

The Misunderstood Asthma of Theodore Roosevelt

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In this special article, we examine the asthma of President Theodore “TR” Roosevelt (1858-1919). Through a comprehensive review of thousands of source documents, and a modern understanding of asthma, we examine several misunderstandings, including the longstanding assertion that TR’s illness was “psychosomatic.” TR’s respiratory problems began in early childhood, and the historical record provides strong evidence for poorly controlled, persistent asthma. Like many patients, his asthma entered a relatively quiescent stage during adolescence, coincident with initiation of a vigorous exercise program when TR was 12 years old. Nevertheless, TR continued to suffer serious asthma exacerbations, both in adolescence and adulthood. Although psychosocial issues affect most chronic diseases, there is little (if any) support for assertions that TR’s asthma was psychosomatic. We believe that TR’s childhood struggles with asthma, and the misconception that he vanquished his illness through exercise, were experiences that profoundly affected his worldview. TR is known for his appreciation of life’s struggles and for a bedrock belief that people can create major change with sufficient motivation and hard work. In different ways, misunderstandings about asthma contributed to the early development of these personal characteristics. Together with later experiences, they contributed to a lifetime of action that changed modern history. © 2015 American Academy of Allergy, Asthma & Immunology (J Allergy Clin Immunol Pract 2015;3:696-701)

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Theodore “TR” Roosevelt (1858-1919) was an American politician, author, soldier, and explorer. He is the focus of many biographies and widely known for his exuberant personality and broad range of interests and achievements. He first gained national fame for his courage as a Rough Rider in the Spanish-American War of 1898. As President (1901-1909), he advanced progressive policies and promised a “Square Deal” to the American people. He greatly expanded the system of US national parks and forests, won the Nobel Peace Prize,

and ordered construction of the Panama Canal. By all accounts, he led an extraordinary life and he is consistently ranked by scholars as one of the greatest US Presidents. Indeed, his face adorns Mount Rushmore alongside those of Washington, Jefferson, and Lincoln.

As a child, however, TR described himself as a “sickly, delicate boy” whose life was dominated by his struggle with asthma.¹ In many articles and books, including David McCullough’s biography *Mornings on Horseback*,² TR’s asthma is described as psychosomatic. Based largely on the “astonishing” frequency of asthma exacerbations that McCullough noted on weekends, the award-winning historian concluded that TR was using his illness to spend more time with his parents and to avoid church on Sunday morning. After several years of this behavior, TR’s father told his sickly son that he needed to get physically fit. In response, TR initiated a vigorous exercise program and, as the story goes, he overcame his asthma. With a good mind and now sound body, he was able to embrace the “strenuous” life for which he became so justly famous.

To go beyond this simple story, TR’s asthma first needs to be placed in its medical historical context. The first modern treatise on asthma was published by Salter in London in 1860.³ Salter—and most other “asthma experts” during TR’s lifetime—recognized the terror that accompanied asthma exacerbations, but they also were clear that asthma was a neurotic illness. Children with asthma were routinely described as anxious, and many treatments focused on sedation. Although this understanding seems odd today, it was widely taught throughout TR’s life⁴ and into the mid-20th century. Over the 150 years since the publication of Salter’s asthma treatise, tremendous strides have been made in our understanding of asthma pathogenesis, and in the clinical diagnosis and management of asthma.⁵ The objective of this article was to better understand TR’s asthma and to interpret this information in the context of current knowledge. We focused particular attention on the assertions that TR’s asthma was psychosomatic and that he cured his asthma by initiating a vigorous exercise program.

METHODS

Research for this special article included a review of TR’s childhood diaries,⁶ autobiography,¹ and dozens of published biographies.⁷⁻¹³ We also reviewed earlier journal publications on TR’s asthma.¹⁴⁻¹⁷ Most importantly, we performed an exhaustive review of the thousands of family letters and other historical materials at the Houghton Library at Harvard (see Table E1 in this article’s Online Repository at www.jaci-inpractice.org for the complete list of source documents). Together, this comprehensive review allowed us to create a detailed account of the many illnesses experienced by TR during his childhood and adolescence, along with a more anecdotal account of his respiratory problems as an adult.

To address McCullough’s weekend hypothesis,² we used a binomial probability test to analyze the frequency of illnesses on weekends (defined as Saturday and Sunday). To address his focus on

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Theodore Roosevelt Collection, Harvard College Library

FIGURE 1. Theodore Roosevelt at age 4 years. (Courtesy of the Houghton Library, Harvard University; 520.11-003).

the events of 1869-1870, when TR's diaries provide substantial daily details,⁶ we repeated the analysis for those years alone. To address the possibility that all childhood emergencies go up slightly on weekends, we also examined data from the National Hospital

Ambulatory Medical Care Survey (NHAMCS) during 1997-2010.¹⁸ NHAMCS is a 4-stage probability sample of all US emergency department visits. Asthma exacerbations were identified using the ICD-9 diagnostic code 493.xx. We used Stata 13.1 (StataCorp,

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