earlier cases is problematic. Worth mentioning, however, is the fate of a possible vice-president in 1972 who kept a major mental health secret. Sen. Thomas Eagleton (D-Missouri) was selected that year by Sen. George McGovern (D-South Dakota) as the latter's running mate. Eagleton was forced to withdraw from the

---

<sup>21</sup> Barron F. Lerner, M.D., Ph.D., writing on confidentiality in "Kennedy: Disease, History and Secrecy," HNN, Nov. 2002, at: <http://hnn.us/article/#1117> / Lerner also wrote 2009's *When Illness Goes Public: Celebrity Patients and How We Look at Medicine*. Johns Hopkins University Press. Among the celebrities he covered were the three presidents in this paper.

<sup>22</sup> Unidentified remarks on back cover of *Ill-Advised: Presidential Health and Public Trust*. University of Missouri Press, 1992 edition.

ticket after information that he had not revealed to McGovern became widely known. The revelation was that Eagleton had been hospitalized three times in the previous dozen or so years and received shock treatments twice for recurring depression.<sup>23</sup>

At the time, despite extensive social changes spawned in the turbulent 1960s<sup>24</sup> and into the 1970s, an admission of being clinically depressed, visiting mental health personnel, and receiving electroshock treatment was still shocking, especially where politicians were concerned. Even one of those three experiences would have been a red flag; together, they created a perfect storm of sensationalized, potentially negative publicity. Much later, in a 7 March 2007 obituary for Eagleton in the *New York Times*, McGovern (who lost in 1972 by a landslide) admitted that he regretted dropping his fellow senator from the ticket. Tellingly, he also observed: “I didn’t know anything about mental illness then. Nobody did.”<sup>25</sup>

---

<sup>23</sup> Crispell and Gomez, pp. 3-6, report that Eagleton freely told reporters about his medical past in response to health questions at a press conference.

<sup>24</sup> The year 1968, with too many dreadful events to describe in a footnote, was an especially wrenching time. Reviewing a 2016 book on that subject, the *Washington Post*’s Book World section called it “The Year When Politics Fractured.” See Carlos Lozada review of Michael A. Cohen. *American Maelstrom: The 1968 Election and the Politics of Division*. Oxford University Press, 2016.

<sup>25</sup> McGovern certainly knew about addiction. One of his daughters suffered from alcoholism most of her life. In 1994, at age forty-five, she was found frozen to death in a snow bank after a drinking bout.



## What Follows Here

After a short section on presidential precedents, including the hard-to-believe experiences of Grover Cleveland in 1893, the third chapter of this paper analyzes the tribulations of Woodrow Wilson. After he had a major stroke in fall 1919, a campaign of disinformation orchestrated by his doctor and wife was quite effective, with uncertainties about details still being explored by scholars. This period has been cited as the time when a woman, unelected, ran the nation for many months, in that Edith Wilson is said to have made key decisions for her invalid husband. During that time, as in Grover Cleveland's much shorter episode, a curious press was generally bamboozled about what was going on with the commander-in-chief.

Chapter 4 is two-part: a discussion of Franklin D. Roosevelt's long paralysis from polio and his final election in 1944 as a very sick man with advanced heart disease and hypertension. There was some public knowledge about the first of these, especially among the journalists who traveled with him; the later illness was known only to those closest to FDR in his last months. Neither situation was fully and publicly acknowledged during his twelve years in office. Indeed, FDR was confident early on that he could beat polio, telling the well-known writer John Gunther that "It's ridiculous to tell me that a grown man cannot conquer a child's disease."<sup>26</sup> During the period before his death in 1945 at age sixty-three, he possibly did not know, or wish to know, the full story in his

---

<sup>26</sup> John Gunther. *Roosevelt in Retrospect*. Harper and Bros., 1950, p. 238, quoted in Nassir Ghaemi's *A First-Rate Madness*. Penguin Press, 2011, p. 141.

medical file. His White House physician<sup>27</sup> told the family and the press that he was fit for a fourth term. He may have misled FDR as well.

Finally, chapter 5 offers the bizarre history of the seemingly vibrant but in fact illness-riddled John F. Kennedy. Other than having a very bad back and rumored Addison's disease (which he denied), his multiple and varied physical ordeals were kept well hidden from the beginning of his political career in Massachusetts. He carried these burdens with unfathomable stoicism, bolstered by a cornucopia of medicines, pellets, and injections (some legally questionable) from a troop of competing doctors. Ranging from legitimate practitioners to a reputed shyster, any one of them did not necessarily know about the others' existence or what they were doing to treat the client. Thus, it is amazing that JFK survived as long as he did. What seems even more improbable is his ability to be an effective head of state, especially during major crises. At this writing, however, no reputable researcher has showed conclusively that he was not.

The Kennedy section is followed by summing-up remarks in chapter 6, which reiterates the importance of media and medical changes in the twentieth century's second half and how they relate to the case studies in this thesis. Also explored there is the issue of agency—how much each president was responsible for the health misinformation or lack of information during their terms of office.

---

<sup>27</sup>A job existing since 1901 but not officially created until 1928, by an act of Congress. It is often held by military doctors.

## Chapter 2

### Presidential Precedents in Secrecy

According to the History News Network,<sup>28</sup> presidential health became a topic of widespread interest only in the late nineteenth century with the 1881 assassination of James A. Garfield. His protracted struggle before dying was a preoccupation for newspapers and the populace, with the White House issuing daily notices on the gravely wounded man's status. Before that event, many Americans thought it unseemly to inquire into one's medical status, and physicians honored their patients' privacy. In fact, the idea of presidents "going public" about *anything* was at that time "both rare and frowned upon."<sup>29</sup> That practice would come later, when the modern rhetorical presidency flourished, giving us master communicators such as Franklin D. Roosevelt, John F. Kennedy, and Ronald Reagan.

The year after Chester A. Arthur (1881-1885) succeeded the martyred Garfield, he developed Bright's disease, a fatal kidney malfunction (now called nephritis) that caused him considerable pain and much time in bed. It also weakened his heart and produced weight loss and other physical changes that signaled problems. To stop rumors, Arthur had a staff member tell the press that he had no type of kidney ailment. He thus became,

---

<sup>28</sup> "How Many Presidents Have Lied About Their Medical Histories?" by unidentified staff at History News Network, Nov. 2002, at: <http://hnn.us/article/1112/>

<sup>29</sup> As discussed in Elvin T. Lim. "Five Trends in Presidential Rhetoric: An Analysis of Rhetoric from George Washington to Bill Clinton." *Presidential Studies Quarterly*, vol. 32, no. 2, June 2002, pp. 328-348.

in one medical author's judgment, the first U.S. leader to "systematically mislead the public about the President's health."<sup>30</sup> However, historian Robert Dallek claims that William Henry Harrison (1841) holds that distinction because he hid his frailties before expiring after only thirty-two days in office. He supposedly died of pneumonia after a two-hour inaugural address on a cold day, thus having the shortest tenure and longest "first speech" in history.<sup>31</sup> Dallek also criticized the handlers of Zachary Taylor (1850) for "denying rumors of his sickness [stemming from cholera] until he was near death...."<sup>32</sup>

Grover Cleveland was the only U.S. president to serve nonconsecutive terms (starting in 1885 and 1893). He also had two clandestine surgeries in early July 1893 for a large tumor growing rapidly on the left roof of his mouth—what he called his "cigar-chewing side." The first operation involved removing a few teeth and much of his upper left jawbone, replacing it with a hard, rubber prosthesis, a painful-sounding apparatus. In the

---

<sup>30</sup> John Bumgarner, M.D. *The Health of the Presidents: The 41 U.S. Presidents Through 1993 from a Physician's Point of View*. Jefferson, NC: MacFarland and Co., 1994, pp. 132, 133. Biographer Zachary Karabell also wrote about Bright's disease in *Chester Alan Arthur: The American Presidents Series*. New York Times Books/Henry Holt and Co., 2004.

<sup>31</sup> History-of-medicine scholar Philip A. Mackowiak, M.D., has a different view on Harrison's death, after examining notes from the president's main doctor. This author is convinced that the real culprit was not pneumonia but typhoid fever, probably caused by poor sanitation in the White House and its environs. See "President William Henry Harrison's Fatal Pneumonia," posted by Oxford University Press at: [blog.oup.com/2016/04/william-henry-harrison-death-pneumonia/](http://blog.oup.com/2016/04/william-henry-harrison-death-pneumonia/)

<sup>32</sup> On Harrison and Taylor, see Robert Dallek, "The Medical Ordeals of JFK." *The Atlantic*, 1 Dec. 2002, first online page, at:

[www.theatlantic.com/magazine/archive/2002/12/the-medical-ordeals-of-jfk/305572](http://www.theatlantic.com/magazine/archive/2002/12/the-medical-ordeals-of-jfk/305572)

second procedure, suspicious new tissue growth at the same site was also removed.<sup>33</sup> To guarantee privacy and escape the media—this was the age of “yellow” or sensationalistic journalism—the president secretly boarded a yacht in Long Island Sound. Said to be on a fishing trip, the nation’s leader was out of sight and inactive as president for four days with the first procedure. No Secret Service guards were present to observe these goings-on; they were not assigned to commanders-in-chief until after William McKinley’s assassination in 1901.<sup>34</sup>

Cleveland was then fifty-six years old and about six feet tall, weighing some three hundred pounds. Because of his weight and hypertension, the medical team feared for his life as the six surgeons prepared for a delicate procedure on a slowly sailing vessel. (Two men were on deck, since anchoring might have drawn attention). Yet they managed, in a phenomenally short ninety minutes, to extract the malignancy through the patient’s mouth, leaving no external scar or other visible evidence. Even his walrus moustache was intact.<sup>35</sup> A Philadelphia journalist broke this story two months later, but his account was discredited and he was slandered by Cleveland’s publicity machine, causing him to lose his job. The news item was soon forgotten.<sup>36</sup> In 1917, after almost a quarter-century, the

---

<sup>33</sup> One factor adding to the urgency for an operation was former President Ulysses Grant’s recent death from oral cancer, which apparently was not treated promptly.

<sup>34</sup> John S. Martin. “When the president disappeared.” *American Heritage*, vol. 8, no. 6, Oct. 1957, pp. 1-5. Martin’s account describes the first operation in fascinating detail. For example, the patient sat in a straight-back chair that was lashed to the boat’s mast—an image recalling Captain Ahab’s demise in the 1956 film version of Herman Melville’s *Moby Dick*.

<sup>35</sup> Matthew Algeo. *The President Is a Sick Man*. Chicago Review Press, 2011, p. 94.

<sup>36</sup> Rudolph Marx, M.D. *The Health of the Presidents*. New York: Putnam Books, 1960, pp. 261-262. Dr. Marx’s book is a fascinating but undocumented account of all presidents through Eisenhower. He is often cited by scholars, even though his book has no footnotes.

only surviving member of Cleveland's sailing health care team confirmed the historic incident in a popular magazine article and later book.<sup>37</sup> Researchers were at last able to incorporate this information into their *oeuvres*.

Cleveland's main reason for subterfuge was the fact that the country was in the midst of a serious economic crisis. Only the Great Depression of the 1930s would be worse than the Panic of 1893. He believed that his surgery, plus having what was then called the "dread disease" (cancer), could throw Wall Street and the nation into even greater alarm.<sup>38</sup> He also did not want his vice-president to take over, since he and Adlai E. Stevenson<sup>39</sup> had key political differences on currency and other matters. Hence, the second-in-command was kept in the dark, along with curious newspapermen and nearly

---

<sup>37</sup> William W. Keen, Jr., M.D. *The Surgical Operations on President Cleveland in 1893*. Philadelphia: George W. Jacobs and Co., 1917. An article with the same title appeared in *The Saturday Evening Post*, 22 Sept. 1917, p. 24. Keen, considered the first U.S. brain surgeon, also treated Woodrow Wilson in 1896 for a pre-presidential stroke (see Wilson chapter to follow). He was even summoned when FDR was stricken by paralysis in 1921; in that case, he misdiagnosed the cause. See Crispell and Gomez, pp. 28, 87, and Jean Edward Smith, *FDR*. Random House, 2007, p. 189.

<sup>38</sup> Algeo, p. 214. Cardiologist Jay W. Murphy also commented on the taboo nature of cancer, calling it "an unspoken word in the press" until around mid-twentieth century. See *What Ails the White House? An Introduction to the Medical History of the American Presidency*. Leathers Publishing, 2006, p. 98.

<sup>39</sup> This vice-president was grandfather to the similarly named Democratic nominee for president in 1952 and 1956. The younger Adlai Stevenson lost both times to popular World War II hero Dwight D. Eisenhower, whose illnesses are mentioned in a later section.

everyone else. Stevenson apparently never learned how close he came to being the nation's leader.

Cleveland lived to be seventy-one and died from heart problems, not cancer. Unlike most presidents who have dissembled about their health, he was probably correct in his judgment to stifle the story of his two operations, thus deceiving the public and the press, plus shortchanging historians for almost a quarter-century. Still, surgery on a moving boat was terribly risky. As a patient, he was extremely lucky on all counts: The mass in his mouth turned out to be slow growing and not a deadly form of cancer, as had been thought initially. Cleveland's six-member care team was fortunate, too. Without a good outcome to Cleveland's surgical adventure, their careers might have been ruined. Unfortunately, the journalist who first tried to break the news on this incredible story was not so blessed. He died neither corroborated nor vindicated,<sup>40</sup> as collateral damage to the steamrolling Cleveland administration and its overriding need to maintain secrecy.

---

<sup>40</sup> According to Matthew Algeo. The full title of his book is *The President Is a Sick Man: Wherein the Supposedly Virtuous Grover Cleveland Survives a Secret Surgery at Sea and Vilifies the Courageous Newspaperman Who Dared Expose the Truth*.

## Chapter 3

### Woodrow Wilson: The Long Deception

A standout case of concealment in the early twentieth century is that of the twenty-eighth president.<sup>41</sup> In the fall of 1919, Woodrow Wilson was traveling the country, against medical advice and his wife's pleas, to promote his League of Nations cause. A few days after returning to the nation's capital totally exhausted, he had a major ischemic (clot-related)<sup>42</sup> stroke in the right carotid artery. It left him paralyzed on one side and almost unable to speak. He would also experience partial blindness and later be confined to a wheelchair for some time. Although President Garfield's eighty days of suffering before his death in 1881 were horrific, Wilson's was probably the most serious extended incapacitation of any U.S. leader while still in office. (He stayed on until his term ended in 1921, despite his diminished physical condition.)

Modern historians have been invaluable in the reconstruction of Wilson's health record and how it affected his presidency. Especially notable are the biographies of John Milton Cooper, Jr. and A. Scott Berg (both took Wilson to task for his health cover-up) and the televised PBS "American Experience" program on Wilson in 2001, featuring

---

<sup>41</sup> Wilson has so far been the only Ph.D. to occupy the Oval Office, although John Quincy Adams taught at Harvard University before he became a senator and wrote a book on rhetoric and oratory. As for Wilson, he received a Ph.D. in political science from Johns Hopkins University, produced several books (including a four-volume *History of the American People* in 1902), and was president of Princeton University for eight years before turning to state and national politics.

<sup>42</sup>The other type of stroke is less common and caused by a hemorrhage. Franklin Roosevelt died of a cerebral hemorrhage in 1945.



several historical scholars. In addition to historians, many physicians cited in this paper have helped readers understand his condition and how it affected the nation.

As the severely impaired Wilson was publicly reported to be convalescing (with no mention of the words “stroke” or “paralysis”), his spouse Edith hid the seriousness of his condition by isolating her husband in one part of the White House and restricting access to him. She screened his incoming documents, delegating many matters to cabinet officials or others. That flow of information did not go unnoticed, however. A Republican in Congress said he suspected a “petticoat government.”<sup>43</sup> One source describes her allowing two members of Congress to visit her husband about six weeks after his stroke. He was placed in a shadow, with his paralyzed hand covered by a blanket. Wilson could not walk or write, but he was able by then to utter a few words. The ruse was successful; the *New York Times* was soon scoffing at “unfriendly” rumors of presidential disability.<sup>44</sup> Scholars now agree that Edith made at least some official decisions for her husband, thereby serving as an unelected acting head of government in what she called her

---

<sup>43</sup> Senator Albert Fall (R-New Mexico), according to William Hazelgrove. *Madam President*. Regnery History, 2016, chapter 1. Like others covering the Wilson era, this author notes how active Edith was in helping her husband make decisions even before his major illness.

<sup>44</sup> Sources for information in this section include biographies by historians A.S. Berg, H.W. Brands, J.M. Cooper, and others, plus medical details from E.A. Weinstein and other physicians cited below. Accounts on Edith Wilson come from J. T. Post (see footnote below); G. Phifer’s article in *Speech Monographs*; and K. Miller’s book on the two Wilson wives. All of these references are cited in full in the bibliography.

“stewardship.”<sup>45</sup> She also declared, according to psychiatrist Jerrold T. Post, “I don’t know why you men make such a fuss. I had no trouble running the country while Woody was sick.”<sup>46</sup>

Ironically, Edith Wilson and most women in the United States did not have the right to vote,<sup>47</sup> which would come in ten months with ratification of the Nineteenth Amendment. The year 1920 introduced broad newsreel coverage, campaign advertising, and radio broadcasts of election results. America had become an urban nation dealing with a variety of social phenomena—among them the prohibition of alcohol, the Ku Klux Klan’s ongoing presence, and the first wave of U.S. feminism.<sup>48</sup>

The first lady’s co-conspirator was her husband’s longtime personal physician and close friend, Cary Grayson, a Navy officer. In briefing the Cabinet, this doctor—according to a 2015 medical journal article by four physicians and a historian<sup>49</sup>—refused to declare officially that his patient was disabled. He also joined Edith in being reluctant to discuss the matter of succession to the highest U.S. office. It is even possible that Dr.

---

<sup>45</sup> Edith’s insistence, in her 1939 memoir, that she made no significant decisions is repeated by Herbert Hoover in *The Ordeal of Woodrow Wilson*. Wilson International Center for Scholars, 1992, p. 274. (The later president worked for the earlier one.) Unfortunately, the widow’s remembrance has been called “factually faulty” by some historians, according to [www.firstladies.org/](http://www.firstladies.org/)

<sup>46</sup>This “typical Edith” quote comes from psychiatrist Jerrold Post in a 15 Dec., 2015 television interview with WGNO-TV News online.

<sup>47</sup>The Wyoming and Utah territories allowed female suffrage in 1869 and 1870, respectively.

<sup>48</sup>David Pietrusza. *1920: The Year of the Six Presidents*. Basic Books, 2007, description on back cover.

<sup>49</sup>R.P. Menger, M.D. *et al.* (four physicians and Wilson historian John M. Cooper). “Woodrow Wilson’s hidden stroke of 1919: the impact of patient-physician confidentiality on United States foreign policy.” *Neurosurgery Focus*, vol. 39, no. 1, July 2015, p. E6.

Grayson hid the full truth of Wilson's condition from the patient himself. Extremely loyal and protective, Grayson had what may have been the closest of any patient-physician relationship involving a president. The five authors of the 2015 journal article noted above maintain that this medical man's adherence to patient confidentiality so far outweighed national security concerns that U.S. foreign policy was negatively affected in a critical postwar period.<sup>50</sup>

Vice-President Thomas Riley Marshall, like Adlai Stevenson under Grover Cleveland, was not part of the deception, since Edith did not allow him to see the president. Like Grover Cleveland and Adlai Stevenson, Wilson and his second in command were not on good terms. (The idea of politically and personally compatible presidents and VPs arose later.) A few members of Congress, wondering about Wilson's capacity to serve, urged the second in command to take steps toward assuming the top job, but he demurred. A 2014 article<sup>51</sup> observes that Marshall has been criticized for that decision; however, his behavior is better understood in light of the "formidable constraints" he faced. Those factors included constitutional, political, and institutional limitations, all exacerbated by a lack of solid information about Wilson's condition. It

---

<sup>50</sup> Menger, *et al.*, p. E6. As for Grayson, he had a chance to speak for himself in his own work, *Woodrow Wilson—An Intimate Memoir*. Holt, Rhinehart, and Winston, 1960, especially pp. 96-110. However, this book has very little text (at p. 100) on the president's 1919 stroke. Grayson's papers are stored at Wilson's birthplace in Staunton, VA, now a museum and library.

<sup>51</sup> Joel K. Goldstein. "Vice-presidential behavior in a disability crisis: The case of Thomas R. Marshall." *Politics and the Life Sciences*, vol.33, no. 2, Fall 2014, pp. 37-57. This is one of several articles in a special *P&LS* issue on presidential disability. Another, by M. Fisher, D. Franklin, and Jerrold Post, is "Executive dysfunction, brain aging, and political leadership," pp. 93-102. For Marshall's version of events, see his book, *Recollections*. Bobbs-Merrill, 1925.

would take almost fifty years before a constitutional amendment (the twenty-fifth) was put in place for guidance, albeit imperfect, on questions of presidential incapacity.

Unlike Marshall, chief of staff Joseph P. Tumulty apparently *was* involved, at least to some extent. He joined Dr. Grayson and Mrs. Wilson in refusing to declare the president disabled by his massive stroke.<sup>52</sup> Moreover, a 2008 work by historian David Pietrusza indicates that this aide and Mrs. Wilson helped a journalist concoct a phony account of an interview with her very sick husband.<sup>53</sup> In his own memoir, Tumulty is the devoted loyalist, acknowledging a few quirks in his boss of eleven years but divulging nothing that would mar the latter's reputation. Details about the 1919 stroke's aftermath are skimpy; only general references are made to "safe" subjects such as fatigue and Wilson's cane (which he called his "third leg.")<sup>54</sup>

Newspapermen, also out of the information loop, were regularly told only that Wilson was getting better. It seems inconceivable now that they accepted such dismissive treatment, given the press's reputation for tenacity. However, they were caught in an

---

<sup>52</sup> John Milton Cooper, Jr. *Woodrow Wilson, a Biography*. Vintage Books/Random House, 2011 paperback, pp. 535ff.

<sup>53</sup> Pietrusza, p. 191. Yet there are unsubstantiated rumors that a jealous Edith later alienated her husband from Tumulty and others close to him. Only his physician, Dr. Grayson, survived.

