About Three Old Men: An Inquiry Into How Cerebral Arteriosclerosis Has Altered World Politics

A NEUROLOGIST’S VIEW

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Abstract:

In the recent past three men were disabled by cerebral arteriosclerosis: Wilson, Hindenburg and Lenin. The illness of these particular people altered the course of history. The thesis is offered that this was so not just because these individuals were ill but because of the specific qualities of their disease, cerebral arteriosclerosis.

Additional Key Words

organic brain syndrome Wilson Hindenburg Lenin

□ In recent times, at least three old men have been invalided secondary to cerebrovascular disease, and I would like to suggest that it was this particular disease in these particular people that altered the course of modern history. The three were: Woodrow Wilson, Field Marshal Paul von Hindenburg and N. Lenin. Several other recent historical figures can be named who suffered from cerebrovascular disease at important times in their lives; however, the time span is so short between those events and now that it is difficult to be very objective about the importance of this: Franklin Roosevelt, Joseph Stalin, Winston Churchill and Dwight Eisenhower.

Wilson

Medically, Wilson* exhibited the stuttering course of cerebrovascular disease which may precede the major catastrophe of a stroke. He is an excellent example of how important and devastating, although less dramatic medically, the repetitive “small stroke” may be. There seems little doubt that Wilson’s cerebrovascular disease significantly contributed to the defeat of the United States’ support of the League of Nations. It is less definite whether our support of the League of Nations would have given that organization enough vigor to have changed the course of history. But such a hypothesis is at least reasonable enough to inquire into one of the possible reasons the League failed.

The stroke that Wilson suffered at the height of his battle with the Senate for ratification of the Versailles Treaty which included approval of the League of Nations represented only the final coup in what can be seen in retrospect as a protracted history of cerebral arteriosclerosis with the nonspecific, progressive personality changes associated with brain damage, i.e., an exaggeration of the underlying, premorbid personality.

Without attempting to make any value judgments, there appears to be an agreement among witnesses who were not emotionally involved that Wilson was rigid, compulsive, overmoralizing and ambitious; he needed affection or at least agreement and was intolerant of any challenge to his ideas or authority. He was cool and aloof in his contact...
with others, except with those very close to him. However, as Governor of New Jersey and during his first years of the Presidency he was capable of making those adjustments which are necessary to succeed in politics. Alexander and Juliette George describe him as a "—versatile political strategist; by adjusting his views to conform with popular sentiment, cultivating political strategist; by adjusting his views to conform with popular sentiment, cultivating the favor of men who could advance his interests by making and breaking commitments as expediency dictated, he maneuvered his way to his goal." During his first term as President, by "—using a judicious mixture of political pap and high-minded persuasion (he) half led, half coerced the unstable Democratic party to enact what has been called 'the most remarkable program of national legislation' passed since 1865." It was this personality which gradually became exaggerated, simultaneous with the clinical evidence of progressive cerebrovascular disease until, as Thomas A. Bailey describes, "...with his own sickly hands, Wilson slew his own brain child (the League of Nations)."

In 1906, at the age of 50, while President of Princeton University, Wilson arose one morning blind in his left eye. This was diagnosed as a thrombosis of an ophthalmic artery. His first wife wrote to a friend that his trouble was due to a "... hardening of the arteries ... he has lived so intensely ... of course, it is an awful thing ... dying by inches and incurable." No further definite clinical signs of central nervous system disease appeared until April, 1919, 13 years later when, at the age of 63, he was attending the peace conference in Paris.

Wilson had returned to the peace conference in Paris in March, 1919, after a short visit to the United States. The meeting became long and the arguments heated. Then, on April 3, he developed a fever and was confined to bed. Dr. Grayson, his personal physician and close friend, had first considered food poisoning but later changed the diagnosis to influenza. Herbert Hoover says it was an "infection of the prostate and bladder." However, regardless of the cause of the illness it seems quite likely that there must have been some aggravation of his cerebral disease. He never completely recovered his vigor after this illness. He became irritable and suspicious. Ike Hoover, the White House's head usher, wrote in his autobiography: "—one thing was certain, he was never the same after this little spell of sickness." Herbert Hoover noticed after this illness "—that the previously incisive, quick mind became a slow and more resisting mind."

That hot Washington summer found a clique of senators strongly against a League. Wilson believed that taking the issue of the League to the people would help in getting it approved in the Senate. On August 22, he began a long and trying trip against the strong advice of Dr. Grayson. Almost as soon as the trip started, the President began experiencing severe headaches. "With each revolution of a train's wheels" wrote the second Mrs. Wilson, "my anxiety for my husband's health increased. He grew thinner and headaches increased in duration and intensity until he was almost blind during the attacks."