<sup>54</sup> *Woodrow Wilson As I Know Him*. Doubleday, 1921. Available at: <https://archive.org/details/woodrowwilsonasi011310mbp/>. See especially the touching "Last Day" section at the book's end, describing the 1921 inauguration day for Wilson's successor, Warren Harding. The former was furious with Tumulty's publication and essentially banished the former aide from his inner circle. For more on their estrangement, see Pittsburgh Press story of 14 Apr., 1922: "Wilson-Tumulty Breach Widened...."

early version of managing the news, a topic discussed at length by media professor David Greenberg in his 2016 book *Republic of Spin*.<sup>55</sup> Moreover, the patient was well concealed and had only two gatekeepers. Those who worked in the mansion were in general not allowed into the sickroom and were probably motivated to be unobtrusive in order to keep their jobs. Others must have had similar concerns about seeming too inquisitive—notably Wilson administration appointees. After all, how many insiders in *any* setting would challenge a situation about which they had almost no personal knowledge?

One staff person, however, was allowed into the *ad hoc* infirmary early on: White House chief usher Irwin (“Ike”) Hoover. To his credit, he did not write about his experiences until a decade or so after Wilson died. He then described the presidential residence of October 1919 as being like a hospital, with the head of state lying “as helpless as one could possibly be and live.”<sup>56</sup> Elsewhere, Hoover noted that “The President was sicker than the world ever knew.”<sup>57</sup> The usher also mentioned the presence of several doctors and nurses in the White House soon after Wilson was stricken. Dr. Grayson had summoned local medical experts, an eminent urologist from Johns Hopkins

---

<sup>55</sup> *Republic of Spin*, p. 6.

<sup>56</sup> Irwin Hood Hoover. *Forty-two Years in the White House*. Houghton Mifflin, 1934. His account of the White House atmosphere on and after 2 Oct., 1919 is also online. See “President Wilson Suffers a Stroke, 1919,” EyeWitness to History, 2002, at: [www.eyewitnesstohistory.com/wilsonstroke.htm](http://www.eyewitnesstohistory.com/wilsonstroke.htm)

<sup>57</sup> Ike Hoover interview on PBS “American Experience,” 2001, transcript, p. 17. In this interview, White House usher Hoover also confirmed Edith Wilson’s *modus operandi* in serving as regent for her disabled mate

Hospital in Baltimore, two well-known physicians from Philadelphia, and others. These individuals seem to have kept the incident private, at least for a while. The urology specialist, for example, apparently did not discuss it fully until he wrote an autobiography many years later.<sup>58</sup> Dr. Francis Dercum, a nerve specialist, is said to have destroyed his notes<sup>59</sup> on the White House visit; however, Edith Wilson's memoir alleges<sup>60</sup> that he advised against Wilson's resignation and even encouraged her to stand in for him.

#### Historians and Others Weigh In

"Wilson's stroke caused the worst crisis of Presidential disability in American history." So said historian John Milton Cooper, speaking near the end of a PBS "American Experience" program (part two), produced in 2001.<sup>61</sup> A later historian and biographer, A. Scott Berg, wrote a generally favorable book on this president, but he also strongly disapproved of the post-stroke actions by Edith Wilson and Dr. Grayson. According to Berg, these two fabricated "the greatest conspiracy that had ever engulfed the White House."<sup>62</sup> Historian H.W. Brands's 2003 popular history is more positive,

---

<sup>58</sup> Hugh Young. *A Surgeon's Autobiography*. Harcourt, Brace and Co., 1945, chapter on "The Illness of President Wilson," p. 402 ff.

<sup>59</sup> Readers of this paper will see this happening repeatedly with physicians.

<sup>60</sup> Edith Bolling Wilson. *My Memoir*. Bobbs Merrill), 1939, p. 289.

<sup>61</sup> At: [www.pbs.org/wgbh/amex/wilson/sfeature/sf\\_legacy.html](http://www.pbs.org/wgbh/amex/wilson/sfeature/sf_legacy.html)

<sup>62</sup> A. Scott Berg. *Wilson*. Putnam, 2013, pp. 28, 87. Chapter titles in this biography track the religious elements in Wilson's makeup: "Ascension," "Resurrection," etc.

focusing on the Wilsonian idealism, conviction, and gift of rhetoric.<sup>63</sup> In a 2008 analysis of several U.S. leaders, political scientist Rose McDermott<sup>64</sup> describes three of them as follows: Franklin D. Roosevelt was “leading while dying” from 1943 to 1945, and John F. Kennedy was “addicted to power.” Her language regarding Wilson is more opaque, yet telling: “the exacerbation of [his] personality.”

Similar to McDermott’s perspective is the observation of another Wilson author, Dr. E.A. Weinstein. With a psychohistory bent, he discusses the speculation by some scholars on whether the president’s displays of growing rigidity and ill humor, especially after 1906, were linked to longtime brain/eye events—i.e., small strokes or other disturbances.<sup>65</sup> However, the tangled threads of anyone’s behavior are hard to separate. Were Wilson’s perceived stubbornness and refusal to compromise, especially regarding the League of Nations idea, simply parts of his personality? (Those in Congress who argued the opposite side of the League issue could have been seen as equally stubborn.) Did his lifelong religious credo, bequeathed by his minister father, make him seem self-righteous in the political arena? Or were those manifestations indeed caused or

---

<sup>63</sup>*Woodrow Wilson, 1913-1921*. New York Times Books, 2003. This work is part of the American Presidents Series, edited by Arthur Schlesinger.

<sup>64</sup>*Presidential Leadership, Illness, and Decision Making*. Cambridge University Press, 2008, table of contents. McDermott’s book has an eerie front cover. It features twelve small reproductions of the same dark photo showing a stern-looking Woodrow Wilson.

<sup>65</sup>E.A. Weinstein. *Woodrow Wilson: A Medical and Psychological Biography*. Princeton University Press, 1981, pp. 260-270.

exacerbated by a several-year history of brain clots? Ophthalmologist/vision scientist Michael Marmor vehemently opposed the last opinion and offered alternative possibilities, including retinal hemorrhages rather than brain strokes.)<sup>66</sup>

Thomas Woodrow Wilson was also one of several presidents—among them FDR, JFK, and Eisenhower—known to experience severe headaches off and on (especially from 1915 to 1919, in Wilson’s case). These were probably migraines.<sup>67</sup> In a video clip of Edith Wilson on PBS’s “American Experience,” she spoke movingly on these debilitating attacks:<sup>68</sup>

*There would come days when he was incapacitated by blinding headaches which no medicine could relieve....When at last merciful sleep would come, he would lie for hours...apparently not breathing. Many a time, I stole in to... see if he were really alive.*

In addition to these dangerous headaches, suggesting very high blood pressure, Wilson also had less intense cerebrovascular events from the 1890s onward. They were not revealed to voters when he later ran for office in New Jersey and at the national

---

<sup>66</sup> Marmor. M.F. “Wilson, Strokes, and Zebras.” *New England Journal of Medicine*, 26 Aug., 1982, pp. 528-535. (A zebra is medical slang for a surprising/unusually exotic diagnosis.) See also [www.ncbi.nlm.nih.gov/pubmed/7048094](http://www.ncbi.nlm.nih.gov/pubmed/7048094)

<sup>67</sup> According to R.W. Evans, M.D., Baylor College of Medicine. His article, “Migraine and the Presidency,” was in the American Headache Society’s *Headache* magazine, vol.5, no. 9, Oct. 2011, pp. 1431-1439. (According to Health.com, there are fourteen types of headaches, with migraines being the worst. They are more common in women than in men.)

<sup>68</sup> Transcript of “American Experience” on Wilson (PBS program produced in 2001).



level.<sup>69</sup> Upon first coming into office in 1913, the president also showed signs of advanced dental decay,<sup>70</sup> with black-stained front teeth clearly visible in an inauguration photo now held by the Library of Congress. It is a rare picture, in that he is smiling widely. Book covers and other photos tend to show a serious, unanimated mien. How long this condition existed is unclear. It appears to have been remedied by 1918, as seen in later photos where he is smiling—for example, at the Paris Peace Conference. In any event, it is now recognized that there is a connection between bad teeth and other health problems, including those that eventually killed this leader.

Weinstein's psychohistory-oriented book, mentioned above, describes several of Wilson's medical issues. This physician referred to the president as anosognosic (ignorant or unaware of one's own disease).<sup>71</sup> The term is often used to describe mental health issues, but it can apply to physical illness as well. However, it seems more likely that Wilson was in denial about his frequent medical warnings. Or he could have been so focused on his self-appointed, ostensibly religious world mission that he thought his God would protect him from harm. It is also the case that both he and Franklin Roosevelt followed the pattern of American males in general until the later twentieth and early twenty-first centuries. Men were often inadequately (or did not want to be) informed

---

<sup>69</sup> A leading neurologist who tended to Wilson in 1896 after his first stroke was none other than William W. Keen, the same physician who participated in, and later told the story of, Grover Cleveland's yacht operation three years earlier. See History News Network, 18 May, 2008, at: <http://hnn.us/article/1112>

<sup>70</sup> Per [www.doctorzebra.com/prez/](http://www.doctorzebra.com/prez/)

<sup>71</sup> Weinstein, pp. 358-36

about their medical conditions, “too busy” to address health problems, perhaps unwilling to admit a weakness, and—especially for the three men discussed here—unwilling to give up a powerful job. Thomas Jefferson called the presidency “a splendid misery”;<sup>72</sup> it has become a highly addictive occupation as well.

Michael F. Marmor, the ophthalmologist mentioned above, strongly disputed E. A. Weinstein’s judgment about Wilson being anosognosic. The eye doctor was particularly adamant that the president’s testiness and similar personality displays were not necessarily tied to prepresidential brain and eye events. Marmor did concede that the 1919 stroke was significant. He also opined that Wilson was a hypochondriac whose frequent complaints about pain and other problems might have been psychosomatic on some occasions.<sup>73</sup> This is an unusual approach among medical professionals<sup>74</sup> who write about Wilson. Many of them tend to view his earlier health issues as having long-term, even personality-changing effects. Marmor’s hypochondria charge also seems questionable, given what is now known about the president’s symptoms over the years.

---

<sup>72</sup> From a Jefferson letter to our fifth vice-president, Elbridge Gerry (of “gerrymander” fame), 13 May, 1797, as recounted in Jack Bell. *The Splendid Misery: The Story of the Presidency and power politics at close range*. Doubleday and Co., 1960, front matter. The full text of this book is available at:

[https://archive.org/stream/splendidmisery001698mbp/splendidmisery001698mbp\\_djvu.txt](https://archive.org/stream/splendidmisery001698mbp/splendidmisery001698mbp_djvu.txt)

<sup>73</sup> Marmor, pp. 528-535.

<sup>74</sup> This section and other parts of this thesis cite a wide range of medical disciplines, including neurology/neurosurgery/cerebrovascular matters, urology, cardiology, ophthalmology, pathology, psychiatry, and general practice (now called internal medicine). The later discussion on JFK is replete with a variety of competing doctors.

## Consequences of Wilson's Health Problems

Other than having a secret, unelected, disenfranchised female chief executive for a time, the nation faced additional consequences, although their extent has long been debated. Academic and medical researchers have made the case for several negative outcomes; some possibilities are more convincing than others. As noted above, four medics and a historian (Menger, *et al.*) cite a general impact on U.S. foreign policy during World War I because of the president's hidden health issues. They maintain that the United States lacked real leadership for more than a year, which seems like a reasonable conclusion. The well-respected Bert Edward Park, both a neurosurgeon and adjunct history professor, agrees with that finding in "The Impact of a Neurologic Disease on the Paris Peace Conference."<sup>75</sup> Park was also interviewed for the aforementioned PBS "American Experience" program, where he indicated that Wilson was "living on borrowed time" even when he headed Princeton University.<sup>76</sup> In 1906, he had experienced burst blood vessels and temporary blindness in one eye.

A 2006 analysis of presidents and cerebrovascular disease indicated that approximately a fourth of forty-three U.S. heads of state had a stroke during their

---

<sup>75</sup> Park's study on Wilson's infirmity in Paris is cited in Arthur Link's edit of a sixty-nine-volume work, *The Papers of Woodrow Wilson*. Princeton University Press, vol. 58 (1914-1919), pp. 611-630. Dr. Park also produced *The Impact of Illness on World Leaders*. University of Pennsylvania Press, 1986. His case studies there included Wilson, FDR, and Hitler, with fascinating postmortem data.

<sup>76</sup> PBS, "American Experience," 2001.

lifetimes, some of them while in office. Of those, Wilson's devastating attack was thought to be among the worst in its effects on the country.<sup>77</sup> That same year, cardiologist Jay W. Murphy's book put cardiovascular issues at the top of a list on "Causes of Presidential Deaths."<sup>78</sup> In 2012, a health journal paper by heart and vascular specialists examined the medical histories of sitting presidents and vice-presidents in the twentieth century. These M.D.s concluded that in the two incumbent groups, vascular and heart diseases were the major causes of death and disability. The authors listed two factors as key contributors to that scenario: untreated hypertension (still a silent killer) and smoking.<sup>79</sup> The latter was a pervasive habit for adults, especially men, until U.S. rates began to change significantly in the 1970s, according to data from federal government health agencies. Among the men examined here, Grover Cleveland and John F. Kennedy indulged in cigars—usually off camera, in the latter's case. FDR chose to smoke cigarettes in a holder, often clenched between his teeth at a jaunty angle that would have looked silly on anyone else. (The implement thus became a meme for his self-crafted image.) Wilson grew up in the American South, where tobacco growing was a pillar of several state economies and a deeply imbedded way of life, as were "King"

---

<sup>77</sup> J.M. Jones and J.L. Jones. "Presidential stroke: United States presidents and cerebrovascular disease." *CNS Spectrums*, vol. 11, no. 9, Sept. 2006, pp. 674-678.

<sup>78</sup> *What Ails the White House?* See table 1. This work can also be found at: [whatailsthewhitehouse@sbcglobal.net](http://whatailsthewhitehouse@sbcglobal.net)

<sup>79</sup> W.H. Frishman, *et al.* "Incumbent Presidents and Vice-Presidents of the United States of America: A Medico-Historical Perspective." *Cardiology in Review*, vol. 21, 2012, pp. 1-8.

Cotton” and coal mining.<sup>80</sup> However, this president is not known to have used nicotine in any form.

Finally, according to a urologist and his 2011 coauthors, the way Wilson was treated for urinary retention and sepsis after the 1919 stroke affected postwar events. These researchers reported that the “father of urology,” Dr. Hugh Hampton Young, advised against an operation for these life-threatening sepsis, considering the patient’s debilitated state. Wilson did in fact recover from this particular infirmity on his own. However, according to the medical journal authors, the patient was so weakened from the ordeal that he was unable to fight effectively for his beloved League of Nations and ratification of the Treaty of Versailles, later rejected by the U.S. Senate.<sup>81</sup> This multiauthor study is somewhat discomfiting in that it singles out a respected physician in its title and possibly assigns an excess of blame to him. His patient could have been weakened by a number of reasons.

#### Social Dynamics of the Period

Wilson was the first president from the South since Tennessee’s Andrew Johnson (1865-1869), and he brought to the nation’s capital a decidedly Southern ethos. In

---

<sup>80</sup> Message on bumper stickers seen in central Kentucky, late 2000s: “ENJOY SMOKING”

<sup>81</sup> R. Fogg, M.D., *et al.* “How Hugh Hampton Young’s Treatment of President Woodrow Wilson’s urinary retention and urosepsis affected the resolution of World War I.” *J. Urol.*, vol. 186, no. 3, Sept. 2011, pp. 1153-1156. Dr. Young, a prominent urologist, was one of several physicians who tended to Wilson after his fall 1919 stroke.

addition, second wife Edith came from a Virginia family that had lost much of its money but not its high-status heritage. Although this president did appoint, in 1916, the first Jewish person (Louis Brandeis)<sup>82</sup> to the Supreme Court, his was a particularly harsh period for “coloreds” in Washington.<sup>83</sup> In 1956, for example, scholar and civil rights advocate W.E.B. Dubois described the first Wilson term and its “attempted Jim Crow legislation and discrimination in the civil service.”<sup>84</sup>

Additional factors reflecting the later Progressive era (1897-1921) included a huge immigrant population from war-ravaged Europe, U.S. entry into World War I in 1917 (Wilson had sought to avoid that), prohibition of alcoholic beverages (he wisely thought it unenforceable), the women’s suffrage movement (received only tepid presidential

---

<sup>82</sup> As head of Princeton University, the devout Presbyterian had appointed the first Jewish person and first Catholic to the university faculty. Brandeis, by the way, waited more than four months to be confirmed.

<sup>83</sup> Longtime D.C. resident Percy W. (1900-1991) worked for a federal agency for some fifty years. (He preferred to be anonymous.) Also a native Virginian, like the president, he stated in a 1990 interview with this paper’s author that the Wilson era in Washington was “the worst of them all for us Negroes.” His remarks are echoed by historians, including J.M. Cooper; Mark Ellis (article in *Journal of American History*, vol. 79, no.1, 1 June, 1992); and Jay Winter and David Levering Lewis, who were interviewed for the PBS “American Experience” program on Wilson in 2001.

<sup>84</sup> “Why I Won’t Vote,” *The Nation*, 20 Oct. 1956. In 2015, Princeton University students protested the way that university honors its former president. See “The Racist Legacy of Woodrow Wilson.” *The Atlantic* magazine, 27 Nov., 2015, at: [www.theatlantic.com/politics/archive/2015/11/wilson-legacy-racism/417549](http://www.theatlantic.com/politics/archive/2015/11/wilson-legacy-racism/417549)

support), the rise of radio and long-distance telephone service, and social customs that included little or no communication about illness. Another custom was the expectation then (and even now, to a limited degree) that a period of mourning—usually a year or more—should follow the death of a spouse. That dictum very much affected Woodrow Wilson four years before his serious illness. Ellen, his spouse of almost three decades and mother of their three daughters, died of Bright’s disease <sup>85</sup> in August 1914. Several months later, the grieving, lonely widower was smitten by a bold, independent widow, Edith Bolling Galt.<sup>86</sup> A newspaper notice and gossipmongers forced these two to suspend a budding courtship. With a national election coming up, the appearance of respectability was critical. Thus, the couple could not become formally engaged until an acceptable amount of time had elapsed.<sup>10</sup> <sup>87</sup>

---

<sup>85</sup> President Chester A. Arthur also suffered from this kidney disorder, although he would not admit it. (See “Presidential Precedents” section above.)

<sup>86</sup> Galt, a wealthy widow, liked politics; the demure and private Ellen did not. Edith was also cosmopolitan, attractive, and seventeen years younger than her ardent suitor. See Kristie Miller, *Ellen and Edith: Wilson’s First Ladies*, University of Kansas Press, 2010--especially Part One, Chapter 2 and Part Two, Chapter 3. Galt was also said to be the first woman to obtain a driver’s license in Washington, D.C., according to William Hazelgrove’s prolog in *Madam President*.

<sup>87</sup> This section on social restrictions in Wilsonian times is drawn from PBS’s 2001 “American Experience,” early pages of online transcript. Speakers in this segment include historians John Milton Cooper, Thomas Knock, and Betty Boyd Caroli.

---

Another significant reflection of social dynamics in the Wilson era lies in public expectations of politicians and the beginnings of a shift in how the U.S. leader's image is projected to the media and the public. Two common projections are presidential *inability* and *disability*. The former signifies a narrow, literal notion of bodily incapacity.<sup>88</sup> That insufficiency can be remedied by restoring or replacing the individual affected, so that the public can see physical proof that a crisis has ended.. Presidential disability suggests a more complex and medicalized situation, in which one is unable to function as expected. That description fits Woodrow Wilson immediately after his massive stroke, when no one knew if he could improve even as much as he later did. Yet his wife and doctor projected him to the public as still capable of serving in his high office.

A Google N-gram<sup>89</sup> shows that the United States has experienced a dramatic paradigm shift since the early 1900s. That shift is toward the medical disability projection and away from body-focused presidential inability. The Wilson period (1913-1921) is at the beginning of that shift; the year 1964 would mark a sustained spike upward for the disability measurement. The public began to focus on not just a normally functioning head of state restored from prior illness. The new model was a leader who

---

<sup>88</sup> An example would be when President George W. Bush (2000-2008) was twice under anesthesia for colonoscopies. He had (to his credit) earlier invoked 1967's Twenty-Fifth Amendment, and Vice-President Richard Cheney was in charge of the country for a few hours each time. An earlier case of presidential inability was Grover Cleveland's temporary medical absence in 1893, as described in chapter 2 above.

<sup>89</sup> Google N-gram on presidential inability and disability is at:  
[https://books.google.com/ngrams/graph?content=presidential+disability%2C+presidential+inability&year\\_start=1800&year\\_end=2000&corpus=15&smoothing=3&share=&direct\\_url=t1%3B%2Cpresidential%20disability%3B%2Cc0%3B.t1%3B%2Cpresidential%20inability%3B%2Cc0](https://books.google.com/ngrams/graph?content=presidential+disability%2C+presidential+inability&year_start=1800&year_end=2000&corpus=15&smoothing=3&share=&direct_url=t1%3B%2Cpresidential%20disability%3B%2Cc0%3B.t1%3B%2Cpresidential%20inability%3B%2Cc0)



also demonstrated the *capability* to handle major crises—for example, Wilson and the League of Nations struggle, FDR and the wartime Yalta conference, JFK and the Cuban missile standoff.

After his earlier, lesser strokes (largely before his presidency), Wilson had been able to carry on with seeming normalcy. But the 1919 event felled him almost completely. He was at first totally paralyzed on one side and had several other serious problems, including urinary sepsis, all rendering him fully incapable. That reality set in motion the wife-and-doctor cover-up and their attendant lies to the media and others. Over the next few weeks and months, some of his functions began to be partially restored—just enough to allow a White House projection to the world of Wilson’s body as recuperating steadily. By the time he left office two years later, the leader could be described as semi-capable at best, in this writer’s judgment: He used a cane for limited walking, had little stamina, was still experiencing partial paralysis, and spoke publicly for only short periods of time.

#### Conclusions on Wilson

President Wilson never fully recovered, but he did survive another five years. The man who had reintroduced a spoken State of the Union address, rather than a written document,<sup>90</sup> could deliver only a short message to the Congress in 1920. His health situation was becoming well known; yet he wistfully thought of being drafted for a third term if the convention process was locked, or even running again later. He died three years after leaving office, in February 1924, at age sixty-eight. Widow Edith Wilson, the

---

<sup>90</sup> The written State of the Union report began early in the new republic, after 1801.

ultimate caregiver and protector (even more so than Nancy Reagan was later said to be), stayed on in the nation's capital, living in their townhouse near several embassies, a fashionable part of the city. She died at eighty-nine in 1961, the first year of the Kennedy Administration. It was 28 December, her husband's birthday, and she was about to attend the dedication of the Wilson Bridge between Washington, DC and its Virginia suburbs.

Edith Wilson's zealous actions as an unofficial first woman president, presumably performed out of love for and loyalty to her stricken husband, made history. Historian Betty Boyd Caroli has observed that scholars are divided on how much this relationship was a great love affair and how much it was based on Edith's attraction to power. (See PBS "American Experience," 2001.) To her credit, the second Mrs. Wilson stayed with him after he left the White House until his death in 1924. She helped to care for a man whose personality changed dramatically as his body was wracked by diarrhea, urinary retention/sepsis, and other unaesthetic sequelae to his earlier physical trauma. Married for nine years, they had a short romance indeed.

Thomas Woodrow Wilson had encountered both triumph and defeat, even receiving a Nobel Peace Prize in 1919 (before his devastating stroke) for promoting the League of Nations. A year earlier, he had made the first official trip abroad by a U.S. president, attending the World War I Paris Peace Conference.<sup>91</sup> Only near the end did the onetime crusader acknowledge to family members that his doomed plan for world comity was not,

---

<sup>91</sup>In her book on this conference, historian Margaret MacMillan commented on Wilson's signs of illness even before his fall 1919 stroke. See *Paris 1919: Six Months That Changed the World*. Random House, 2003, pp. 489-491.

after all, God's designated task for him. Before then, Wilson's "southern Presbyterian Calvinism"<sup>92</sup> had long served to justify and support him in such a view.<sup>93</sup>

Of the three men examined in this paper, Wilson seems the most brilliant and most complex. Yet he lacked the personal gifts of Franklin Roosevelt, with his "first-class temperament,"<sup>94</sup> and the prince-charming appeal of John F. Kennedy. Such attributes might have mitigated the earlier president's oft-cited stubbornness, rigidity, and self-righteousness (the dark side of conviction). Those traits<sup>95</sup> have made many researchers all the more determined to diagnose and analyze Wilson,<sup>96</sup> and some of them have clearly overreached, as noted above.

Except for his last year and a half in office, the Wilson presidency is fairly well regarded by historians, from an early opus by Arthur Link<sup>97</sup> to the most recent tome by

---

<sup>92</sup> This label appears in Ross A. Kennedy, ed. *A Companion to Woodrow Wilson*. John Wiley and Sons, Ltd., 2013, chapter 2, on Wilson's religion.

<sup>93</sup> "American Experience," 2001, end of program transcript. One author has even written about his "faith-based foreign policy": M.D. Magee. *What the World Should Be: Woodrow Wilson and the Crafting of a Faith-Based Foreign Policy*. Baylor University Press, 2008.

<sup>94</sup> A description from Oliver Wendell Holmes, who also opined that FDR had a "second-class intellect." In Ghaemi, pp. 131, 290.

<sup>95</sup> These characteristics are generally cited in Wilson biographies, including a recent work covering twenty U.S. presidents: William E. Leuchtenburg. *The American President: From Teddy Roosevelt to Bill Clinton*. Oxford University Press, 2015, pp. 70-116 on Wilson.

<sup>96</sup> Even Sigmund Freud played a role in this exercise, cowriting a book with diplomat and Wilson foe William C. Bullitt: *Woodrow Wilson: A Psychological Study*. Transaction Publishers, 1998 paperback. This contribution is not generally well regarded by scholars. Freud apparently never encountered Wilson, basing his information only on what Bullitt told him (per Leuchtenburg, 70).

<sup>97</sup> *Woodrow Wilson and the Progressive Era, 1910-1917*. Harper and Brothers, 1954. This work covered Wilson's first administration. Some observers think that Link did not adequately reflect what we now view as Wilson's egregious views on people of color.

A. Scott Berg.<sup>98</sup> He changed the nation domestically by creating the Federal Reserve and the first permanent federal income tax, along with Progressive Era programs that prefigured FDR's New Deal. However, he also presided over a horrific racial climate in the nation's capital. He led the United States through World War I, despite his efforts to remain out of it. Our twenty-eighth leader has been criticized for sharing confidential government information with both wives—i.e., even before he was gravely ill. Yet he is also remembered for his powerful rhetoric (“making the world safe for democracy”) and his vision of international cooperation, a goal that the United Nations struggles with today. The man often described as supercilious<sup>99</sup> was also a passionate suitor, as seen in letters he wrote to Edith in midlife. He was fervently idealistic, often to the point of not ably negotiating a point of contention (as with Congress and the League of Nations dispute). In examining this contradictory man under a modern microscope, it is easy to be judgmental about his negatives and allow them to outweigh the positives. However, many historians would warn against that counterfactual approach.

---

<sup>98</sup> See Berg's views earlier in this chapter. Another interesting observation, by historian Victoria Bissell Brown, is as follows: “His greatest contradiction...is that his rhetoric was pro-democratic, but his behavior was often very paternalistic, very controlling,...[with] very little patience for the messiness of democracy.” Brown was interviewed in the 2001 “American Experience” program on Wilson.

<sup>99</sup> Search Google for “Wilson + supercilious” to see a number of links.

## Chapter 4

### Franklin D. Roosevelt: A Twofold Cover-Up

The thirty-second president—the only one to serve twelve years in office—had two covert health episodes while leading the nation through economic depression and World War II. The first one was a half-truth about his generally known attack of poliomyelitis<sup>100</sup> at age 39; it had lifetime effects, including pain, but they were unacknowledged. Instead, he was portrayed publicly as one who not only survived but conquered the disease. Whether or not the illness or its long-term consequences stunted FDR's leadership is explored here. The second illness incident involved a suppressed diagnosis of major infirmities in the spring of 1944, months before Roosevelt ran for and won an unprecedented fourth term in office. He died a few months after his historic inauguration. The implications of this cover-up are also assessed in this chapter.

Among the historians who have done valuable work in reconstructing FDR's health record and its effects are Robert Ferrell, Frank Tobin, Stanley Weintraub, and Allan Brinkley, as well as several scholars in the daily online History News Network, which culls articles from many sources. As with Wilson, various physicians have been important in this revised history, notably Roosevelt cardiologist Howard Bruenn and his revealing 1940s report on his patient. (The last is one of several “found” items cited

---

<sup>100</sup> One group of medical experts was not convinced that FDR had polio, in part because he was infected long after the usual time (childhood, young adulthood). A suggested alternative was the auto-immune syndrome Guillain-Barré. See Armond S. Goldman, M.D., *et al.*, “What was the cause of Franklin Delano Roosevelt's paralytic illness?” *Journal of Medical Biography* (Royal Society of Medicine) 2003, 11:4, 232-240. This team, which included a biostatistician, used Bayesian analysis to determine disease likelihoods. However, because its theory was not widely accepted and because FDR is so strongly identified with polio, that is the disease discussed here.

here—formerly lost or hidden documents. Other physician reports, mostly on FDR and JFK, were destroyed.)

In her 1994 work, another valued historian, Doris Kearns Goodwin, referred to a “veil of silence” on the extent of FDR’s paralysis. The veil was an unacknowledged agreement on such secrecy by the White House, journalists, and even the general public to some degree.<sup>101</sup> Goodwin’s fellow historian and JFK author Robert Dallek agreed that “the public just didn’t want to know<sup>102</sup> about his physical limitations....so there [was] a kind of collaboration between presidents and the public in muting these ailments.”<sup>103</sup> That was the 1930s and 1940s version of spin on the story. There was no TV yet, and people relied mainly on radio, the print press, and movie newsreels.

Two scholars in speech and communications, Davis W. Houck and Amos Kiewe, focused on the oratorical and other skills that Roosevelt and his handlers deployed to turn his supposed mastery over polio into a political asset. These authors showed how FDR’s people managed—through action-based language in speeches, photos, and campaign songs—to slant political campaigns to his advantage.<sup>104</sup> His handlers even brazenly

---

<sup>101</sup> Goodwin, *No Ordinary Time: Franklin and Eleanor Roosevelt: The Home Front in World War II*. Simon and Schuster paperback, 1994, p. 587.

<sup>102</sup> Contrast that attitude with the populace today, which seems voracious to know about contemporary famous people.

<sup>103</sup> Dallek in a telephone interview of 18 Nov., 2002 with Sage Stossel of *Atlantic Unbound*, online site of *The Atlantic* magazine. This reference to FDR was part of a larger discussion on Dallek’s research into JFK’s health problems (see next chapter). At:

[www.theatlantic.com/past/docs/unbound/interviews/int2002-11-18.htm](http://www.theatlantic.com/past/docs/unbound/interviews/int2002-11-18.htm)

<sup>104</sup> *FDR’s Body Politics: The Rhetoric of Disability*. Texas A&M University Press, 2003, pp. 4, 9.

linked rivals to their own illnesses or weaknesses, foreshadowing a campaign tactic that John F. Kennedy would adapt with zest and duplicity in 1960.<sup>105</sup> These techniques led to new ways of narrating the history of his times. However, the strong, vigorous figure that FDR projected did not match reality.

*Minimizing Polio's Effects.* The fact that Roosevelt had become infected in 1921—there was no vaccine until the 1950s—was well covered by newspapers and therefore not a secret. However, the long-term consequences, including pain from post-polio syndrome,<sup>106</sup> were never widely known. The disease paralyzed both limbs fully; they became shrunken, as seen in images of him in a swim suit. His now six-foot frame (he lost a couple of inches) was held up by custom-made leg braces, and he was often holding someone's arm for balance, as falling was a constant danger. To hide the braces—about ten pounds of steel—they were painted black and his trouser legs were cut extra long to cover them,<sup>107</sup> even when he manually lifted and crossed one leg over the other in a typical seated position. Lecterns usually had extra draping, to make less visible

---

<sup>105</sup> JFK's intimations were loaded with unflattering comparisons: new versus old, youth and vigor versus aging, movement versus stasis, future versus past. The target was not his rival for the presidency, Richard Nixon, but the sitting commander-in-chief, Dwight Eisenhower. "Ike" was two decades older than JFK and had serious health problems during his years as president.

<sup>106</sup> One physician who believed FDR had that syndrome was Henry Holland, writing in 1999 on a PPS email list. At: [www.skally.net/ppsc/fdr.html](http://www.skally.net/ppsc/fdr.html)/ Pain is also a topic in Eleanor Roosevelt's oral accounts, a key source for "FDR – A Presidency Revealed," which premiered on the History Channel 17 and 18 April, 2005. Featured there are never-seen footage and first-hand family interviews. Polio discussions are in Part 1. At: [www.Prnnewswire.com/news-releases/the-history-channel-presents-fdr-a-presidency-revealed /](http://www.Prnnewswire.com/news-releases/the-history-channel-presents-fdr-a-presidency-revealed/)

<sup>107</sup> According to Alan Brinkley. *Franklin Delano Roosevelt*. Oxford University Press and American Council of Learned Societies, 2010, p. 17.

the leader's adaptive stance: holding onto the lectern sides. He also used head more than hand gestures.

Most biographers describe how FDR's entourage sought to prevent news cameras from exposing his limited mobility and need for support while standing. Forty years or so before disability legislation made most U.S. buildings handicapped accessible, he was driven or carried inside through a garage, basement, or other inconspicuous entry. Sometimes an aggressive photographer's film or equipment was destroyed, but in general the press went along with not describing or showing this ritual. There is even a reported incident of Roosevelt falling quite publicly while preparing to give a speech. It was not photographed or reported, according to Crispell and Gomez, chapter 3. Imagine that occurring today, with hordes of personal cell phones serving as another form of media: "personal journalism."<sup>108</sup>

Note, however, a minority viewpoint on the secrecy issue. Some authors stress that the president's polio was occasionally mentioned in newspapers, well known, and not much of an issue as time passed. (See especially the bibliography entries for historian Matthew Pressman's 2013 essay and Christopher Clausen's *Wilson Quarterly* article in 2005.) It is true that the disability was not a total-blackout news item, particularly in the Washington, DC area. What were *not* generally understood or known to the American public and even most of the political *cognoscenti* were these realities: Polio can have

---

<sup>108</sup> A *Washington Post* column of 20 Nov., 2016 spoke of "virtual newsrooms of one that can communicate with countless others through tweets, retweets, and created buzz...." See Kathleen Parker, "The biggest loser" (meaning the media after the election of Donald Trump), editorial page, A-19. Parker also attributed the media's current fragmentation to the digital revolution of the current century. Earlier, having only a few "trusted news sources" produced "common knowledge" that led to "common values."



lifelong effects and was not “beaten” by this individual. *He mastered himself and his responses, not the disability.*

*Various Takes on His Condition.* Several writers have described FDR’s disability in neutral, low-key, or even positive terms. Such approaches coincide with his own public posture as a survivor who did not dwell on his limitations. Family members and others close to him generally followed his lead when writing their own accounts. An example was his wife Eleanor. As a caregiver, notably during the fearful onset of the infection, she often chose to focus on net gains from the experience. In her autobiography, she described a play written for him as reflecting his “spiritual victory” over a crippling illness.<sup>109</sup> Labor Secretary Frances Perkins, the first woman to serve in a presidential cabinet, seems to have agreed that FDR’s personality was favorably altered by the health threat. She thought that he became more empathetic toward others, especially those facing sickness or economic disadvantage.<sup>110</sup> That concern was reflected in his many New Deal social programs to overcome the Great Depression of the 1930s. Moreover, he also became more charity oriented in his private life as well (see box below)

---

<sup>109</sup>*Autobiography of Eleanor Roosevelt*. Harper and Brothers paperback, 1961, p. 411. The play by Dore Schary and a later feature film were both called *Sunrise at Campobello*.

<sup>110</sup> Perkins. *The Roosevelt I Knew*. Viking Press, 1946, p. 3.

### FDR's Private Good Works

In 1927, he co-created a foundation to support the **Warm Springs, GA** hydrotherapy/rehab center. For two decades, he was a frequent visitor to its soothing hot springs. This was the only place where FDR had freedom to move about without prying eyes or even the accoutrements of being handicapped—crutches, wheelchairs, etc. (It was not unusual for patients to drag themselves from one building to another.)

In 1938, he helped start the **March of Dimes** fundraising group in the fight against polio, asking each child to donate a dime to the cause—hence, his profile on the U.S. dime.

*Sources:* March of Dimes and Warm Springs Internet home pages; PBS TV 2014 series, “The Roosevelts”; HBO feature film “Warm Springs,” filmed onsite, first aired April 2005

Several authors stressed conquering or triumphing. One finds titles/subtitles such as *A Good Fight, ...FDR's Conquest of Polio* (biographer Jean Gould, 1960); *...Triumph Over Disability* (Richard Goldberg, 1981); *The Man He Became...* (James Tobin, 2014) and “How Polio Helped Father” (daughter Anna’s article in the July 1949 issue of *Woman* magazine). In the 1920s, Dr. Rudolph Marx declared, in *The Health of the Presidents*, that being handicapped was a key contributor to making FDR a great man.<sup>111</sup> Similarly, in a manuscript discovered fifty years after it was written, U.S. Supreme Court justice Robert H. Jackson referred to his friend’s “mastery of his illness,” at least its psychological aspects.<sup>112</sup> Prominent historian Arthur Schlesinger, Jr. also slipped into triumph talk when he observed that Roosevelt’s “victory over polio” confirmed his

---

<sup>111</sup> Marx. New York: Andesite Press/Barnes and Noble, 2015, p. 18 (reproduction of a book first published in the early 1920s).

<sup>112</sup> Robert H. Jackson, *That Man: An Insider's Portrait of Franklin D. Roosevelt* (New York: Oxford Press, 2003), 12.

natural optimism.<sup>113</sup> Some of these works even imply that he would never have become who he was *without* his handicap. Polio as savior: It seems an odd coupling until one thinks of other maladies—notably, tuberculosis and now Alzheimer’s disease—that have been romanticized, demonized, or made into metaphor.<sup>114</sup>

Another group of narrators was more nuanced than those above as regards the effects of being “crippled.”<sup>115</sup> The eminent historian James MacGregor Burns, for example, wrote perceptively in 1956 about FDR’s life being compartmentalized; Burns saw the battle against infantile paralysis as only one of the leader’s multiple roles.<sup>116</sup> Jean Edward Smith, author of a 2007 biography, was also balanced in his discussion of polio. He agreed with others that Roosevelt was changed by that experience; however, Smith attributed his many visits to Warm Springs, Georgia as being even more transforming, both personally and politically. It was in that region that the pampered patrician and only

---

<sup>113</sup> Arthur M. Schlesinger, Jr., *The Age of Roosevelt: Crisis of the Old Order, 1919-1933*. Vol. 1, Houghton Mifflin Co., 2003, Mariner Edition, p. 408.

<sup>114</sup> The classic study on this phenomenon is Susan Sontag’s *Illness as Metaphor* (1978). See chapter 1 above for examples of romanticizing TB. The theme of becoming a better person through battling illness appears often in newspaper health sections. Personal-change examples other than FDR include former Alabama Governor George Wallace, a segregationist, after he was paralyzed in a 1972 assassination attempt.

<sup>115</sup> Descriptors such as “afflicted/crippled/pitiful” and the like were typical lay terms before medical knowledge grew rapidly in the twentieth century and societal attitudes changed as well. However, historian James Tobin says he deliberately used “cripple” in his 2014 book on FDR because that was the prevalent word then. See *The Man He Became...*, Simon and Schuster paperback, p. 9.

<sup>116</sup> *Roosevelt: The Lion and the Fox* (Norwalk, CT: Easton Press, 1956), 474.

child—some would even say an extreme “mama’s boy”—first saw rural poverty and its attendant health problems.<sup>117</sup>

One historian took a different stance—that FDR’s early fight to recover “made him more self-centered than ever.”<sup>118</sup> Perhaps this is a fair judgment, since the onset of major physical trauma does make a person more focused on his or her every need. High emotions are especially likely in the initial recovery period, as one proceeds through the potential stages of grief and loss.<sup>119</sup> For FDR, however, even being self-centered early in his disability did not preclude his overall growth in empathy over time and his future actions to support research, treatment, and more. He “managed” his illness, in today’s parlance, not allowing it to prevent him from becoming a remarkable head of state.

*Special Themes.* Historian Frank Freidel wrote several works on Roosevelt. One of them, subtitled *The Ordeal*, ended with a concept that would be repeated in other biographies: a thematic link between the leader’s physical paralysis and the nation’s crippling economic condition during the Great Depression of the 1930s.<sup>120</sup> That link meant that FDR had to be seen as defeating his disability, just as the nation would eventually “get well” from the Depression. These variations on illness as metaphor sound like the stuff of literature, but

---

<sup>117</sup> Jean Edward Smith. *FDR.*, ix. The same would be said later about John F. Kennedy (see next chapter).

<sup>118</sup> Alan Brinkley, 2010, p. 17.

<sup>119</sup> Five possible stages were articulated by psychiatrist Elisabeth Kübler-Ross in her groundbreaking 1969 work, *On Death and Dying*. Mental health professionals later added two others steps in facing any major negative life change. For FDR, the denial stage was evidenced in the period when he was sure he would walk again. However, it is also true that a positive goal like that one was of benefit in his political life, which he resumed three years after being stricken.

<sup>120</sup> Frank Freidel. *Franklin D. Roosevelt: The Ordeal*. Little, Brown, & Co., 1954, p. 269.

they are also sociopolitical, in the sense that Americans are inspired by, and often vote for, perceived heroes and winners.<sup>121</sup>

Another message-oriented author was disability activist Hugh Gregory Gallagher in a 1985 contribution called *FDR's Splendid Deception*. The book cover features a rare photo of Roosevelt in a wheelchair. (See figure 2 at end of this chapter.) Himself a polio survivor, Gallagher countered earlier writers who stressed the ideas of triumph and the making of a great man. He joined them in expressing admiration for the way his subject handled disability but was convinced that the president had not fully beaten its source. Gallagher believed that, like other polio survivors, this one was dealing with the disease and its aftermath for his entire life.<sup>122</sup> This was true, but it is also the case that FDR managed his handicaps well, with no apparent diminishment of his ability to lead the nation. Gallagher's opus is now perceived by many as a pioneer work in the disability rights movement, a relatively new field of study creating its own branch of history.

A postscript on the subject of aftereffects from polio: In addressing the Congress after the Yalta conference in early 1945, FDR made what is thought to be his only public reference to the companions he had toted around for almost a quarter-century. Looking

---

<sup>121</sup> Note the reverse principle, too: that the state is healthy only if its ruler is also fit. This notion has been important in many cultures since antiquity. Recall that Julius Caesar purportedly had epilepsy and tried to hide it, since heads of state had to embody a society's strength and physical vigor.

<sup>122</sup> After-effects can include not only the pain of post-polio syndrome but also circulation issues and skin problems associated with immobility. FDR's ability to have sex was not affected. For more on Gallagher's views, see *FDR's Splendid Deception: The Moving Story of Roosevelt's Massive Disability—and the Intense Efforts to Conceal It from the Public* (New York: Dodd, Mead, 1985). Reprinted 1994 by Vandamere Press, Arlington, VA. Information above is from later edition, pp. 211-216.

extremely fatigued, he asked to remain seated while speaking, citing the weight of his leg braces.<sup>123</sup> A few weeks later, he was dead.

*Social Dynamics*. In the United States, poliomyelitis began around the turn of the century, with New York City experiencing a major wave in 1916. Five years later, when Roosevelt was stricken, politicians were not likely to admit being weakened by such a condition. Even its official name, infantile paralysis, could be embarrassing to a grown man. The public expected then that politicians at least *appear* to be robust, and communication about illness was still limited. Historian James Tobin tells of interviewing people from the 1930s and 1940s and asking them if they knew about FDR's polio. Some said they did know but forgot about it over time or "We knew, but the people didn't talk about it."<sup>124</sup> As pointed out by Clausen in the *Wilson Quarterly*, the virtues of that time included dignity, reserve, "suffering in silence," and "stoic observance of privacy." Moreover, the first rule of etiquette was "Don't stare."<sup>125</sup> Because of such behaviors, one now sees an Internet gallery with hundreds of images in which FDR is standing, swimming, bending, sitting on convertible back seats—all without obvious help, unless one looks closely for a telltale cane or helping hand. Yet very few representations

---

<sup>123</sup> See *New York Times* article of 2 March, 1945, covering FDR's report to Congress on the Crimea conference. Search on "Yalta" at *Times*' archive for that date. A newsreel of this speech is also available from the National Archives at: [www.nara.gov/](http://www.nara.gov/)

<sup>124</sup> Tobin, *The Man He Became*, p.8.