Then on the return leg of the tour, just out of Pueblo, Colorado, the headaches became even more intense. The President grew unusually restless. Suddenly he developed a weakness on the left side of his face. This was his first sign in the course that ended in a complete stroke a week later. Thirteen years before, he had a left opthalmic artery thrombosis (left carotid disease?), and now began an infarction in the distribution of the right carotid artery.

Under these circumstances Wilson had to agree to cut his tour short and return to the White House.

Mrs. Wilson describes what happened next: "At 11, on Sunday morning, September 28, 1919, the train pulled its heavy way into Washington ... all the rest of the day my husband wandered like a ghost between the study at one end of the hall and my room at the other. The awful pain in his head that drove him relentlessly back and forth was too acute to permit work or even reading. ... the next day, the third since our return, the President seemed a little better. I had been sleeping fitfully, getting up every hour or so to see how my husband was. ... at 5 or 6 in the morning I found him sleeping normally, as it appeared. Relieved, I dozed off again until after 8. This time I found him sitting on the side of the bed trying to reach a water bottle. As I handed it to him, I noticed that his left hand hung loosely. 'I have no feeling in that hand,' he said. 'Will you rub it? But first help me to the bathroom.' He moved with great difficulty, and every move
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brought spasms of pain; with my help he gained the bathroom. It was so alarming that I asked if I could leave him long enough to telephone the doctor. He said yes, and hurrying into my room I reached Dr. Grayson at his house. While on the phone, I heard a slight noise and rushing into my husband’s apartment I found him on the bathroom floor unconscious . . .” He had suffered a complete stroke, paralyzing the left side of his body.

Thereafter the President remained almost incommunicado for several months, crucial months during which the treaty was argued and finally defeated in the Senate. Mrs. Wilson acted as a barrier between the President and the outside world. There has been much scholarly discussion as well as vicious gossip concerning her role. Twenty years later, she wrote, “I asked the doctors to be frank with me; I must know what the outcome would be, so as to be honest with the people. They all said . . . recovery could not be hoped for, unless the President was released from every disturbing problem during these days of nature’s efforts to repair the damage done.”

This sort of medical advice—an attempt to restrict thinking as if it was a means of resting the brain—was exactly what the Russian and German physicians who attended Lenin four years later for his stroke advised with the same disastrous results to his nation. “How can that be,” I asked the doctors, ‘when everything coming to the executive is a problem.’ Dr. Durcum leaned towards me and said, ‘Madam, it is a grave situation, but I think you can solve it. Have everything come to you; weigh the importance of each matter, and see if it is possible by a consultation with the respective heads of the Department to solve them without the guidance of your husband. In this way you can save him a great deal . . . For Mr. Wilson to resign would have a bad effect on the country, and a serious effect on our patient. He has staked his life and made his promise to the world to do all in his power to get the treaty ratified, and make the League of Nations complete. If he resigns, the greatest incentive to recovery is gone . . .’”

During all these years of progressive central nervous system disease, what was happening to Wilson’s personality? His particular personality characteristics have already been mentioned. “Wilson had changed little over the past ten years,” according to biographer Arthur Link,7 “except that the advancing age sharpened his traits of personality.”

With the war over and, one must suppose, with increasing cerebral arteriosclerosis what ability he had to manipulate others and to compromise seems to have slipped away quickly. His going to Paris and his selection of men to accompany him were against advice and lacked insight into political expediency. He even had a falling out with the two closest men who accompanied him, Colonel House and Secretary of State Lansing.

On his return to the United States, it has been estimated that the majority of the people and, more important, the majority of the Senate were in favor of ratification of the Treaty and the League of Nations. Wilson could have had this by agreeing to several compromises which would not have seriously affected the League. This is the consensus of Bernard Baruch, Herbert Hoover, and other close associations, as well as at least unofficial government sources in England and France. But now he would brook no change, no compromise! This was the culmination of a rigid personality which accused any dissension of being immoral; it wrecked all possibility of the Senate ratifying the Treaty.

John Morton Blum8 has suggested, “Had Wilson died, the Democrats would probably have agreed to the few compromises; the United States might then have been a member of the League; Wilson, the martyr,—his peroration at Pueblo, a fitting final testament. As it was, the imprisoned shadow of the once noble man cast across his work and reputation a dreadful fall . . . Wilson at his healthiest best brought the Treaty to the shoals. Wilson at his crippled worst steered it to disaster. This was sad for him, his country and the world.”