<sup>125</sup> Clausen, "FDR's Hidden Handicap." *Wilson Quarterly*, Summer 2005. Also at: [archive.wilsonquarterly.com/essays/fdrs-hidden-handicap](http://archive.wilsonquarterly.com/essays/fdrs-hidden-handicap)

purporting to depict him in a wheelchair are sharp and clear enough to allow a firm identification of their subject.

To sum up the polio discussion, this infectious disease did not significantly diminish Roosevelt's leadership abilities, although its lifetime effects were not publicly acknowledged. That secretiveness can be overlooked because it did not seem to cause any major damage to the nation. Nor did his handicaps take nearly as much government time, staff, and other expenses to accommodate as John Kennedy's many illnesses did. (See next chapter). That said, running for a fourth term with serious undisclosed illnesses was far more problematic.

#### Later Diseases: Falsehoods and Truths

In her 1994 work on Franklin and Eleanor, historian Doris Kearns Goodwin indicated that their only daughter, Anna, pushed for him to have a physical exam in March 1944. Because her father had lost almost twenty pounds and looked so unwell, Anna persuaded his chief physician, Admiral Ross McIntire, to arrange the checkup. The patient received a favorable report from a panel of esteemed doctors. However, the true findings were these: extremely high blood pressure, atherosclerosis, coronary artery disease with angina, and congestive heart failure. Yet Dr. McIntire—appointed by FDR, who did not initially know him well—assured reporters that his patient was fine. He also did not give the bad news to the family.<sup>126</sup>

This event took place just eight months before Roosevelt, then age sixty-two, won an unprecedented fourth term in office. The actual health findings were kept private for

---

<sup>126</sup> Goodwin, pp. 493, 497.

more than a quarter-century; the number of people involved in that cover-up is still in question. One undocumented rumor on the frightening results being hidden suggested that FDR might have known and then used his authority over the federal Office of Censorship to prevent any press coverage of his condition before the 1944 election. Another idea, floated by Dr. McIntire, was possible suppression by the FBI of the critical information.<sup>127</sup> The first suggestion sounds unlikely, since most scholars think that the patient did not read or ask about his medical findings and was told that all was well. So what motive would he have for stifling that information? As to the latter idea, it seems to the author of this paper that the lead doctor would have said or done anything to advance or protect himself. His own incomplete-looking 1946 book on treating FDR confirms such a suspicion: no bibliography, index, or photos. Add to that the coincidence of McIntire's case files on Roosevelt disappearing a year before the physician's book was published.

The truth did not emerge until 1970, when a crucial 1940s report from cardiologist Howard Bruenn was finally made public. His clinical notes revealed the true nature of Roosevelt's health situation.<sup>128</sup> Dr. Bruenn, who kept a diary on FDR's case, was a junior medical team member in the last year of the president's life. He apparently tried, with little success, to offset the overly positive and untrue reports made by team leader McIntire. Was he ineffectual because he was intimidated by the physician hierarchy? Or

---

<sup>127</sup> Harry Goldsmith, M.D. "Unanswered Mysteries in the Death of Franklin D. Roosevelt." *Surgery, Gynecology, and Obstetrics*, December 1979, 149:6, 899-908. Also available at PubMed: [www.ncbi.nlm.nih.gov/pubmed/388705](http://www.ncbi.nlm.nih.gov/pubmed/388705).

<sup>128</sup> Howard G. Bruenn, M.D. "Clinical Notes on the Illness and Death of President Franklin D. Roosevelt" *Annals of Internal Medicine* 1970, vol. 72, no. 5, pp. 79 ff.



was he part of a larger cover-up? The conspiracy-oriented authors cited here (for example, Dr. Goldsmith and the doctorzebra online site) tend to favor the latter notion, but their arguments are not fully convincing. In any event, it was Dr. Bruenn who was with his patient at the end and signed his death certificate.

Another defining moment for documents came in 1995, a quarter-century after the Bruenn findings came out. Release of the previously undiscovered papers of Margaret (Daisy) Suckley confirmed how serious FDR's late-life condition was. A distant cousin, she became one of his closest companions in his last years. Her valuable diary recounted in detail the ups and downs of his ills or well-being in the last years. Among her many recorded observations, Suckley mentioned her charge's continued cigarette smoking and reported that in November 1944, he spent time in a convertible during a pouring rain in New York City.<sup>129</sup> This cousin also wrote regular letters to daughter Anna about her father's condition.<sup>130</sup>

A third dramatic revelation came in spring 2011, when the Lahey Clinic in Massachusetts released a long-buried, 10 July, 1944 memo written by its founder, the eminent surgeon Frank Lahey. There, he wrote that after examining both the man and his records, this medical professional did not believe that Roosevelt would survive a fourth term. However, Lahey agreed to allow suppression of that assessment in the interest of wartime security. He had been part of the examining group that in March 1944 gave their

---

<sup>129</sup> See Geoffrey C., Ward, ed., *Closest Companions: The Unknown Story of the Intimate Friendship Between Franklin Roosevelt and Margaret Suckley* (Boston: Houghton Mifflin Co., 1995), 290, 361, 363.

<sup>130</sup> Eleanor Roosevelt was not closely involved in her husband's final sickness. By then, she had her own residence, and the two led mostly separate lives.

patient a clean bill of health, agreeing with Admiral McIntire's sunny assessment.<sup>131</sup> The July 1944 confidential memorandum was for the record, to protect Lahey's future reputation. The version of it that surfaced in 2011 was the Massachusetts clinic's copy; the original had gone to Dr. McIntire—he of the “disappeared” FDR files.<sup>132</sup> As for another important document, fortunately the state of Georgia had a copy of the official death certificate, signed by Dr. Bruenn. It recorded that no autopsy was done. (See “Primary Sources” in bibliography.) Worth recalling is that this health-challenged individual had earlier been examined by another multidocor panel for a different reason. A previous physical exam took place before his first term in 1933, when some doubted that a polio survivor could lead the nation. He passed that test too, but with much more legitimacy than in 1944.

Another fairly recent study of the later health problems is that of Stanley Weintraub. His 2012 work, *Final Victory*, describes Roosevelt's off-and-on small seizures and how

---

<sup>131</sup> Jennie Cohen, “Memo from 1944 Warned That FDR Would Likely Die in Office,” at: [www.history.com/news/memo-from-1944-warned-that-fdr-would-likely-die-in-office](http://www.history.com/news/memo-from-1944-warned-that-fdr-would-likely-die-in-office)

The full Lahey memo is on pages 205-206 of Harry S. Goldsmith, M.D., *A Conspiracy of Silence: The Health and Death of Franklin Roosevelt*. (Bloomington, IN: iUniverse, Inc., 2007, self-published paperback). It was this respected surgeon, medical historian, and inventor who tracked down the Lahey document, with considerable difficulty.

<sup>132</sup> According to a long, illuminating article by Dr. David Steinberg on “Dr. Lahey's Dilemma,” in the *Boston Globe* magazine of 29 May 2011, available at: [archive.boston.com/lifestyle/articles/2011/05/29](http://archive.boston.com/lifestyle/articles/2011/05/29)

he rebounded and then dismissed each incident as the “grippe.”<sup>133</sup> Labor Secretary Perkins had also observed that he often seemed to bounce back after seeming to be quite ill.<sup>134</sup> One wonders if this “recovery” behavior could have resulted from a certain treatment by Dr. McIntire. (See later text on his throat spray.) Weintraub suggests that the rigorous campaign of 1944 probably accelerated FDR’s demise. He also thought that FDR probably did not know the details of his prognosis either before or after his physical exam, since he was not one to question the caregivers.<sup>135</sup> (Not many people did so then.) Dr. Henry Holland, the expert on post-polio effects cited earlier, observed in 1999 that “He silently followed doctors’ orders...and did not become an inquisitive pursuer of medical knowledge, as he had done...following his polio event in 1921.”<sup>136</sup>

The medical men assigned to the president were not forthcoming with their patient. That was especially true of McIntire, an ear/nose/throat specialist who had served as Surgeon General of the Navy. He rarely even took his client’s blood pressure, according to Weintraub, and appears to have done little else—except frequently spray his patient’s

---

<sup>133</sup> *Final Victory: FDR’s Extraordinary World War II Presidential Campaign* (Boston: Da Capo Press, 2012), 2, 13. Also available is an audiotape of a Detroit radio station’s interview with Weintraub on 6 Nov., 2012, available at: [wdet.org/shows/craig-fahle-show/episode/stanley-weintraub-book-fdr-presidential-campaign](http://wdet.org/shows/craig-fahle-show/episode/stanley-weintraub-book-fdr-presidential-campaign)

<sup>134</sup> Perkins, “Last Months” section.

<sup>135</sup> One source alleges that: FDR never asked cardiologist Howard Bruenn a question during the thirteen months that the latter treated him. See [www.doctorzebra.com/prez/z-x32fdrk-g.htm#ref1](http://www.doctorzebra.com/prez/z-x32fdrk-g.htm#ref1)

<sup>136</sup> Holland, 18 Jan., 1999, “Post-Polio Medicine” e-mail list.

scratchy throat with a substance that contained adrenaline.<sup>137</sup> (Some thought it could even be a form of cocaine, which was used medicinally at the time.)<sup>138</sup>

Two other researchers, psychiatrist Jerrold Post and coauthor Robert Robins, were harsh in criticizing McIntire and could find no explanation for his neglectful actions. They were also somewhat critical of Dr. Bruenn for his junior-status reticence.<sup>139</sup> In addition, an Amazon page reviewer of McIntire's 1946 book, *White House Physician*, called it self-serving and deceitful," even repeating his former misstatements—e.g., that Roosevelt's "blood pressure was not alarming at any time" (McIntire, 329). In 2007, biographer Jean Edward Smith offered a more forgiving perspective on Dr. McIntire, indicating that his behavior was typical of the times regarding lack of candor about health matters, especially when the patient's social status called for a degree of deference.<sup>140</sup> To act otherwise was regarded as unseemly, a word not heard much in today's anything-goes society. Smith's rationale is hard for modern throats to swallow, although a similar view of 1940s medicine appeared earlier in an analysis by physician Hugh Evans.<sup>141</sup>

Reticence in communication characterized not only medical personnel but the press as well. True, rumors about FDR's decline were making the rounds but, as already noted, the media then did not publicize such matters. Weintraub confirmed that custom in a

---

<sup>137</sup> Weintraub, p. 11.

<sup>138</sup> History Channel. "A Presidency Revealed," 2015, Part 2

<sup>139</sup> Post and Robins, *When Illness Strikes... the Leader: The Dilemma of the Captive King*, Duke University Press, 1995, pp. 25-30.

<sup>140</sup> Smith, chap. 26, note 28.

<sup>141</sup> *The Hidden Campaign: FDR's Illness and the 1944 Election*. M.E. Sharpe, 2002), 61.

radio interview for his 2012 book, saying that “Journalists were far more reticent then.”<sup>142</sup> He also made a perceptive remark about radio itself, that all-important information source for the Roosevelt era: Unlike TV, according to Weintraub, the aural medium “permits your imagination to flow.”<sup>143</sup> Thus, listeners could imagine their commander-in-chief as he projected himself: vigorous, fit, up to the serious tasks at hand. He was anything but, in those final days.

Also worth noting are the rationales that FDR himself created for seeking additional terms in 1940 and 1944. Historian Richard Moe has spoken about the president’s ambivalence toward even a third term;<sup>144</sup> Matthew Dallek (political historian and son of Robert Dallek) focuses on both the third and last races. In a 2012 journal article,<sup>145</sup> the younger Dallek cites a letter written fifty years ago, lost until recently, and reprinted in a book by FDR friend Robert Jackson.<sup>146</sup> In that letter, Roosevelt spoke of feeling an ethical imperative not to allow Republican Wendell Willkie to win, largely because of his

---

<sup>142</sup> Robert Dallek says the same is true for historians’ interest in presidential private lives, a focus that began to grow in the 1970s. As he put in an online interview, “...a lot of serious wrongdoing by public figures has come to light in recent years, which has fanned the flames” [of historians’ interest.]” See *Atlantic Unbound* URL in bibliography (under Dallek).

<sup>143</sup> Weintraub radio interview, 6 Nov., 2002 (audiotape).

<sup>144</sup> Moe. *Roosevelt’s Second Act: The Election of 1940 and the Politics of War*. Oxford University Press, 2013, chapter 6: “A Year of Consequence (1940).

<sup>145</sup> M. Dallek. “Franklin Delano Roosevelt—Four-Term President—and the Election of 1944.” *History Now* (Journal of the Gilder Lehrman Institute), vol. 33, Fall 2012, at: [gilderlehrman.org/history-by-era/world-war-ii/essays/franklin/delano/roosevelt—four-term-president—and-election-1944](http://gilderlehrman.org/history-by-era/world-war-ii/essays/franklin/delano/roosevelt—four-term-president—and-election-1944)

<sup>146</sup> Jackson, *That Man*:... p. 45. This 2003 book, edited by John Q. Barnett, is based on material found some fifty years after it was written.

alleged lack of foreign policy experience. As for 1944, the leader's reason for staying on then was the urgent need to defeat Hitler and end the war. In both cases, the theme of feeling indispensable again arises.

### Conclusions on FDR

So should he have run that fourth time? By then, Roosevelt must have sensed that he was quite ill. At the 1945 Yalta conference, Churchill medic Lord Moran (Sir Charles Wilson) noticed his deterioration, saying: "I doubt whether he is fit for the job here,..."<sup>147</sup> However, as historian Weintraub pointed out in his radio interview, FDR dominated the Democratic party for so long that it had no strong candidate to put forward in 1944.<sup>148</sup> Even so, this president was physically not up to the job at that point. Americans saw the newspaper images of how ill their chief looked (see figure 3 at end of chapter), but they did not know (or wish to know?) the full truth, or they chose not to change leaders in a war period.<sup>149</sup> He lived only a few months after being inaugurated. Some twenty years

---

<sup>147</sup> Quoted by Robert Gilbert in 2014 special issue of *Politics and the Life Sciences*, vol. 33, no. 2, pp. 2-10. Ironically, Churchill would suffer a serious stroke eight years later—and keep it a secret from the world as he recuperated at his country estate. See public TV film "Churchill's Secret" at: [www.pbs.org/wgbh/masterpiece/programs/series/churchills-secret/](http://www.pbs.org/wgbh/masterpiece/programs/series/churchills-secret/)

<sup>148</sup> Weintraub interview (audiotape). Note too that the Republican opponent, Tom Dewey, did not specifically mention FDR's health during the campaign, according to Crispell and Gomez, p. 108. Maybe the Republican was that sure of winning the election, but his behavior is nonetheless ironic, in view of FDR's own use of health as a campaign weapon in his early days.

<sup>149</sup> His official campaign poster in 1944 shows a grim-looking Uncle Sam pointing a finger and saying: "I WANT YOU, F.D.R. STAY AND FINISH THE JOB!" A head shot of FDR on the poster, in which he looks serious but handsome, mature yet strong, is from earlier in his life. See this visual at History News Network of 29 June, 2016, story on the "Psychology of Campaign Signs." Available at: [www.historynewsnetwork.org/article/163225/](http://www.historynewsnetwork.org/article/163225/)

later, the Twenty-Fifth Amendment to the U.S. constitution would limit the number of presidential terms so that a third or fourth one could not occur.

As described earlier, Roosevelt's polio and its aftermath often received neutral or even positive commentary in writings on FDR, especially since there is no strong evidence that these experiences negatively affected his job ability. However, his run for a fourth term while struggling with major diseases produced a strain of unsympathetic responses, once that information was exposed. Several works thereafter were opposites of the polio triumph literature—for example, *Hidden Illness in the White House*, *A Conspiracy of Silence*, *The Dying President*, and *FDR's Deadly Secret* (which even speculated about melanoma).

The most recent perspective on this president's last years is historian Joseph Lelyveld's *Final Battle* (2016), in which the author seems to favor the idea of FDR as an indispensable leader, even in 1944. In a lengthy *Washington Post* review of this book, historian Alan Brinkley refers to *Final Battle* as a "psychologically intense analysis" of FDR from 1943 through early 1945. Brinkley sees the book's main concern as determining how such a sick man made it through a hectic and critical time. Like historian James MacGregor Burns much earlier (who saw Roosevelt as compartmentalized), Lelyveld speaks of his subject's many faces, some of them contradictory: self-centered and humanitarian, tired but restless, charming yet crafty.<sup>150</sup>

---

<sup>150</sup> The *Post*'s "Book World" review by historian Brinkley appeared on 18 Sept., 2016, at B-7. The nearly full-page story includes the iconic photo of the "Big Three" leaders at Yalta, with a clearly ill Roosevelt seated between Churchill and Stalin. Both FDR and Churchill appear to be holding their smoking implements, as if ready to light up.

*Criticism.* Franklin D. Roosevelt has been much accused or criticized for many actions and omissions during his uniquely long term. Among the charges against him are excessive use of executive power, unfair internment of Japanese Americans during World War II, not doing enough to help wartime Jewish refugees, trying to “pack” the Supreme Court with additional *simpatico* judges, not fully briefing his new lieutenant Harry Truman on the atomic bomb project, and even being a warmonger who engineered U.S. entry into World War II.<sup>151</sup> In twelve years, one would be expected to build up a long list of complaints. Yet, whatever brickbats have been hurled both then and since, this commanding historical character still retains a hold on the American mind. Granted, young people today have a fuzzy image of him, and even those old enough to recall FDR probably do not know the full extent of his well-concealed health history.

In retrospect, the partial secrecy about his polio now seems relatively harmless, even understandable, and easy to let pass now—much like Grover Cleveland’s hidden cancer surgery in 1893. As noted before, infantile paralysis and its aftereffects did not appear to affect Roosevelt’s leadership significantly. But the cover-up of more serious illnesses in a war period was much more questionable. One man, Dr. Bruenn, later revealed key documentation on those infirmities, whereas an earlier doctor (McIntire) was the primary instigator of many falsehoods about them. The latter can be held as responsible as, or more so, than his passive client was, yet McIntyre was not alone. As seen above in the Leahy Clinic story, other medical men involved with this patient seemed more concerned about their own reputations than caring for a terribly sick human being.

---

<sup>151</sup> A list of several books that are critical of FDR can be found near the end of: [http://en.wikipedia.org/wiki/Franklin\\_D.\\_Roosevelt/](http://en.wikipedia.org/wiki/Franklin_D._Roosevelt/)



The most upsetting discovery of all is that the president of the United States probably did not receive, from any of his professional caregivers, the full advocacy he needed and deserved. Perhaps he would not have experienced a long life anyway, but the secrecy surrounding his treatment now looks to have produced little if any benefit to him. The long-serving head of state died soon into his last term of office and turned out to be not indispensable after all. A little known and once dismissed successor, Harry Truman, was surprisingly competent in filling his predecessor's large shoes.<sup>152</sup> In addition, scholars have been able to assess Roosevelt's health in depth during the last half-century, producing important historical and rhetorical/media analyses. Note that nearly all of the lost documents found later and cited in this thesis relate to FDR.<sup>153</sup> His maladies are secret no more, and historiography is the better for that uncovering.

---

<sup>152</sup> He was also opinionated about FDR's fourth run for office, saying "No greater disservice was ever perpetrated on the American people...." See Anthony Clark, "Newly Discovered Document Reveals What Truman Thought About FDR Running for a Fourth Term." HNN, 1 Oct., 2013, at: <http://hnn.us/article/153453#sthash.vqhNVzT3> / This site features a facsimile of the Truman's 1956 note. Its strong language sounds much like that of historian John Milton Cooper, lambasting Woodrow Wilson's stroke cover-up. (See chapter 3, "Historians and Others Weigh In.")

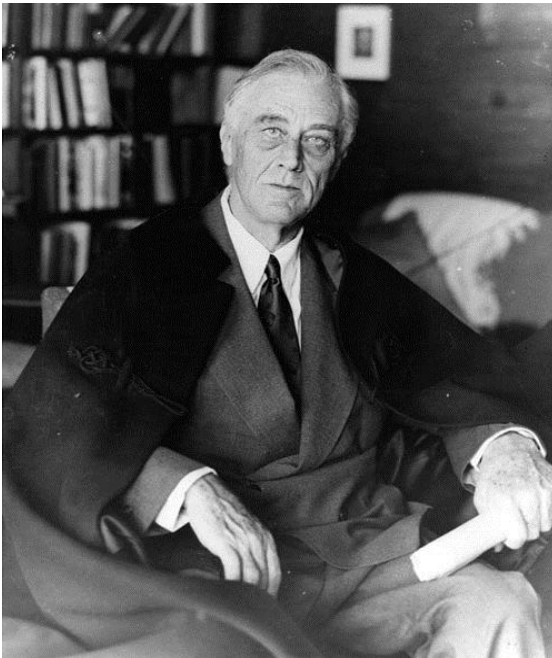
<sup>153</sup> All are from the 1940s: the Lahey Clinic report, Daisy Suckley papers, Judge Robert Jackson's letter from FDR, Truman's handwritten note on FDR's fourth run, and Dr. Bruenn's 1970 issuance of a key 1940s medical report. Only the Bruenn report was not "lost" but instead suppressed for a quarter-century.



**Fig. 1:** Children with polio in iron lungs, 1950s  
(*Internet stock photo*)



**Fig. 2:** Rare photo of FDR in a wheelchair  
(*FDR Library, by M. Suckley, 1941*)



**Fig. 3:** Franklin D. Roosevelt before his death in April 1945

*(Internet stock photo)*

## Chapter 5

### John F. Kennedy: Prisoner of Illness

In some ways, the early 1960s were as momentous as the turning of a century. So many exciting new events were in motion in the United States: the space race (a paramilitary effort to best the U.S.S.R.); growing fissures in the institution of segregation; the rise of TV as a cultural force; rumblings of a second feminist movement to come; and a new U.S. president who was the first Catholic to hold that seat.<sup>154</sup> But he wasn't all that he seemed. Despite his youth (elected at forty-three), John F. Kennedy ("Jack" or JFK) had multiple health concerns, some serious, long before and during his short time in office: 20 January, 1961 to 22 November, 1963. However, there was very little public information about any of this. Only his severe back difficulties were openly acknowledged; those were attributed to sports and war injuries that in truth exacerbated a much earlier condition.

A twenty-first century scholar who has greatly advanced understanding of JFK's diffused illness experiences is historian Robert Dallek, the first to see Kennedy's medical data when they were released to the public in 2002. His book is revealing and his overall judgments controversial, as seen in challenges presented below by this thesis author. Other key Kennedy scholars and works critiqued here include Theodore White's *Making of the President*, 1960; historian Arthur Schlesinger's overly positive works; political

---

<sup>154</sup> On the dark side of the ledger, the Vietnam War began in 1962; Communist Cuba twice became a major U.S. focus; and Rachel Carson warned about the environment in her book *Silent Spring*. Who could imagine then that before the sixties ended, four U.S. leaders would be assassinated—one of them that forerunner president? (The others were his brother Robert, the Rev. Martin Luther King, and Malcolm X.)

journalist Richard Reeves's tough-minded views; two "American Experience" television programs, and psychiatrist Nassir Ghaemi's examination of JFK's different health regimens. It is noteworthy that for close to forty years after JFK's death, biographers did not have access to key health records and could write about only the limited information already known or suspected. One researcher said in 1983 that "dealing with the Kennedy medical history is...like trying to uncover aspects of vital national security operations."<sup>155</sup> A decade later, historian James N. Giglio (another key source for this chapter) pointed out that the Kennedy Library in Boston was then restricting thirty to forty percent of its holdings.<sup>156</sup>

"So far as we have been able to determine, Kennedy was in relatively good health throughout his...term in office." That was the 1988 finding of M.D. Kenneth Crispell and coauthor Carlos Gomez in *Hidden Illness in the White House*. This book, by an endocrinologist and a public policy fellow, focused mainly on their subject's rumored adrenal disease, the limited records then available on his fitness, and the role of physicians in hiding medical histories for politicians.<sup>157</sup> Much of the data for Kennedy was opened in 2002; the person first given access was historian Robert Dallek. He had written before on this and other figures in U.S. history, but his late 2002 preview article in *The Atlantic* and soon-to-follow book in 2003 would attract the most attention. Dallek

---

<sup>155</sup> Historian Herbert Parmet, cited in Robert Dallek. "The Medical Ordeals of JFK." *The Atlantic*, vol. 29. No. 5, 1 Dec., 2002, pp. 49, 50.

<sup>156</sup> Giglio. "Past Frustrations and New Opportunities: Researching the Kennedy Presidency at the Kennedy Library." *Presidential Studies Quarterly*, vol. 22, no.2, spring 1992, pp. 371 ff.

<sup>157</sup> Crispell and Gomez. Duke University Press, chapter 5, pp. 160-202.

had received permission to review the president's health materials from the three-man committee controlling those records in the Kennedy Library. He has repeatedly stated that there were no preconditions on what he wrote. This revealing but ultimately favorable account included theretofore unknown medical specifics from 1955 to 1963.<sup>158</sup>

Dallek also has indicated <sup>159</sup> that the items he examined onsite—along with a physician who accompanied him, as the library required<sup>160</sup>—mainly consisted of original documents from White House chief physician Janet Travell, the first woman to hold that position. The content was more than surprising to both the historian and his associate, Dr. Jeffrey Kelman. However, what they saw did not constitute a complete record, since Travell was one of several JFK doctors, official and not, competing and often conflicting.<sup>161</sup> Even so, the two researchers were faced with a trove of revelations.

---

<sup>158</sup> Robert Dallek. *An Unfinished Life: John F. Kennedy, 1917-1963*, Little, Brown and Co., 2003, paperback 2004. In all Dallek citations throughout this paper, note distinctions between his book's 2003 hardback, the 2004 paperback edition, the *Atlantic* magazine article (print and online), and *Atlantic Unbound* online. All are listed in the bibliography below.

<sup>159</sup> Health details in this section are largely from Dallek's book-promotion interviews with two online sites: *Atlantic Unbound* and the History News Network (HNN). Citations are as follows: (1) Sage Stossel, telephone interview with Dallek, 18 Nov., 2002 at: [www.theatlantic.com/past/docs/unbound/interviews/int2002-11-18.htm/](http://www.theatlantic.com/past/docs/unbound/interviews/int2002-11-18.htm/) and (2)

Richard Shenkman, HNN editor, "Interview with Bob Dallek." 27 Nov., 2002, at: <http://hnn.org/article/1131>

<sup>160</sup> Another Kennedy Library rule for the JFK medical files was no photocopying.

<sup>161</sup> One source avers that Kennedy's treatment regimen was "better regulated" by mid-1962. See Nassir Ghaemi. *A First-Rate Madness*. Penguin Press, 2011, chapter 12, especially p. 186. By that year, another doctor, Admiral George Burkley, had become a far more dominant player than Dr. Travell was. Burkley's records mysteriously disappeared later (like those of FDR chief physician Dr. McIntire). What Robert Dallek used for his book was mainly Travell material.

## Findings and Reactions

We now know that Kennedy had seven childhood ailments, starting with a serious case of scarlet fever when he was three years old.<sup>162</sup> From age thirteen onward, he experienced severe abdominal pains and colitis (now called irritable bowel syndrome), moving on to other ills, back surgeries,<sup>163</sup> and a diagnosis of Addison's (adrenal) disease at age thirty.<sup>164</sup> His brother Robert joked that if a mosquito landed on Jack, the insect would die.<sup>165</sup> More seriously, from May 1955 until October 1957, he was hospitalized nine times for a total of forty-five days. Despite three back operations,<sup>166</sup> he was in near-constant pain for the rest of his life.

As president for almost three years, JFK took an array of oral, injected, or implanted medications for the adrenal disorder and ten or so other conditions that had developed over the years. These included severe back osteoporosis (possibly from incorrect

---

<sup>162</sup> The chronological information is from Dallek associate Dr. Kelman in an interview with Katie Couric on the "NBC Today" program, 18 Nov., 2002. Another source on childhood and later sickness is James Giglio. "Growing Up Kennedy: The Role of Medical Ailments in the Life of JFK, 1920-1957." *Journal of Family History*, vol. 31, no. 4, Oct. 2006, pp. 358-385.

<sup>163</sup> One of those surgeries took place in June 1944 at the Leahy Clinic in Boston, where Franklin Roosevelt had been sent years earlier.

<sup>164</sup> Other than sister Eunice being diagnosed with Addison's disease, none of JFK's eight siblings seems to have had many physical maladies as children or adults (as far as we know). John was the sickly one; sister Rosemary (born a year after him) was the "mental case" in the family whose behavior became problematic. As an adult, she was lobotomized and sent to live a long life in a nursing facility run by nuns.

<sup>165</sup> Ghaemi, p. 148. Several other writers have also cited this remark.

<sup>166</sup> In one of these surgeries, Kennedy almost died (he received the last rites of the Catholic Church). As he recuperated, he worked on *Profiles in Courage*, with considerable help from speechwriter Ted Sorensen and others. The book, published in 1956, won a Pulitzer Prize.



dispensing of steroids in the late 1930s), very limited range of motion, colitis, prostatitis, urethritis,<sup>167</sup> sleep difficulties, dangerously high cholesterol (410 in one reading),<sup>168</sup> and various infections that were often medicine-related side effects. Dr. Travell also discovered that one of his legs was shorter than the other, which added to his back distress.<sup>169</sup> That problem was corrected with a heel lift devised by the doctor; she also recommended, for his back, the rocking chair seen in many photos.<sup>170</sup>

Among the pharmaceuticals administered to this healthy-looking young man were antispasmodics for the bowel, muscle relaxers, codeine, a sleep inducer, a barbiturate, testosterone, and more.<sup>171</sup> During 1961 and part of 1962, Dr. Travell gave Novocain® injections for back pain (seven or eight a day, according to Dallek's colleague, Dr. Kelman). Along with the regular White House medical staff, five specialists served him:

---

<sup>167</sup> Dallek does not say that JFK had venereal disease, as some earlier biographers have suggested. Instead, his 2003 book discreetly states, at p. 123, that Kennedy had urethritis dating possibly from sexual activity in his college days. The original problem apparently was not addressed, which left Kennedy with a chronic urinary condition.

<sup>168</sup> Kelman, "Today," 18 Nov., 2002.

<sup>169</sup> Improperly administered steroids, given to Kennedy from boyhood on (before physicians learned to calibrate these potent substances), probably caused osteoporosis of the lower back. Reported in "JFK," an episode of "American Experience," public TV program produced 2013, at: [www.pbs.org/wgbh/americanexperience/films/jfk/](http://www.pbs.org/wgbh/americanexperience/films/jfk/). However, that diagnosis is disputed by historian James Giglio and physician Bert Park. (See discussion near end of this chapter.)

<sup>170</sup> Information on Dr. Travell's treatments, including the heel lift and rocking chair, is from Erin McCloskey. "Her Spirit and Work Will Live On." *Journal of Kinesiology and Kinesiology Medicine*, vol. 13, no. 8, Spring 2002. This article is also at: [www.janettravellmd.com/articles-about-janet-travell/](http://www.janettravellmd.com/articles-about-janet-travell/)

<sup>171</sup> Kelman, interview on PBS "NewsHour," 18 Nov., 2002.

an allergist, endocrinologist, gastroenterologist, orthopedist, and urologist.<sup>172</sup> Historian Dallek also noted, in a telephone interview of mid-November 2002, that Kennedy was secretive about taking his medicines, shots, etc. and avoided being seen with doctors.<sup>173</sup> Finally, as with FDR, stairs were a problem for JFK, who sometimes used a mechanical lift onto airplanes.

Along with the services noted above, a sideline player known to the White House entourage as “Dr. Feelgood” prescribed stimulants.<sup>174</sup> Max Jacobson had fled Nazi Germany in 1936 and later “treated” many other celebrities, including singer Elvis Presley and actress Marilyn Monroe. In a November 1961 letter to the president, New York endocrinologist Eugene Cohen warned against Jacobson’s amphetamines. In addition, there were rumors of criticism by Dr. Cohen and others of Dr. Janet Travell’s injections. Jacobson’s license was revoked by the state of New York in 1975 because of “excessive narcotic prescriptions.”<sup>175</sup> As for Travell, she would remain on staff but be marginalized by Dr. George Burkley during 1962 and 1963.<sup>176</sup>

---

<sup>172</sup> Dallek, *The Atlantic*, 1 (forerunner article to his 2003 book). Also available at: [www.theatlantic.com/magazine/archive/2002/12/the-medical-ordeals-of-jfk/305572](http://www.theatlantic.com/magazine/archive/2002/12/the-medical-ordeals-of-jfk/305572)

<sup>173</sup> Stossel, *Atlantic Unbound*, 18 Nov., 2002 (first page of printout).

<sup>174</sup> Dallek, 2003, pp, 398-399.

<sup>175</sup> Larry Sabato. *The Kennedy Half-Century: The Presidency, Assassination, and Lasting Legacy of John F. Kennedy*. Bloomsbury, 2013, p. 460, n. 58. Sabato, incidentally, is one of many who are critical of the 1964 findings by the Warren Commission, which investigated the assassination and reported that a lone assassin (Lee Harvey Oswald) was responsible.

<sup>176</sup> Ghaemi, p. 172, called this development “*a medical coup d’etat*.”

Admiral Burkley was interviewed at the Kennedy Library in October 1967. He insisted that he, not Janet Travell or any others, was JFK's principal medical advisor. He reported that "The President was rarely ill, and the necessity to see him routinely was not a problem." He viewed his patient as "essentially a healthy adult." (Shades of that other admiral/physician, FDR's Ross McIntire.) When asked about his patient's back support, he replied, "You would hardly call it a brace."<sup>177</sup> Dr. Burkley is known to have later destroyed his records on this client, possibly at Robert Kennedy's request. According to the Dallek book epilogue (2004 paperback, 705 ff.), the same family member was responsible for the "disappeared" autopsy report on JFK.

Political scientist Rose McDermott has spoken of the "tremendous allocation of time and attention that Kennedy's care required—attention a healthier man would have been able to direct toward problems of greater national concern."<sup>178</sup> As what is called a "VIP patient," this one could command whatever he wanted as treatment, and he apparently did just that. He told brother Robert that he didn't care if he took "horse piss" as long as it made him feel better.<sup>179</sup> There is speculation that had he lived longer, JFK would have

---

<sup>177</sup> William McHugh, interview with Dr. George G. Burkley for John F. Kennedy Library's oral history program, 17 Oct., 1967. At: [jfkassassination.net/russ/testimony/burkley.htm](http://jfkassassination.net/russ/testimony/burkley.htm) /

<sup>178</sup> McDermott. "The politics of presidential medical care: The case of John F. Kennedy." *Politics and the Life Sciences*, vol. 33, no. 2, Fall 2014 (special issue on disability and succession issues of U.S. leaders), 77.

<sup>179</sup> Dallek, *The Atlantic*, Dec. 2002, near end of online version. Even more potions were given to Adolph Hitler by his medical enablers: "as many as 80 different drugs, including testosterone, opiates, sedatives, and laxatives," including large amounts of cocaine plus custom-made virility shots. See historian Giles Norton's 2016 book on this and other oddities: *When Hitler Took Cocaine and Lenin Lost His Brain—History's Unknown Chapters*. London: Picador, paperback.

been using a wheelchair in five years or so. It also seems likely that he would have succumbed in the same way as other overmedicated, middle-aged VIP patients, such as entertainers Prince and Michael Jackson.

*Others Respond.* Like Dallek, journalist Laurence Leamer also related stories about doctors disagreeing with one another, as with FDR's medical personnel twenty years earlier. However, Leamer did not fully accept Dallek's conclusion that presidential leadership was *not* negatively affected by the health scenarios.<sup>180</sup> There were other doubters and dissenters as well, some with disputable arguments. The online History News Network (HNN), which gave so much attention to the historian's prerelease article in *The Atlantic*, posted the following question on its 2 December, 2002 site: "Are we being manipulated?" (*Good question.*) A *Los Angeles Times* editorial of 19 November, 2002 declared that "Unlike Franklin Roosevelt's concealment of his polio, Kennedy's pretended vigor was not a defensive maneuver....[It] was the core of his message." (*Could it be both?*) There were also people of two minds, as seen in journalist William Safire's *New York Times* column on 18 November, 2002. He wrote that the "penchant for political concealment and media manipulation" was "ameliorated by his inspiring...willingness to undergo great pain to succeed in wielding great power." (*Interesting view on the merits of power.*) Another well-known historian sided with Dallek. Doris Kearns Goodwin asserted, also on an HNN's entry for 2 Dec., 2002:

---

<sup>180</sup> Leamer, HNN, 2 Dec., 2002. #1113. His remarks also appeared in the *Boston Globe* of 22 Nov., 2002.) A year earlier, Leamer had authored *The Kennedy Men: 1901-1963*, based on materials that JFK's main secretary, Evelyn Lincoln, took with her (illegally?) when she left the White House. Leamer points out that this information would probably have been censored before it ever got to the Kennedy Library.

“There’s no indication that [the] combination of ailments and medications impaired his presidency in any way....it only gives you a greater respect for him as a man.” (*Does it?*)

One stumble did occur early in his presidency. The habitually overtreated JFK—handsome and young, compared to most world leaders then—was outtalked and outmaneuvered by one of those not-so-handsome senior statesmen, the wily Soviet head Nikita Khrushchev, in their first summit (3 June, 1961). Kennedy was known to take extra substances before stressful events, but his armamentarium did not help on that occasion. For all we know, it might have contributed to his ineffectual responses to Chairman K. In any case, the summit experience appears to have emboldened the older man and contributed to major incidents later in Cuba and Berlin, as posited by Laurence Leamer and others.<sup>181</sup>

Whatever one thinks of how much or how little he was affected, it is astonishing that Kennedy not only physically tolerated his so-called therapeutic regimen but even appeared to benefit from it occasionally (though only temporarily, as with most “highs”). Like FDR, he was a tank in his ability to soldier on when faced with physical distress. *Later Medical Views.* After examining the same records that Dallek had scrutinized, a group of practitioners weighed in concerning the nature of JFK’s health woes. In a September 2009 professional journal, Dr. Lee Mandel and colleagues suggested that a

---

<sup>181</sup> HNN, #1113. Leamer seems to have a talent for finding hidden materials, as described in the footnote above. More recently, he acquired forty hours of tapes from the estate of a ghostwriter who helped matriarch Rose Kennedy write her sanitized 1974 memoir. (She died at age 104 in 1995.) See Elizabeth McNeil. “Rose Kennedy’s Secrets.” *People* magazine, 7 Dec., 2015, pp. 62-65.

rare autoimmune endocrine disorder called APS2 was the culprit.<sup>182</sup> Mandel also told *American Medical News* that not only did sister Eunice have Addison's (adrenal) disease, like the president, but his son (John F. Kennedy, Jr.) had Graves' disease of the thyroid, another autoimmune manifestation.<sup>183</sup> A few years earlier, Dr. Peter H.R. Green, an expert on celiac disease, wrote that the U.S. leader might have had that ailment, which is common among Irish people (as JFK was, on both family sides).<sup>184</sup> This gluten intolerance involves problems with absorbing wheat and other grains. Kennedy's long use of steroids could have masked the last of these conditions, so that it went undiagnosed all his life, according to Dr. Green.

A related topic is that of JFK's prodigious (and less hidden) sexual activities, to the extent that they are linked to the better kept secrets about his health. Many who have researched his short life found that these two realms seem intertwined. The main focus in this paper is on his presidential years, not the reportedly wild youth, which included an affair with a suspected Nazi spy. Biographer Richard Reeves once quipped that "Kennedy was more promiscuous with his physicians and drugs than he was with women,"<sup>185</sup> and this author was probably accurate that his subject's libido was likely

---

<sup>182</sup> "Endocrine and autoimmune aspects of the health history of John F. Kennedy." *Annals of Internal Medicine*, vol. 151, no. 5, 2009, pp. 350-354.

<sup>183</sup> Susan J. Landers. "Rare disorder explains JFK's health woes." 11 Sept., 2009 article at: [www.amednews.com](http://www.amednews.com). *American Medical News* is published by the American Medical Association. It recently became available only online. Note that Graves' disease also occurred in the Bush presidential family.

<sup>184</sup> "Was JFK the Victim of an Undiagnosed Disease Common to the Irish?" HNN, 27 Nov., 2002, #1125.

<sup>185</sup> *President Kennedy: Profile of Power*. Simon and Schuster, 1993, p. 399.

boosted by some of the substances he took, especially steroids. Investigative journalist Seymour Hersh agreed to some extent about the cortisone-behavior connection,<sup>186</sup> now a generally accepted idea. In his groundbreaking book, Robert Dallek acknowledged JFK's compulsiveness in this arena, which closely resembled his father's predatory behavior. Although not excusing such actions, the historian declared that they did not appear to affect negatively the president's decisions and performance as chief executive. Another noted historian, Michael Beschloss, opined that the "womanizing did not interfere with his leadership but was a ticking time bomb" because of the potential for blackmail.<sup>187</sup>

There could well have been links between Kennedy's careless copulation<sup>188</sup> and his also risky chemical intake. However, he was randy in his youth, well before a large number of substances accumulated and combined in his system. Dynamics such as family and upbringing, social status, and personal characteristics were explored in a Gary Wills psychohistory (1981/1982, and in 2002, before the Dallek article and book). He

---

<sup>186</sup> Hersh's 1997 work seemed especially focused on libido matters and outing JFK on such rumors as an alleged, very brief first marriage in 1947, for which no records remain. See *The Dark Side of Camelot*. Little, Brown and Co., 1997, especially chapter 19, "First Marriage," pp. 326-341. Hersh is better known for breaking the story in 1969 of the Vietnam War's My Lai massacre.

<sup>187</sup> See "The Kennedys," a two-part series on "American Experience," 2003, at: [www.pbs.org/wgbh/americanexperience/features/interview/kennedys](http://www.pbs.org/wgbh/americanexperience/features/interview/kennedys) / Interviews with Beschloss, Dallek, Doris Kearns Goodwin, David McCullough (narrator), and others, plus a full program transcript, can be accessed at this site.

<sup>188</sup> One also wonders how he could have been so physically active, given his many internal issues and severe back pain. Dallek, at *Atlantic Unbound*, 18 Nov., 2002, said that he is often asked about this matter and believes that JFK perhaps used a supine position during sex and/or made it a water sport, often in the White House swimming pool, for easier mobility.

organized *The Kennedy Imprisonment: A Meditation on Power* into chapters such as a prisoner of family, of image, of sex, and other factors. Wills did not know then of the even greater extent to which “Jack” was a longtime prisoner of Illness.

#### Health and Vigor as Political Strategies

The Kennedy camp denied and dissembled about his ill-being before and during his presidency through widespread promotion of a vital bodily image. In 1960, seeking to follow Dwight Eisenhower in office, a secretly unhealthy JFK created a campaign issue out of the latter’s illnesses in the prior decade. By focusing on his own apparent participation in sports, his naval heroism in World War II, and other physical challenges he had met, the candidate managed to campaign against not just his actual opponent, Vice-President Richard Nixon, but the old war hero “Ike” as well. (Eisenhower was almost seventy then.) The younger man’s age, good looks, and “vigah” (Bostonese for vigor)<sup>189</sup> were packaged as vibrant alternatives to Ike, whose speech was still affected by a mild stroke in 1957. A key Democratic campaign slogan was “Get the country moving again.” A somewhat cynical assessment of all that activity is one made by English professor Christopher Clausen, writing in the *Wilson Quarterly*: “The rite of exhibiting fitness for high office through frenetic athleticism didn’t emerge until the administration

---

<sup>189</sup> JFK was indeed photogenic/telegenic and certainly did not look ill, although in person his face was somewhat puffy and had a saffron hue. The author of this paper observed his odd coloring in the early sixties at a University of Kentucky outdoor rally, where anti-Catholic flyers littered the campus.



of John F. Kennedy....”<sup>190</sup> With all that freneticism, the 1960 Democrats revamped campaigning, just as FDR had done with his own vigor rhetoric (See Smith, chapter 4).

Dallek and politics expert Larry Sabato agree that Kennedy set the tone for presidential politicking and thus influenced his successors. He did so through use of the burgeoning television medium (including the first political debate on TV), advertising strategies developed by those “Mad Men” of the 1950s, sophisticated polling, documentary footage, and popular culture figures such as singer-actor Frank Sinatra. He even managed to market himself as the nation’s first Catholic leader.<sup>191</sup>

The topics of television and debates bring to mind another example of a JFK advantage in the 1960 race, In that first debate with Richard M. Nixon, those watching it on TV thought the former had won the contest; those listening on radios believed Nixon had done so. Reasons for this phenomenon were later articulated by journalist Theodore White in his historic work, *The Making of the President 1960*.<sup>192</sup> Apparently, Nixon’s dark features (hair, eyes, beard shadow) looked sinister on the new visual medium, while JFK’s more blurred and indefinite look (sandy hair, blue eyes) was the perfect soft-focus

---

<sup>190</sup> The also-frenetic example of one Theodore Roosevelt is not considered in this article. See “FDR’s Hidden Handicap.” Summer 2005 issue, at:

archive.wilsonquarterly.com/essays/fdrs-hidden-handicap

<sup>191</sup> HNN, 16 Nov., 2013 at: <http://hnn.us/article/153980#sthash.yydUTATJ>. Also access Dallek’s radio interview on this topic with Southern California public radio 89.3 KKC at: [www.scpr.org/news/2013/11/16/40420/how-jfk-fathered-the-modern-presidential-campaign](http://www.scpr.org/news/2013/11/16/40420/how-jfk-fathered-the-modern-presidential-campaign)

<sup>192</sup> New York: Athenaeum Publishers, 1961, section on debates. White followed this landmark edition with four more accounts on U.S. presidential elections between 1964 and 1980.

image on the black-and-white<sup>193</sup> screen. However, Nixon's deeper voice and neutral accent may have sounded familiar and reassuring on radio, compared to Kennedy's somewhat nasal, Boston-inflected pronunciations. It was later revealed that sweaty Nixon was severely fatigued and thought to be suffering with a knee injury and possibly the flu during that debate, whereas JFK looked the picture of blooming health. He was very far from it. Indeed, Kennedy was the real political trickster that night, not "Tricky Dick," as his political enemies often called him.

In all of the above, JFK outdid even FDR's communications and rhetorical skills. Later, once in office, he became even more of a media darling than Roosevelt had been with his intimate "fireside chats" on the radio. In his brief tenure, the new head of state held more than sixty televised press conferences, displaying there an ironic humor that delighted both journalists and the public. Armed with occasional self-effacing and gently teasing techniques, he probably would have fared well with the "celebrity roast" type of humorous public speaking that arose ten years after he died.<sup>194</sup>

Most of the sensitive information (risky health and sexual behavior) was effectively suppressed by JFK and his cohorts, with cooperation from the medical people who served him. Whatever the mainstream journalists knew or suspected, it still tended, as in FDR's day, to regard matters of the flesh—medical or sexual—as off limits in covering the

---

<sup>193</sup> Color TV, using a picture tube, was developed a few years earlier, but it was more expensive and thus not yet widely in use.

<sup>194</sup> Roasts began on TV in the early 1970s with singer Dean Martin, who did fifty-four of them. One of them targeted a future president, Ronald Reagan. Celebrity roasts have now become a modern fixture in politics and other fields. However, they are less often televised today and often viewed on the Internet.

White House. George Reedy, Vice-President Johnson's media advisor, described this practice as follows on the "American Experience" program "The Kennedys" (2003): "There was a sort of understanding in the press that a responsible, conscientious journalist would not write about anybody's private life." Added to that was an added possibility: that the overly charmed media, especially the White House press corps, were perhaps too favorable, even protective, in their coverage of this charismatic leader.

As for the uninformed public, which had been kept relatively well aware of Eisenhower's ailments in the 1950s, it probably could not have imagined that its new, youthful chief had anything wrong with him. Journalist Theodore White reported in 1961 that supporters of Lyndon Johnson (LBJ), a primary-election opponent in 1960, leaked the information about JFK's Addison's disease then. The Kennedy camp denied it, even though his sister Eunice had the same condition. In the general election, Richard Nixon's campaign people tried unsuccessfully to obtain medical records on their opponent.<sup>195</sup>

In tough language, journalist David Frum, writing for the *National Review* online, called the Democrat's tactics "deceit" and "the most successful...act of political manipulation" of the twentieth century.<sup>196</sup> On nonelection issues, longtime newswire reporter Patrick Sloyen used the Kennedy White House's own tapes (once secret, of

---

<sup>195</sup> See White, chapter 5, "Pre-Convention: Democrats." Ironically, one of those LBJ supporters/leakers was John Connolly, the Texas governor who would be riding in the limousine with Kennedy on 22 Nov., 1963 in Dallas. Connolly recovered after being injured by the same gunshots that killed the president. JFK had gone to Dallas in part to smooth over Democratic political disputes involving Connolly and LBJ, who was then Kennedy's VP.

<sup>196</sup> 20 Nov., 2002, available at "David Frum's Diary, 11-20-02: Kennedy's Magic," at: [www.free.republic.com/focus/f-news/792545/posts](http://www.free.republic.com/focus/f-news/792545/posts)

course) to lambaste him in a 2015 account, *The Politics of Deception: JFK's Secret Decisions on Vietnam, Civil Rights, and Cuba*.<sup>197</sup>

As for other judgments, James Giglio admired the “fortitude” of this man in dealing with illness.<sup>198</sup> A fellow historian, HNN editor Richard Shenkman, also found that forbearance heroic. To him, the revelations on a compulsive sex life were far more damaging to his legacy than the health cover-ups were.<sup>199</sup> Yet most commentators, and Kennedy himself, felt the opposite was true. Michael Beschloss has said that this head of state thought a leader’s private and outside lives were “two separate compartments that had no serious connection.” That was a European-sounding view, and he must have believed in Irish luck, too, feeling that, as Beschloss put it, “the risks he took in his private life were not likely...to destroy his public life.”<sup>200</sup>

#### Character and Legacy

*“deceitful” / “iron-willed fortitude” / “playing through the pain” / “deficient in integrity, compassion, and temperance” / “inspiring” and “gallant” / “moral failing” / “respect for him as a man” / “heroic” or “stoic” / “manipulative” / “questions of character”*

These are some of the portrayals found in researching this chapter. At first, they sound overly masculine, a reflection of JFK’s time. Yet, if one thinks of pioneer female

---

<sup>197</sup> St. Martin’s Press, 2015.

<sup>198</sup> Giglio. “Growing Up Kennedy...,” pp. 358-389.

<sup>199</sup> Shenkman. “Johnny, We Hardly Knew Ye.” HNN, 26 Nov., 2002, #1111.

<sup>200</sup> Beschloss, “American Experience,” episode on “The Kennedys,” 2003.

leaders<sup>201</sup> in the later twentieth century, some of those terms fit them as well. (It was even more necessary then to “act like a man.”) Moreover, males have been politically defeated for looking less than tough. Recall—again from the last century—Sen. Eagleton in 1972, and his psychiatric therapy history (see chapter 1) or would-be presidents Sen. Edmund Muskie (tears on the 1972 campaign trail); former Gov. George Romney, father of Mitt, saying “I was brainwashed” on Vietnam in 1968; or diminutive candidate Michael Dukakis looking silly in a helmet and tank in 1988.

At any rate, one can only speculate on why our first ethnic president, with so many appealing qualities, was willing to deceive, use people, win at almost any cost, attack the infirm, and more. Yes, he was on a family mission and became quite ambitious, especially after discovering in his late twenties that he was good at politics. Yes, he had a risk-taker personality and assumed that he could get away with certain behaviors. However, none of those offers a complete answer. Was he not also fatalistic, and perhaps felt some entitlement, because his life had been so tenuous and illness ridden? It is easy to think that, after learning about his encyclopedic medical dossier.

In addition to the attributes listed above, the following longer observations can also be drawn from biographies and other materials consulted for this thesis:

\* JFK was a cool, stoic risk-taker (even danger seeker?) with an ironic sense of humor. Like FDR before him, he did not complain about physical troubles. (Both were brought up to forbear.)

---

<sup>201</sup> The best examples are Israel’s Golda Meir, India’s Indira Ghandi, and Britain’s Margaret Thatcher.

\* He was a cultural Catholic who talked often about death to friends but did not seem very religious or spiritual as regards this or an afterlife.

\* In politics, he was not a liberal but a centrist<sup>202</sup> who most of all wanted to be elected and reelected. Because he died before the end of his first term, he was not much focused on legacy issues, which have loomed especially large for those in charge since the Vietnam War and Watergate eras.

\* He was highly attractive to women most of his life, even when thin and sickly looking, before the plumping effects of cortisone, but tended to treat them callously. Many would argue that this was true even with wife Jacqueline, who was a significant political and cultural asset to him.

Finally, in part because he was seen as a fallen hero, Kennedy inspired strong reactions in many people. In particular, there is a divide between the emotions of the public and the more factual views of most historians, according to Steven Gillon in “Rethinking the JFK Legacy.” This scholar also reminds us that for seventy-plus consecutive hours in late 1963, television, the great uniter, brought together people all over the planet in a common experience.<sup>203</sup> Observed, felt, or reported during that draining weekend of nonstop visuals were shock, disbelief, dismay, fear, horror, depression and anxiety, a sense of powerlessness, rage, suicides, and an inconsolable feeling of personal loss. Everyone over a certain age remembers where s/he was that dreadful day, as we do with our shared “9-11” event of 2001. One can also recall how

---

<sup>202</sup> When pressed to describe himself, Franklin D. Roosevelt said: “I am a Christian and a Democrat, that’s all.” In Perkins. *The Roosevelt I Knew*, p. 330, as quoted in Ghaemi, p. 138.

<sup>203</sup> HNN, 28 Oct., 2013, #153736.

concerned reporters and the public were about James Garfield's lingering death in 1881. Or we can imagine that Abraham Lincoln would have meant even more to us had we been witnesses to his terrible demise.

After JFK

*The Twenty-Fifth Amendment (1967)*. Even before President Kennedy was assassinated, there had been political pressure to clarify succession provisions under various scenarios of presidential inability. Four years after his death, the Twenty-Fifth Amendment to the Constitution was ratified. It specifies, in a section on emergency provisions, that a vote by two-thirds of the Congress is required to declare a head of government unfit for office if he is not willing to leave it. The amendment also allows a head of state to decide, in advance, if a medical or other situation requires an acting president (usually the vice-president) to serve temporarily. The latter part was invoked by Ronald Reagan (once, in the 1980s) and George W. Bush (twice, in the 2000s). However, there were times when it should have been invoked and was not, as with Reagan after the attempt on his life in March 1981. (See conclusion section below for more on this topic.)

*Fiftieth Anniversary and Later Commentary*. The History News Network featured several works about JFK, mostly from other authors, on its late 2013 sites marking the fiftieth year since Kennedy's death. An interesting entry from 12 November concerned "textbook historiography"—specifically, writings for high school students about the assassinated president. HNN reprinted an earlier *New York Times* story by Adam Clymer, who wrote that the charismatic politician was being described for high schoolers "with warts and all," after being romanticized in 1960s textbooks and downgraded by revisionist historians in the 1980s. In addition, a 2013 book by historian/librarian/speechwriter Ted

Widmer (*The Man with the President's Ear*, published by Abrams) is discussed in HNN's anniversary story #153861. Widmer avowed that “no historian has even been as close to power” as Arthur Schlesinger was to Kennedy and his inner circle. Yet he might not have been privy to JFK's complete health story—after all, JFK led a very compartmentalized life.<sup>204</sup> Moreover, being so close to the throne did not always serve Schlesinger well as a historian. He has been criticized, even mocked, for a lack of objectivity regarding the Kennedys.<sup>205</sup>

In addition to the plentiful HNN contributions, political scientist Robert Gilbert, an authority on presidential fitness for many years, weighed in regarding an opus that he was researching. This author indicated in a 2013 interview that Robert Dallek's 2003 book was “simply incorrect when he wrote about various aspects of Kennedy's health—an important topic [for] a president who was so ill.”<sup>206</sup> One would like to know what he had in mind but, at this writing, such a book does not appear to exist. In 2014, however, this presidential health expert did organize a major conference at Northeastern University on presidential disability and succession. Conference papers by Gilbert and others appeared

---

<sup>204</sup> In a compilation of 1964 interviews that Schlesinger did with widow Jacqueline Kennedy, only her husband's bad back, adrenal disease, and stomach trouble were mentioned, and briefly so. See Schlesinger, *Jacqueline Kennedy: Historic Conversations on Life with John F. Kennedy*. Hyperion, 2011.

<sup>205</sup> Consider, for example, the following description of JFK actions in the Cuban missile crisis, from the Schlesinger tome *A Thousand Days* (Houghton Mifflin Harcourt, 2002 ed., p. 841): “a combination of toughness and restraint, of will, nerve and wisdom, so brilliantly controlled, so matchlessly calibrated, that dazzled the world.”

<sup>206</sup> This interview appeared in a university newsletter and was written by Jason Kornwitz: “3Qs: JFK's legacy, fifty years after the assassination,” News at Northeastern” at: [www.northeastern.edu/2013/11/jfklegacy](http://www.northeastern.edu/2013/11/jfklegacy).



in a special edition (fall 2014) of *Politics and the Life Sciences*, an extremely valuable resource referenced throughout this thesis.

### Conclusions on Kennedy

It seems a miracle that this man lived so long with constant pain and so many substances in his system. How was he able to bear serving on a small, bouncing, and eventually rammed boat during WWII<sup>207</sup> and also endure the physical pounding of political campaigns? In Dallek's recounting, his subject was a medical phenomenon—a cursed boy and man with an unfathomable ability to withstand constant physical distress, a variety of serious maladies, and a very large array of potential remedies. He became at one point a walking pharmacy, maintained by a scary cocktail of medicines, injections, and implants, some of which produced even more problems. Yet, after he died, his urologist wrote for the record that his patient had “experienced a profound psychochemical influence for the better in a spectacular way. This is not an uncommon clinical phenomenon.”<sup>208</sup> So success can occur even with an exceedingly complex

---

<sup>207</sup> It is generally agreed that his father got him into the Navy without a medical exam. There are also dark writings, including a Gary Wills psychohistory (see bibliography), about the father driving his male offspring toward war, compulsively chasing women, competitive sports, and other “masculine” behaviors. We also know from JFK biographers that he was highly influenced by Joseph P. Kennedy, possibly even going into politics to win his approval.

<sup>208</sup> Urologist William Herbst, quoted in Ghaemi, p. 186. Also noted by Ghaemi is a medical oddity: A patient's sexual habits, normally reported in detail in urology reports, are noticeably absent for JFK. Ghaemi, p. 165.

regimen if those “meds” are dispensed efficaciously, as they apparently were in the last couple of years of JFK’s life.<sup>209</sup>

Politically, there are other issues to consider. The 1960 presidential election was extremely close: an edge of fewer than 113,000 votes, with allegations of voter fraud in Illinois, Texas, and elsewhere. Kennedy would likely have lost had his many infirmities been fully disclosed.<sup>210</sup> Voters might also have felt betrayed and angry had they learned the reality after he was in office (*Atlantic Unbound*, 1). Even today, with laws and more enlightened attitudes on disability, it’s still doubtful that a completely open JFK would be elected. Nor should one expect to be, with that many problems.

Dutch historian Peter Geyl has observed that history is “argument without end.” Robert Dallek did not shrink from reporting unflattering material, but his findings were mostly favorable to the Kennedy legacy. He argued that despite JFK’s many afflictions, there was no strong evidence that he was unfit for his job—even during major stressful events.<sup>211</sup> In 2012, FDR historian Alan Brinkley agreed, adding that this young man

---

<sup>209</sup> Ghaemi, pp. 172-173, 176. The psychiatrist also reports, at p.163, that JFK nearly died in 1961, some six months into his presidency, from a systemic infection that began in the urinary tract. The incident, though very serious, was of course covered up. Dr. Ghaemi also believed, in 2011, that no other biographer had written of that near-death experience.

<sup>210</sup> See *Los Angeles Times* of 19 Nov., 2002, editorial page.

<sup>211</sup> Dallek, 2003, p. 705. Kennedy Crises included not only the frightening Cuban missile showdown of October 1962 but a lesser known event occurring at the same time. See Bruce Riedel. *JFK: The Forgotten Crisis: Tibet, the CIA, and the Sino-India War*. Brookings Institution, 2015. According to Riedel, JFK handled that situation well.

fought his conditions “gallantly” and, for the most part, overcame them.<sup>212</sup> Thus, the triumph theme emerges again, as seen in the prior discussion on FDR.

To support his research and conclusions from written materials, Dallek listened to audiotapes that were part of a secret recording system set up by Kennedy in the White House in July 1962. The historian acknowledged that there were both edited and missing items in what he heard. Moreover, JFK’s selectivity as to what was captured on these recordings<sup>213</sup> was especially true at the Oval Office site (one of three in the White House). Yet Dallek judged that the tapes, along with transcripts for hard-to-understand selections, offered a reasonably adequate record of events.<sup>214</sup>

There are other potential weaknesses in that author’s conclusions. He has insisted in interviews that (1) he was often critical of his subject in the book he wrote, which is true, and (2) there were *no* preconditions involved in his gaining first-time access to once-sealed documents. Still, it is reasonable to wonder if that privilege could have predisposed Dallek toward positive judgments. Moreover, he wasn’t reporting in a vacuum, as he had already written books on the modern prince of Camelot and was therefore familiar with his subject. Or perhaps he was overly influenced by the heroic

---

<sup>212</sup> See *John F. Kennedy, The American Presidents Series*. Times Books/Henry Holt and Co., 2012, back cover. Alan Brinkley, by the way, is the son of longtime national TV news anchor David Brinkley. Neither should be confused with a younger historian, Douglas Brinkley, who often writes about conservation issues.

<sup>213</sup> According to historian Thurston Clarke, Kennedy was a “selective taper” who mainly recorded conversations for possible use in his memoirs. See “The enduring appeal and frustration of writing about the 35<sup>th</sup> president,” *Washington Post*, 27 Oct., 2013, pp. B-1, B-7. Clarke also authored *JFK’s Last Hundred Days: The Transformation of a Man and the Emergence of a Great President*. Penguin Press, 2013 (another “triumph” title).

<sup>214</sup> Dallek, 2003, pp. 505-506.

aspects of stoicism and determination in the face of afflictions. As indicated earlier, those manly and admirable human characteristics appealed to others as well. However, in Jack Kennedy's case, such traits were also the mark of a major risk taker whose decision to run for the highest office affected millions of people. That choice reveals a substantial degree of hubris. Dallek acknowledged that his subject did seem to put his personal ambition first, "making a bet with himself that he could be president....[but] he did not share the gamble with the public."<sup>215</sup>

The historian could have chosen to qualify his conclusions more forcefully; they are often not convincing as worded—for example, medical concerns "did not significantly undermine his performance as president on any major question" (p.705 in 2004 paperback). Not well addressed is the question: How could they NOT undermine it to some degree, or at one time or another? Somewhat less troubling but still unsatisfactory is this conclusion: The constant sexual adventures "were no impediment to his being an effective president" (705). But what about the possibility of blackmail, as raised by fellow historian Michael Beschloss? (He thought that was a big risk factor for any politician pursuing sexual dalliances.)

Dallek was not alone in his positive judgments. Historian Alan Brinkley agreed, and psychiatrist Nassir Ghaemi deemed JFK a great head of state, though not at first. It was only after his pharmacology regimen improved in his last two years or so that he became an effective leader, according to Ghaemi's book.<sup>216</sup> That author also cites physician-

---

<sup>215</sup> See *Atlantic Unbound* interview (citation in bibliography).

<sup>216</sup> *A First-Rate Madness*, pp.147, 176.

scholar Lord David Owen as being in agreement with the timeframe,<sup>217</sup> which seems important in judging the man and his handling of crises. The time factor was observed by Dallek as follows: Prescribed medicines (rather than JFK freely getting whatever he wanted) and an exercise program that began in late 1961 helped him “sensibly address potentially disastrous problems” (Dallek, p. 705). In other words, there were no more questionable summit performances or incidents like the Bay of Pigs; instead, JFK seems to have functioned quite well during the frightening Cuban Missile Crisis of October 1962. Even so, the fact remains that he had many disabling conditions and took several substances throughout his presidency. True, a few doctors and medications were dropped or changed along the way, but he was still and always a prisoner of his mostly hidden infirmities.

The findings of those “positive judges,” both historians and medical experts, can be combined with other admiration writings (by historians Goodwin, Shenkman, Clarke) discussed elsewhere. Together, they constitute the JFK version of triumph literature, as was seen with FDR (but not poor unlikable Woodrow Wilson, alas). Historian James Giglio, by the way, went even beyond concurring with the other JFK supporters. He and the esteemed physician Bert Park,<sup>218</sup> who examined the Travell data two years after Dallek’s research, determined that Jack Kennedy did *not* have osteoporosis in his back

---

<sup>217</sup> *In Sickness and in Power: Illnesses in Heads of Government During the Last 100 Years*. London and New York: Praeger, 2008.

<sup>218</sup> Recall earlier references to Dr. Park in Wilson chapter above, in which he was one of several physicians commenting on the latter’s cerebrovascular status.

and that steroids were *not* to blame for his problems there.<sup>219</sup> So there are now differing historian and physician opinions to consider and more surely to come—along with still unsealed or lost military, family, and personal records. A scholar’s work is never done.

Along with the triumph literature, there have been other thematic periods in historical and other writings on JFK, as with FDR. The 1960s and afterward included hagiographic and other favorable remembrances from the men closest to him.<sup>220</sup> Even White’s *Making of the President 1960* has been faulted for romanticizing Kennedy.<sup>221</sup> After later decades of revelations about his often reckless sexual escapades, along with a spate of critical assessments, the public’s view of this political phenomenon became more realistic than before. Then there was the opening of health records to Dallek, his resulting article and book, and responses to his surprising revelations, making the 2003 book a best seller. Most recently, there was the expected output of reflections tied to the fiftieth anniversary of the assassination. This literature cluster could be considered the latest generation of writings on JFK. However, much of that lore lends itself to counterfactual approaches, reflecting those nagging “what-if” legacy questions and speculation about a never-achieved second term. The anniversary products, some of them rushed into print, also

---

<sup>219</sup> Ghaemi, p. 303, n.176, and Marc J. Selverstone. *A Companion to John F. Kennedy*. Wiley Blackwell, 2001, p. 17.

<sup>220</sup> They were indeed all men and included Theodore Sorensen, Kenny O’Donnell, and Dave Powers. Sorensen, JFK’s alter-ego speechwriter and advisor for eleven years, claims not to have known about any health issues except his boss’s back problems. He also observed, in HNN’s “Dallek and Kennedy: The Media Reaction,” #1113, 2 Dec., 2002 (p.7 of printout), that “What’s in the medicine cabinet is not a reflection of a person’s vigor and fitness” (another example of vigor rhetoric).

<sup>221</sup> See paperback edition of 2009, p. xiii, for a preface by Robert Dallek. He called White’s approach to JFK “starry-eyed,” noting that this was one of the 1960 book’s few flaws.

included psychohistory and history-based fiction, the ongoing conspiracy talk about who killed him and why, and the inevitable “I was there” claims.

All of that brings us back to the respected, if sometimes disputed, Robert Dallek. His contributions are not only of great value historically, but his 2003 book can also be seen as a classic study on improper pain management or, even more fitting, iatrogenic medicine. However one views his final judgments in that work, it stands as the definitive health account to date on John F. Kennedy, who remains a medical mystery.



**Fig. 4.** Jacqueline and John F. Kennedy campaigning, 1960

(Associated Press photo)



## Chapter 6

### Summing Up

The three main leaders<sup>222</sup> in this paper represent different periods of history and various evolving institutions, especially medicine and the media. These men also reflect diverse illness paradigms, but they are similar in some respects, including their reasons for health secrecy. Basically, none of them seemed willing to let someone else run the country. All three appeared to view themselves as unique—either indispensable (FDR), tasked with a mission from God (Wilson), or bearing the family heritage into history (JFK). Such beliefs might have contributed to a sense of entitlement about the highest U.S. office. What these men perhaps did not face is the reality that however special they were as individuals, they were in fact replaceable, as all presidents are.

In terms of agency, or responsibility for their actions, it is the case that Wilson and particularly Roosevelt did not fully acknowledge how sick they were in their later years. From his interactions with doctors, it appears that the latter did not *wish* to know how ill he was in 1944. However, he certainly knew how he felt and looked, so there is some agency in this situation. As for Wilson, he was lucky in not having to conform to the vigor rhetoric that swept up the other two men, especially in their political careers. However, this scholarly man did seem to be in denial of, or dismissive about, his propensity for strokes, which were occurring well before he entered the Oval Office. In

---

<sup>222</sup> Many more presidents hid or downplayed health problems (physical and mental, especially depression) in the modern age and before. These conditions included alcoholism, Graves' disease, serious heart problems, minor strokes, sleep apnea from obesity, and more. For readers seeking health information on other presidents, the bibliography below includes a number of studies that cover multiple leaders or focus on men other the three discussed above.

terms of the 1919 event, he avoids direct agency initially, since he was not able to make decisions in the early weeks afterward. Yet he continued in office to the end of his term—more than two years away—as one not fully able to carry out his duties to the American people. As described above, many historians, physicians, and others believe that Wilson's inability to function well did affect the government, the nation at war, and certainly the failure to pass the League of Nations idea in Congress.

JFK was different. Early on in life, he had to face his lifelong physical demons and cope with them. Thus, he had the most agency of the three leaders, and Kennedy had been exercising that agency for many years in political life, well before he was elected president. In that activity, he had a devoted support network of family and associates to help him. He survived in an amazing and courageous way, but one not entirely satisfactory to the American public.

The good news regarding JFK lies in possible future studies exploring the differing or new opinions expressed by historians and medical professionals in recent years. These research areas range from investigating cortisone's role or lack of it in his severe back problems to exploring further the two phases of his treatment regimen while in office, which seem to have affected his leadership performance.

Finally, there is the agency of the medical people hired to help all three leaders—and frequently paid with government funds to do so. FDR and JFK were often not well served by the medical establishment while in office. Wilson, on the other hand, was fiercely protected by his doctor-friend, but not to the nation's advantage.

At least one modern head of state apparently did *not* keep major medical secrets while in office (although some of his earlier health issues were not known when he became commander-in-chief.)<sup>223</sup> In general, his actions are worth describing here as comparative models. World War II Gen. Dwight D. Eisenhower, age sixty-two when starting his eight-year term, had both a major heart attack and a less serious stroke during his time in office (1953 to 1961). After the first event, in 1955, his press representatives and vice-president, Richard Nixon—who took over many of his duties—briefed the public regularly, presenting the right amount of details to allay fears and keep the populace informed. Ferrell<sup>224</sup> says that Ike was probably the first president to release his in-office medical records. In terms of candidates, Sen. John McCain’s seeming overload of data in the 2008 presidential run (described in chapter 1), has been regarded as a good model for those seeking the highest office.

Ronald Reagan can be viewed as Eisenhower’s opposite number. The specter arises of that septuagenarian and his diminished behavior after the 1981 assassination attempt. The aftereffects of that event were suspected by both the media and some of the public but not fully acknowledged by the Oval Office. Political scientist Robert Gilbert has observed that because the 1967 constitutional amendment on presidential inability was not invoked in 1981, “executive decisions were made by an unelected group of senior

---

<sup>223</sup> “Ike” was, for example, hospitalized for a month in 1949 with a possible heart attack. Historian Robert Ferrell wrote more than half a book on his health problems, which also included Crohn’s disease, and on the poor medical care he received pre-White House, from veterans’ hospitals. See *Ill Advised*, 1992, especially chapters 4 and 6.

<sup>224</sup> *Ill Advised*, pp. 53-150.

political appointees”<sup>225</sup> President Reagan was a likeable, seemingly decent man and a popular leader; his case may be another example, as with FDR, of the American people not pushing on the health issue because they simply did not want to know anymore about it—so much so that voters elected him to a second term. Fortunately, he healed enough to get through seven more years, during which time his cognitive impairment no doubt took root or grew.

Were any of the leaders described above at least partly right in not publicly addressing their health concerns? Grover Cleveland clearly had a strong argument (the economic crash of 1893) for keeping silent about his short-term surgery and not distressing an already anxious public. Roosevelt downplayed his polio and its long-term repercussions; however, it seems reasonable to ask whether any serious harm to the nation or his office resulted from the vigor rhetoric and images depicting him as one who had beaten a crippling disease. He *did* in part overcome that malady, demonstrating both courage and personal growth as he adjusted to permanent paralysis. Yet, despite his personal magnetism, Roosevelt likely would not have been elected had people know he was a paraplegic, owing to the prejudices of the time about handicaps and disabilities. In view of what he ultimately accomplished, his not being chief of state would have been a huge loss to this country.

---

<sup>225</sup> Gilbert also attributes the later Iran-Contra scandal to Ronald Reagan’s weakened state after a prostate cancer operation in 1985, when he *did* invoke the amendment but resumed his powers only eight hours after surgery. See *Politics and the Life Sciences*, Fall 2014 (special issue), pp. 58-76.

## Historians: A Last Thought

*Real historians will dig up the truth,*  
 –Civil rights leader Ralph Abernethy<sup>226</sup>

Our expectations are that scholars and other authors will indeed continue to unveil truths, as Abernethy hoped, when additional secret or lost records (medical, military, personal) are found or made available. This thesis owes much to the authors cited above, especially Robert Dallek and his 2003 work on JFK's many corporal conditions.<sup>227</sup> However, in probing the unspoken infirmities of U.S. leaders, modern historians sometimes seem as eager as media people to expose and judge their frailties—and to do it first. Even Dallek admitted in a 2002 interview that he “didn’t want anybody else to scoop me” in reporting his first-ever findings on Kennedy. Moreover, the melodramatic or sensationalistic book titles adopted by some scholars, as well as the triumph literature (both cited above), can be off-putting, though understandable as marketing techniques. Still, it is unsettling to think of historians in terms of pressured deadlines, marketing, and “scooping” one another. Yet, as this paper has stressed, the mores of medicine, media, and politics (including the presidency itself) changed radically during the last century, and academia

---

<sup>226</sup> As quoted by Michael Fletcher. “50 years after march, a voice neglected.” *Washington Post*, 1 Sept., 2013, p. A-2.

<sup>227</sup> Other especially helpful sources (whether one agrees with their findings or not) include Robert Gilbert, Robert Ferrell, J.M. Cooper, Jr., presidential libraries, the online History News Network, and the special issue (Fall 2014) of *Politics and the Life Sciences* journal.

is now dealing with its own pressures for major modifications.<sup>228</sup> Publishing dynamics and demands will also evolve and could even intensify for scholars. As those developments progress, the recorders of history will no doubt continue to reclaim valuable information and new rhetorical frameworks for understanding the health and fitness of U.S. presidents.

---

<sup>228</sup> Among those are costs and funding sources, tenure matters, distance learning or campus instruction, political issues such as diversity/inclusion and political correctness, the importance of athletics, and social concerns such as student alcohol consumption and rape charges on campus.

Bibliography<sup>229</sup> (Annotated)

NOTE: The following sources, all on FDR, refer to documents that were long lost or unknown and have surfaced since the late twentieth century: Dr. Bruenn report, Goldsmith (Lahey memo), Jackson document, Ward (on Daisy Suckley), and History News Network #153453 (Truman note on FDR's fourth election).

Most of the sources below are historians (H) and medical experts (D). The list also includes print and online works by biographers (B), political scientists/politicians (P), rhetoricians (R), journalists and book reviewers (J), legal sources (L), and media/communications scholars (M).

*Primary Sources:*

- (D) Cohen, Eugene, M.D. and Janet Travell, M.D. "Report on JFK's Health, June 11, 1960." In *Public Papers of the President: John F. **Kennedy**, 1961-1963* (Box 991). Washington, DC: U.S. Government Printing Office, 1962-1964. These two physicians were among others tending to JFK's many hidden health problems.
- (L) Georgia, State of. Original death certificate for Franklin D. **Roosevelt**, 12 April, 1945. Available at: [www.docs.fdrlibrary.marist.edu/psf/box20/f901ay01.html](http://www.docs.fdrlibrary.marist.edu/psf/box20/f901ay01.html)
- (H) In-person interview, spring 2014, with Towson emeritus history professor Mark Whitman, on **FDR and JFK**. Dr. Whitman, a great admirer of FDR, shared that enthusiasm and provided helpful information on other presidents as well.
- (H) In-person interview, Jan. 2007 with the late J. Merton England, retired professor of American History, on JFK. Dr. England was not convinced that John F. **Kennedy** wrote his prize-winning book *Profiles in Courage*. He viewed the question of authorship as an example of JFK's duplicity.
- (H) In-person interview, late 1980s, with Washington, DC federal worker during the **Wilson** era. (He requested anonymity.)
- (D) Medical dictionary at: <http://medical-dictionary.thefreedictionary.com>
- (L) U.S. Constitution, Article II, Sec. 1, Clause 6, as revised in 1967 by the Twenty-Fifth Amendment on presidential inability.

---

<sup>229</sup> Includes some twenty-five sources on Wilson, about forty on FDR, and forty-five or so on JFK, as indicated by bold face names throughout).

*Secondary Sources:*

- (J) Algeo, Matthew. *The President Is a Sick Man*. Chicago: Chicago Review Press, 2011. This work on Grover **Cleveland** is described and quoted by National Public Radio at: [www.npr.org/2011/07/06/137621988/a-yacht-a-mustache-how-a-president-hid-his-tumor](http://www.npr.org/2011/07/06/137621988/a-yacht-a-mustache-how-a-president-hid-his-tumor)
- (H) Ambrose, Stephen. *Nixon: The Education of a Politician 1913-1962*, New York: Simon & Schuster, 1987. This book by a noted historian discusses **Eisenhower's** major heart attack.
- (H) "American Experience" episode on "**JFK**," a 2013 public TV program on U.S. presidents at: [www.pbs.org/wgbh/americanexperience/films/jfk/](http://www.pbs.org/wgbh/americanexperience/films/jfk/) This source reported that improperly administered steroids, given to **Kennedy** from boyhood on, might have caused osteoporosis of his lower back.
- \_\_\_\_\_. Episodes on "The Kennedys." 2003 public TV program on **Kennedy** family at: [www.pbs.org/wgbh/americanexperience/features/interview/kennedys/](http://www.pbs.org/wgbh/americanexperience/features/interview/kennedys/)
- \_\_\_\_\_. Two episodes on Woodrow **Wilson**. 2001 public TV program at: [www.pbs.org/wgbh/amex/wilson/sfeature/sf\\_legacy.html](http://www.pbs.org/wgbh/amex/wilson/sfeature/sf_legacy.html)
- (J) *Atlantic Unbound*. See Dallek and Stossel.
- (B) Berg, A. Scott. *Wilson*. New York: Putnam, 2013. Berg's long work (818 pages) is a generally favorable look at its subject. However, the author is highly critical of **Wilson's** wife and doctor and their behavior after the president's 1919 stroke.
- (H) Beschloss, Michael. "American Experience" on the **Kennedys**, 2003. (See above.)
- (H) Brands, H.W. *Reagan: The Life*. New York: Anchor Books/Penguin Random House, 2016 (paperback). Original edition published in 2015. University of Texas historian Brands has also written on other presidents, notably Wilson and both **Roosevelts**.
- \_\_\_\_\_. *Traitor to His Class: The Privileged Life and Radical Presidency of Franklin Delano **Roosevelt***. New York: Barnes & Noble, 2008. This title reflects **FDR's** transition from aristocrat to New Dealer.
- \_\_\_\_\_. *Woodrow **Wilson**, 1913-1921*. New York Times Books, 2003.



- (H) Brinkley, Alan. *Franklin Delano Roosevelt*. New York: Oxford University Press and American Council of Learned Societies, 2010. Brinkley, son of longtime NBC news broadcaster David Brinkley, has written widely on FDR.
- (D) Bruenn, Howard G., M.D. "Clinical Notes on the Illness and Death of President Franklin D. **Roosevelt**." *Annals of Internal Medicine*, vol. 72, no. 4, 1970, pp. 579-591. This article revealed for the first time the serious conditions FDR had in his later years. (The same journal issue had an article by E.R. Stettinius, Jr., on Roosevelt at Yalta (p. 560).
- (D) Bumgarner, John, M.D. *The Health of the Presidents: The 41 U.S. Presidents Through 1993 from a Physician's Point of View*. Jefferson, NC: MacFarland and Co., 1994. Bumgarner gives medical histories and describes the secrecy aspects of certain chief executive maladies.
- (H) Burns, James MacGregor. *Roosevelt: The Lion and the Fox*. Norwalk, CT: Easton Press, 1956.
- \_\_\_\_\_. *Roosevelt: Soldier of Freedom*. New York: Harcourt Brace Jovanovich, 1956 and 1970, p. 449. The second of these two biographies by the eminent historian covers the years 1940-1944, the period when serious but unknown ailments other than polio overtook FDR. The first volume covers his earlier life.
- (H) Clarke, Thurston. See "The enduring appeal and frustration of writing about the 35<sup>th</sup> president," *Washington Post*, 27 Oct., 2013, pp. B-1, B-7. Clarke analyzed the White House tapes that **JFK** installed.
- (B) Clausen, Chris. "**FDR**'s Hidden Handicap." *Wilson Quarterly*, Summer 2005. Also at: [archive.wilsonquarterly.com/essays/fdrs-hidden-handicap](http://archive.wilsonquarterly.com/essays/fdrs-hidden-handicap) / An English professor offers a different take on FDR's polio.
- \_\_\_\_\_. "**Roosevelt**'s Polio Wasn't a Secret: He Used It to His Advantage." Interview on National Public Radio, "Fresh Air" program, aired 25 Nov., 2013.
- (H) Cooper, John Milton, Jr. *Woodrow Wilson: A Biography*. New York: Vintage Books/Random House paperback, 2011. Cooper also discussed Wilson on the "American Experience" program in 2001. (See above.)
- (D) Crispell, Kenneth R., M.D., and Carlos F. Gomez. *Hidden Illness in the White House*. Durham, NC: Duke University Press, 1988. The focus here is on **Wilson, F. Roosevelt, Kennedy**, and the Twenty-Fifth Amendment on impaired presidents.

- (H) Dallek, Matthew. "Franklin Delano **Roosevelt**—Four-Term President—and the Election of 1944." *History Now* (journal of the Gilder Lehrman Institute), vol. 33, Fall 2012. In this article, Dallek cites a lost letter sent by FDR to his friend Robert Jackson. The letter is reprinted in Jackson's *That Man: An Insider's Portrait of Franklin D. Roosevelt*. (See full citation in Jackson entry below.)
- (H) Dallek, Robert. Telephone interview on **JFK** with *Atlantic Unbound* (online publication of *The Atlantic*), 18 Nov., 2002, at:  
[www.theatlantic.com/past/docs/unbound/interviews/int2002-11-18.htm](http://www.theatlantic.com/past/docs/unbound/interviews/int2002-11-18.htm)  
 \_\_\_\_\_ . "The Medical Ordeals of **JFK**." *The Atlantic* 1 Dec., 2002, at:  
[www.theatlantic.com/magazine/archive/2002/12/the-medical-ordeals-of-jfk/305572](http://www.theatlantic.com/magazine/archive/2002/12/the-medical-ordeals-of-jfk/305572)  
 This print article was a prerelease of **JFK** health details from Dallek's 2003 book.
- \_\_\_\_\_. *An Unfinished Life: John F. Kennedy, 1917-1963*. Boston: Little, Brown, 2003 (paperback 2004). This generally favorable biography covers **Kennedy** health issues in depth. Accompanied by a physician, historian Dallek had access to previously restricted medical files in the JFK Library
- (D) Evans, Hugh E., M.D. *The Hidden Campaign: FDR's Health and the 1944 Election*. Armonk, NY: M.E. Sharpe, 2002. Evans, like FDR biographer Jean Edward Smith (*FDR*, 2007), offers a perspective on medical mores in the early 1940s.
- (D) Evans, R.W., M.D. "Migraine and the Presidency." In American Headache Society's *Headache* magazine, vol.5, no. 9, Oct. 2011. A key focus here was on **Wilson** and his headaches.
- (R) Farrell, Thomas. *Norms of Rhetorical Culture*. New Haven, CT: Yale University Press, 1995. Farrell's book in defense of rhetoric is a seminal work and much admired by those who study rhetoric, language, and semiotics.
- (H) Ferrell, Robert H. *The Dying President: Franklin D. Roosevelt, 1944-1945*. Columbia: University of Missouri Press, 1998. Like Robert Gilbert (see below), historian Ferrell is well known for his works on the health of U.S. leaders.  
 \_\_\_\_\_ . *Ill-Advised: Presidential Health and Public Trust*. Columbia: University of Missouri Press, 1992. Includes discussion of factors contributing to health secrecy.

- (D) Fisher, Mark M.D., *et al.* "Executive dysfunction, brain aging, and political leadership." *Politics and the Life Sciences*, vol. 33, no. 2, Fall 2014, pp. 93-102. This special issue focused on presidential inability.
- (D) Fogg, R., M.D., *et al.* "How Hugh Hampton Young's Treatment of President Woodrow **Wilson's** urinary retention and urosepsis affected the resolution of World War I." *J. Urol.*, vol. 186, no. 3, Sept. 2011. This is an unfavorable look at the work of a prominent urologist.
- (L) *Fordham Law Review* special issue on Twenty-Fifth Amendment to U.S. Constitution (on presidential inability), vol. 79, no 3, 2010.
- (H) Freidel, Frank. *Franklin D. **Roosevelt**: The Ordeal*. Boston: Little, Brown, & Co., 1954. Freidel closes this second of three volumes with a common juxtaposition in the 1930s: FDR's paralysis and the nation's crippling economic depression.
- (D) Freud, Sigmund, M.D. and William C. Bullitt. *Woodrow **Wilson**: A Psychological Study*. Piscataway, NJ: Transaction, 1999. Freud never examined his subject and relied on information from diplomat Bullitt, who did not like Wilson.
- (D) Frishman, W.H., M.D., *et al.* "Incumbent Presidents and Vice-Presidents of the United States of America: A Medico-Historical Perspective." *Cardiology in Review*, vol. 21, 2012. A finding here was the high rate of cardiovascular conditions in these two sets of incumbents.
- (J) Frum, David. He wrote unfavorably on JFK for the *National Review* online. See "David Frum's Diary, 11-20-02: **Kennedy's** Magic," at: [www.free.republic.com/focus/f-news/792545/posts](http://www.free.republic.com/focus/f-news/792545/posts)
- (J) Gallagher, Hugh Gregory. *FDR's Splendid Deception: The Moving Story of **Roosevelt's** Massive Disability—and the Intense Efforts to Conceal It from the Public*. New York: Dodd, Mead, 1985. This work by a polio survivor is the first to be written from a disability rights standpoint.
- \_\_\_\_\_. *Nothing to Fear, **FDR** in Photographs*. Arlington, VA: Vandamere Press, 2001.
- (D) Ghaemi, Nassir, M.D. *A First-Rate Madness: Uncovering the Links Between Leadership and Mental Illness*. New York: Penguin Press, 2011. The author, a

psychiatrist with an interest in history, looks at figures from politics, business, the military, and more, including **FDR and JFK**. His conclusions are surprising.

- (H) Giglio, James N. "Past Frustrations and New Opportunities: Researching the **Kennedy** Presidency at the Kennedy Library." *Presidential Studies Quarterly*, spring 1992, vol. 22, no. 2. Historian Giglio indicated that before 2002, the Kennedy Library has restricted thirty to forty percent of its holdings.

\_\_\_\_\_. "Growing Up Kennedy: The Role of Medical Ailments in the Life of JFK, 1920-1957." *Journal of Family History*, vol. 31, no. 4, Oct. 2006. This article on **JFK** has a psychological bent, probably because of the periodical in which it appears.

- (P) Gilbert, Robert. "Coping with Presidential Disability." *Politics and the Life Sciences*, vol. 22, no. 1, 2008, pp. 2-18. Gilbert has been writing on this topic for many years and is a widely recognized expert.

\_\_\_\_\_. *The Mortal Presidency: Illness and Anguish in the White House*. New York: Fordham University Press, 1992 and 1998 (paperback). Gilbert explored how two-thirds of U.S. presidents died sooner than expected, even though they were "better off" (more wealth and education, better health care) than most Americans. The later version includes two recent presidents, Bill Clinton and George W. Bush.

\_\_\_\_\_. "The Politics of Presidential Illness." *Politics and the Life Sciences (PLS)*, vol. 33, no. 2, 2014, pp. 58-76. Gilbert also coauthored, with E.P. Bucy, the Introduction to this special issue on presidential inability.

\_\_\_\_\_. "Presidential Disability and the 25<sup>th</sup> Amendment: Difficulties Posed by Psychological Illness." *Fordham Law Review*, vol. 79, no. 3, Dec. 2010. Although the focus here is on mental health, this piece also deals with the physical maladies of nineteen leaders.

- (M) Goldberg, Richard, M.D.. *The Making of Franklin D. **Roosevelt**: Triumph Over Disability*. Cambridge, MA: Abt Books, 1981. This is one of several FDR books with a "triumph" theme.

- (D) Goldman, Armond S. Goldman, M.D., *et al.* "What was the cause of Franklin Delano **Roosevelt's** paralytic illness?" *Journal of Medical Biography* (Royal Society of Medicine) 2003, vol. 11, no. 4.

- (D) Goldsmith, Harry S., M.D. *A Conspiracy of Silence: The Health and Death of Franklin **Roosevelt***. Bloomington, IN: iUniverse, Inc., 2007, self-published paperback. This physician tracked down a long-hidden document known as the Lahey memo, in which a physician warned in 1944 that FDR would die in office. \_\_\_\_\_ .“Unanswered Mysteries in the Death of Franklin D. **Roosevelt**.” *Surgery, Gynecology, and Obstetrics*, Dec. 1979, vol. 149, no.6, pp. 899-908.
- (L) Goldstein, Joel K. “Vice-presidential behavior in a disability crisis: The case of Thomas R. Marshall.” *Politics and the Life Sciences*, vol.33, no. 2, Fall 2014. This is one of the articles on **Wilson**’s disability in a special edition of *P&LS*.
- (H) Goodwin, Doris Kearns. *No Ordinary Time: Franklin and Eleanor **Roosevelt**: The Home Front in World War II*. (New York: Simon & Schuster Paperbacks, 1994). Goodwin won a Pulitzer Prize for this biography, which appeared one year before the Daisy Suckley papers on FDR were discovered (see below).
- (D) Grayson, Cary, M.D. *Woodrow **Wilson**—An Intimate Memoir*. New York: Holt, Rhinehart, and Winston, 1960. In 1919, this physician to the president joined Mrs. Wilson in hiding the disabled president in the White House.
- (D) Green, Peter H.R., M.D. “Was **JFK** the Victim of an Undiagnosed Disease Common to the Irish?” See History News Network at: <http://hnn.us/article/1125/> Physician Green was writing about celiac disease, a possible root of many JFK afflictions.
- (M) Greenberg, David. *Republic of Spin*. New York: W.W. Norton & Co., 2016. To Greenberg, merging public relations and politics resulted in presidential spin. He also posits that image making and other publicity efforts began seriously in the era of Theodore Roosevelt.
- (J) Hazelgrove, William. *Madam President: The Secret Presidency of Edith Wilson*. Regnery History, 2016. Hazelgrove is primarily a novelist but has also researched and written about Theodore Roosevelt and Wilson.
- (J) Hersh, Seymour. *The Dark Side of Camelot*. Little, Brown and Co., 1997. Hersh was an investigative journalist whose undocumented book on **JFK** caused a stir when published. Among the authors cited in this bibliography, Hersh, Laurence Leamer,

Richard Reeves, Thomas Reeves, and Gary Wills were the main ones focusing on JFK's sex life.

- (H) History Channel. "**FDR** – A Presidency Revealed." Parts 1 and 2, 17 and 18 April, 2005. Featured here are never-seen footage and first-hand family interviews. At: [www.Prnnewswire.com/news-releases/the-history-channel-presents-fdr-a-presidency-revealed](http://www.Prnnewswire.com/news-releases/the-history-channel-presents-fdr-a-presidency-revealed)
- (H) History News Network (HNN), independent but housed at Virginia's George Mason University, Center for History and New Media. See <http://hnn.us/article/1113> (as well as story numbers 1111 through 1117; 1124-1125; 10256; 153736; and 153861.
- (P&B) Hoover, Herbert. *The Ordeal of Woodrow **Wilson***. Wilson International Center for Scholars, 1992. Hoover worked for Wilson when the latter was president.
- (B) Hoover, Irwin Hood. *Forty-two Years in the White House*. New York: Houghton Mifflin, 1934. Hoover was chief usher at the White House when Woodrow **Wilson** had his 1919 stroke.
- (R) Houck, Davis W. and Amos Kiewe, ***FDR**'s Body Politics: The Rhetoric of Disability*. College Station: Texas A&M University Press, 2003. These scholars focused on Roosevelt's skill in turning his supposed mastery over polio into a political asset, even though the strong, healthy image he projected did not match reality.
- (L) Jackson, Robert H. *That Man: An Insider's Portrait of Franklin D. **Roosevelt***. New York: Oxford University Press, 2003. This manuscript, discovered fifty years after it was written, included a letter from FDR explaining why he needed to run for president a third and fourth time.
- (D) Jones, J.M. and J.L. Jones. "Presidential stroke: United States presidents and cerebrovascular disease." *CNS Spectrums*, vol. 11, no. 9, Sept., 2006. This is one of many medical references in this thesis.
- (D) Keen, William W., M.D. "The Surgical Operations on President **Cleveland** in 1893." *Saturday Evening Post*, 22 Sept., 1917. Keen also produced a later book with the same name, adding more "reminiscences" about the secret oral cancer surgery. Philadelphia: Lippincott, 1928.

- (H) John F. **Kennedy** Library, Boston, Mass., at: [www.jfklibrary.org/](http://www.jfklibrary.org/)
- (H) Kennedy, Ross A., ed. *A Companion to Woodrow Wilson*. John Wiley and Sons, Ltd., 2013, chapter 2, on **Wilson**'s religion.
- (J) Lacayo, Richard. "How Sick Was **JFK**?" *Time* magazine, 24 Nov., 2002. at: <http://content.time.com/time/magazine/article/0,9171,393754-100.html> This news feature was a response to prereleased medical information from Robert Dallek's 2003 book.
- (J) Susan J. Landers. "Rare disorder explains **JFK**'s health woes." 11 Sept., 2009 article at: [www.amednews.com](http://www.amednews.com). *American Medical News* is published by the American Medical Association.
- (J) Leamer, Laurence. *The **Kennedy** Men, 1901-1963*. New York: William Morrow paperback, 2001. Leamer indicated that he had first-time access to the files of JFK secretary Evelyn Lincoln. (She took these materials with her, perhaps illegally, when leaving the White House.) Leamer noted that the Kennedy family would probably have excised these files before they ever reached the Kennedy Library.
- (D&H) Lerner, Barron F., M.D. This author was an internist who later earned a Ph.D. in history. See his piece, "**Kennedy**: Disease, History and Secrecy," on History News Network, special edition, Nov. 2002. At: [http://hnn.us/article/1117 /](http://hnn.us/article/1117/)  


---

*When Illness Goes Public: Celebrity Patients and How We Look at Medicine*. Baltimore: Johns Hopkins University Press, 2009 paperback. This work looked at all kinds of celebrities, including the three main subjects of this thesis.
- (H) Leuchtenburg, William E. *The American President: From Teddy Roosevelt to Bill Clinton*. New York: Oxford University Press, 2015. This historian includes most of the modern U.S. leaders.
- (H) Lelyveld, Joseph. *His Final Battle: The Last Months of Franklin **Roosevelt***. New York: Knopf, 2016. At this writing (late 2016) , Lelyveld's is the most recent book on FDR.
- (R) Lim, Elvin T. "Five Trends in Presidential Rhetoric: An Analysis of Rhetoric from George Washington to Bill Clinton." *Presidential Studies Quarterly*, 2 June, 2002. This article offers a rhetorician's viewpoint.

- (H) Link, Arthur. *Woodrow **Wilson** and the Progressive Era, 1910-1917*. Harper and Bros., 1954. Link was also editor of Wilson's huge collection of personal papers.
- (D) Lomazow, Steven, M.D., and Eric Fettmann. *FDR's Deadly Secret*. Public Affairs/Perseus Books, 2010 paperback. These authors speculated that **FDR** had multiple hidden ailments, including melanoma and epilepsy.
- (H) Mackowiak, Philip A. "President William Henry Harrison's Fatal Pneumonia," posted by Oxford University Press (OUP) at: [blog.oup.com/2016/04/william-henry-harrison-death-pneumonia /](http://blog.oup.com/2016/04/william-henry-harrison-death-pneumonia/)
- (D) MacMahon, Edward, M.D., and Leonard Curry. *Medical Cover-ups in the White House*. Farragut Publishing Co. 1987. This is an example of how the topic in question has intrigued scholars and journalists in each modern decade.
- (H) MacMillan, Margaret. *Paris 1919: Six Months That Changed the World*. New York: Random House paperback, 2003. Pages 489-493 of this work focus on Woodrow **Wilson's** declining health even before his fall 1919 stroke.
- (D) Mandel, Lee, M.D.. "Endocrine and Autoimmune Aspects of the Health History of John F. **Kennedy**," *Annals of Internal Medicine*, vol. 151, 2009. This is a look at celiac disease as one JFK's many ills.
- (D) Marmor, M.F., M.D. "Wilson, Strokes, and Zebras." *New England Journal of Medicine*, 26 Aug., 1982. Also at: [www.ncbi.nlm.nih.gov/pubmed/7048094 /](http://www.ncbi.nlm.nih.gov/pubmed/7048094/) This author took an unconventional approach to **Wilson's** bouts with illness.
- (J) Martin, John Stuart. "When the president disappeared." *American Heritage*, vol. 8, no.6, Oct. 1957. Martin's account describes the Glover **Cleveland** operation in fascinating detail
- (D) Marx, Rudolph, M.D. *The Health of the Presidents*. New York: Putnam Books, 1960. Dr. Marx's book is an interesting but undocumented account of all presidents through Eisenhower.
- (P) McDermott, Rose. *Presidential Leadership, Illness, and Decision Making*. New York: Cambridge Press, 2008. This book looks at the maladies of **JFK** and others.



---

\_\_\_\_\_ . “The politics of presidential medical care: The case of John F. **Kennedy**.” *Politics and the Life Sciences*, vol. 33, no. 2, Fall 2014

- (H) McHugh, William. Interview with George G. Burkley, M.D., for John F. **Kennedy** Library’s oral history program, 17 Oct., 1967. At: [jfkassassination.net/russ/testimony/burkley.htm](http://jfkassassination.net/russ/testimony/burkley.htm)
- (D) McIntire, Ross, M.D. *White House Physician*. New York: G.P. Putnam’s Sons, 1946. This oft-criticized physician was a key player in the cover-up of **FDR**’s last illness. His relatively short book (hardback only) has no photos, bibliography, or index.
- (D) Menger, R.P., M.D. *et al.* “Woodrow **Wilson**’s hidden stroke of 1919: the impact of patient-physician confidentiality on United States foreign policy.” *Neurosurgery Focus*, vol. 39, no. 1, July 2015.
- (J) Miller, Kristie. *Ellen and Edith: **Wilson**’s First Ladies*. Lawrence: University of Kansas Press, 2010.
- (H) Miller Center of Public Affairs, University of Virginia, at: <http://millercenter.org> (has summaries on lives of all U.S. presidents).
- (H) Moe, Richard. *Roosevelt’s Second Act: The Election of 1940 and the Politics of War*. New York: Oxford University Press, 2013, chapter 6: “A Year of Consequence (1940). This work cites **FDR**’s ambivalence about running for a third term in 1940.
- (D) Murphy, Jay W., M.D. *What Ails the White House? An Introduction to the Medical History of the American Presidency*. Overland Park, KS: Leathers Publishing, 2006. Murphy called cancer “an unspoken word in the press” until around mid-twentieth century.
- (D) Owen, Lord David, M.D.. “Winston Churchill and Franklin D. **Roosevelt**: Did Their Health Problems Impair Their Effectiveness as World Leaders?” Churchill Lecture Series, London, 5 May, 2009, transcript. Note that Churchill had a hidden illness, too: a 1953 stroke that he covered up.
- 
- \_\_\_\_\_ . *In Sickness and in Power: Illnesses in Heads of Government During the Last 100 Years*. London and New York: Praeger, 2008. Owen favors the theory (also advanced by Ghaemi) that **JFK** had two different periods of pharmacological treatment, with 1962-1963 being the most efficacious time.

- (D&H) Park, Bert Edward, M.D. *The Impact of Illness on World Leaders*. Philadelphia: University of Pennsylvania Press, 1986. This work by a neurosurgeon was a forerunner to a similar effort by J. Post and R. Robins (see below).
- (B) Perkins, Frances. *The **Roosevelt** I Knew*. Viking Press), 1946. Among other personal recollections, Perkins described how polio affected **FDR**'s personality. She also spoke on that topic in the works of historians—e.g., Burns, *The Lion and the Fox*, chap. 3. (See full citation above.)
- (H) Pietrusza, David. *1920: The Year of the Six Presidents*. Basic Books, 2007, back cover. The six leaders include Woodrow **Wilson**.
- (M&R) Phifer, Gregg. "Edith Bolling **Wilson**: Gatekeeper Extraordinary," *Speech Monographs*. Vol. 38, no. 4, 1971. Phifer focused on the president's second wife.
- (P) *Politics and the Life Sciences*, special journal issue on presidential inability: Vol. 33, no. 2, Dec. 2014). This edition featured Robert Gilbert, Jerrold Post, Rose McDermott, and other experts on the focus topic. (See separate entries in this bibliography.)
- (D) Post, Jerrold, M.D., and Robert Robins. *When Illness Strikes the Leader: The Dilemma of the Captive King*. (New Haven, CT: Yale University Press, 1995 paperback). This is a fascinating collection of medical cases (physical and mental health) all over the world and throughout history. Among them are U.S. presidents (JFK is not included because his medical details had not yet been released).
- (H) Pressman, Matthew. "How the Press Handled FDR's Disability and How **FDR** Handled the Press, *Journal of the Historical Society*, vol. 13, no.3, Sept. 2013. As the author points out, this relationship was decidedly a two-way street.
- (P&J) Reeves, Richard. *President **Kennedy**: Profile of Power*. (New York: Simon & Schuster, 1993). This is one of a cluster of books that discussed **Kennedy**'s sexuality at some length.
- (H) Reeves, Thomas. *A Question of Character: The Life of John F. **Kennedy***. New York: Macmillan, 1991. As his title suggests, this author's judgment was harsh. In fairness, this revisionist work was an effort to cut through some of the mythology on JFK.

- (J) Sabato, Larry. *The **Kennedy** Half-Century: The Presidency, Assassination, and Lasting Legacy of John F. Kennedy*. Bloomsbury, 2013. Sabato is especially good in discussing the Kennedy legacy.
- (H) Schlesinger, Arthur M., Jr. *The Age of **Roosevelt**: Crisis of the Old Order, 1919-1933*. Volume I (New York: Houghton Mifflin), 2003 Mariner Edition. This is the first of three biographical volumes.
- \_\_\_\_\_. *Jacqueline **Kennedy**: Historic Conversations on Life with John F. **Kennedy***. New York: Hyperion, 2011. This recent compilation, which includes contributions from JFK's daughter Caroline and historian Michael Beschloss, is based on seven interviews that Kennedy's wife did with Schlesinger in 1964.
- \_\_\_\_\_. *A Thousand Days: John F. **Kennedy** in the White House*. New York: Houghton Mifflin Co., 1965. This history is written with great affection for its subject (but very little objectivity) by a JFK advisor.
- (H) Shenkman, Richard. "Interview with Bob Dallek." History News Network, Nov. 2002, special edition in response to a preview of Robert Dallek's 2003 book on **JFK** revelations. Historian Shenkman was then editor of the history site. Accessed 12 Sept. 2013 at: <http://hnn.us/article/1131> (article number).
- \_\_\_\_\_. "Johnny, We Hardly Knew Ye." HNN, 26 Nov., 2001, #1111.
- (J) Sloven, Patrick. *The Politics of Deception: JFK's Secret Decisions on Vietnam, Civil Rights, and Cuba*. St. Martin's Press, 2015. Sloven was not a fan of **JFK**.
- (P) Smith, Jean Edward. ***FDR***. New York: Random House, 2007. This biography by a political scientist won the 2008 Parkman Award. Smith has also written biographies of other presidents, the most recent (2016) being a highly unfavorable one on George W. Bush. (Even its first sentence is damning.)
- (D) Steinberg, David, M.D. "Dr. Lahey's Dilemma," in the *Boston Globe* magazine of 29 May 2011, available at: [archive.boston.com/lifestyle/articles/2011/05/29/](http://archive.boston.com/lifestyle/articles/2011/05/29/) This article discusses yet another prediction and cover-up regarding **FDR**'s final illnesses.
- (D) Stettinius, Jr., E.R., M.D. See Bruenn above. (**FDR** information)

- (J) Stossel, Sage. *Atlantic Unbound* telephone interview about **JFK** with Robert Dallek. 18 Nov., 2002, at: [www.theatlantic.com/past/docs/unbound/interviews/int2002-11-18.htm](http://www.theatlantic.com/past/docs/unbound/interviews/int2002-11-18.htm)
- (H) Tobin, James. *The Man He Became: How FDR Defied Polio to Win the Presidency* (New York: Simon and Schuster, 2014 (hardcover in 2013). This work includes a fascinating section on the etiology of polio.
- (D) Travell, Janet, M.D. *Office Hours, Day and Night: The Autobiography of Janet Travell, M.D.* Mountain View, CA: World Publications, 1968. The first female physician in the White House, she gave **JFK** frequent shots for his back pain.
- (P) Tumulty, Joseph P. *Woodrow Wilson As I Know Him*. New York: Doubleday, 1921. Available at: <https://archive.org/details/woodrowwilsonasi011310mbp/> Tumulty had been Wilson's loyal chief of staff, but Wilson banished him after Tumulty published this book.
- (H) Ward, Geoffrey C., ed. *Closest Companions: The Unknown Story of the Intimate Friendship Between Franklin Roosevelt and Margaret Suckley*. Boston: Houghton Mifflin, 1995. This account, relying on the letters and diaries of **FDR**'s distant cousin and late-life companion, reveals important details on **FDR**'s health in the last year or so of his life.
- (D) Weinstein, E. A., M.D. *Woodrow Wilson: A Medical and Psychological Biography*. Princeton University Press, 1981, This was an exercise in psychohistory.
- (H) Weintraub, Stanley. *Final Victory: FDR's Extraordinary World War II Presidential Campaign* (Boston: Da Capo Press, 2012). Also available is the audiotape of a Detroit radio interview with Weintraub on the Craig Fahle Show, 6 Nov., 2012, at: [wdet.org/shows/craig-fahle-show/episode/stanley-weintraub-book-fdr-presidential-campaign/](http://wdet.org/shows/craig-fahle-show/episode/stanley-weintraub-book-fdr-presidential-campaign/)
- (J) White, Theodore. *The Making of the President, 1960*. Harper Collins, 1961. This landmark book on **JFK**, Nixon, and others was followed by other election sagas during the late twentieth century.

(H) Widmer, Ted. *The Men with the President's Ear*. Abrams, 2013. Widmer observed that despite his closeness to **Kennedy**, Schlesinger may *not* have known JFK's complete health story.

---

\_\_\_\_\_ and Caroline Kennedy. *Listening In: The Secret White House Recordings of JFK*. Dictaphone tapes (up to twenty-five hours) are on a CD inside this 2012 book by a presidential historian and the president's daughter. Boston: John F. Kennedy Library Foundation 2010.

(H) Wills, Garry. *The Kennedy Imprisonment: A Meditation on Power*. Boston: Little, Brown and Co., 1981, 1982, 2002. The last edition of this psychohistory appeared a year before historian Robert Dallek's blockbuster revelations on JFK's health.

(B) Wilson, Edith Bolling. *My Memoir*, Bobbs-Merrill, 1939. In her account of events after Woodrow **Wilson**'s major stroke, this first lady stated firmly that she did *not* make any significant decisions as his substitute in office.

(D) Hugh Young, M.D. *A Surgeon's Autobiography*. Harcourt, Brace and Co., 1945. See his chapter on "The Illness of President **Wilson**."

## Curriculum Vita

Joyce E. Latham



Program of Study: Humanities

Degree and Date Conferred: Master of Arts, 2016

Secondary Education: Cardome Academy, Georgetown, KY, graduated June 1960

Collegiate Institutions Attended:

\*1960 to 1962 and 1965 to 1967, University of Kentucky, Lexington, KY

English major; received B.A. in Dec. 1967

\*1990s, Johns Hopkins University, Baltimore, MD (12 credits for M.A. in liberal arts)

\*2011 to 2016: Towson University, Towson, MD, M.A. degree Nov. 2016

Publications:

--Poetry:

\* Poetry book to be issued early 2017

\* Three poems in *Journal of Graduate Liberal Studies* (now *Circumference*), 1995

\* Sole winner, 2010 poetry contest, Kentucky Women Writers, affiliated with University of Kentucky, plus awards from other poetry contests and journals, 1990s to present

--Articles and Book Reviews:

\* Freelance articles and original photographs published up to early 2000s in journals, newspapers, other periodicals, including *Historic Preservation*, *Washington Post*, *Wilson Quarterly*, *Journal of Popular Culture*, and others (details available)

--Testimony on nursing home issues: Written/delivered to D.C. City Council committee (late 1990s), based on volunteer service for eight years as volunteer Nursing Home Ombudsman (details available on many other types of volunteer work)

Professional positions (all in Washington, DC):

\*Publications Director and Speechwriter at two federal agencies (National Science Foundation, U.S. Dept. of Interior), 1981-1996 (retired in 1996)

\*Freelance writer-editor prior to 1981