As an epilogue, Wilson apparently had no further major apoplectic episodes. He retired to an essentially unproductive, private life after completing his term as President. He slowly grew worse until he was largely confined to his bed. He died, peaceably, on Sunday, February 3, 1924. The League of Nations, of course, followed him down this fateful path to death, but it suffered a number of disastrous apoplectic episodes, and unlike Wilson, when it died in September, 1939, it died in agony as a German Army crossed into Poland.
**Hindenburg**

Hindenburg certainly played a significant role in the rise to power of the Nazi Party in Germany. It was this senile old man who found it impossible to resist Hitler even though it is reasonable to theorize that a less demented man occupying Hindenburg's position of President of the Weimar Republic might well have defeated the Fuehrer's ultimate seizure of power. As with Wilson, an inquiry concerning Hindenburg reveals a progressive exaggeration of personality traits as his brain disease increased until he presented a caricature of what he had been. Biographers do not record any distinct cerebral ischemic episodes, but all agree that advancing age took its explicable toll and this seems most likely to have been due to cerebral arteriosclerosis.

Paul Von Beckendorf und von Hindenburg was born in 1847 so that when he died in 1934 in the first year of Hitler's reign he was 86 years old. His family was steeped in military tradition and he had a Spartan childhood. He entered the Prussian Cadet Corps at the age of 11 and was commissioned in the Third Regiment of the Prussian Foot Guards at the age of 16. He had his baptism of fire during the Prussian-Austrian War of 1866 and also fought in the Franco-Prussian War. Schlieffen, who as chief of staff for the German Army was in large part responsible for the strategic plans that were to be used in the beginning of World War I, suggested that Hindenburg should be his successor. Hindenburg's qualities were his appearance and temperament. He was a large man even by Prussian army standards; imperturbable and calm he at least conveyed an impression of determined strength and unquestionable authority. Performance of duty was his rigidly adhered to moral code. But actually he lacked imagination and initiative and, as time was to show, he was very reluctant to assume responsibility. His attributes were apparently insufficient to outweigh his deficiencies and so, in 1911, his resignation from the Army was accepted.

When World War I began, he was still felt not to be of sufficient value or importance to be recalled immediately. It was not until after the German armies in the East began doing poorly that he was called to active service again. The consensus is that the successes on the Eastern front that followed were largely the work of two of his lieutenants, Ludendorff and Hoffmann. But the popular credit went to Hindenburg. This pattern of Hindenburg as the hero but whose initiative, imagination and responsibility were actually the results of a subordinate became a pattern of life. Hindenburg came away from the defeat of the German Army still the heroic figure. General Groener, who was to assume the decision-making role after Ludendorff was fired by the Kaiser as the scapegoat for the failure of the German Army, was asked years later why he made no effort to protect his own name and reputation in the ultimate surrender of the German Army; he replied: "Because I believe that, in the interest of the new Army, the myth of Hindenburg should be preserved. It was necessary that one great German figure should emerge from the war free from all blame that was attached to the German Staff." Hindenburg's attitude toward this sort of role is well reflected in his saying to Groener concerning the same episode that allowed Hindenburg to remain the hero, "... of course, you (Groener) were right; but once more you must be the black sheep." However, later, in regard to a different although related occurrence, Hindenburg said, "... you all blame me, but you should blame Groener."

If Hitler did anything for German politics, it was to simplify things. Between 1919 and the time the Nazis came into power, the political situation was one of chaos. There were ten major parties, most of which represented rather specific, selfish interests which more often than not did not include the interest of the nation as a whole. In order to bolster the parties of the right and perhaps in an attempt to reinstitute the monarchy, Hindenburg was convinced to leave retirement and was elected President of the Weimar Republic in 1925.

There was considerable lack of stability in the various governments that functioned under him. This was in part due to the intrigues of the various parties (particularly the parties of the right), in large part to the economic and social difficulties of the people, and in part to Hindenburg's inability to lead with any degree of imagination or personal initiative. The Nazi party grew in power, but Hindenburg thwarted various efforts which may well have prevented the ultimate rise of Hitler or his ideas. There is no reason to believe that Hindenburg was at all
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sympathetic with Hitler or his ideas; in fact, just two months before Hindenburg named Hitler as chancellor, he was reluctant to see him because he thought the leader of the Nazi party was crude and desirous of destroying the constitution.

But Hindenburg was getting old and senile.

When Von Papen’s cabinet resigned in 1932, Hindenburg again had to receive the leaders of the major political parties. He was so far gone mentally that his Secretary of State, Meissner—now an intriguer for the extreme right—had to write down for him word for word the questions the President put to his callers and the vague statements he was to make after they had their say.

Hindenburg was described as no longer capable of prolonged concentration and often dozed off during lengthy conferences. His conversation, even when the audience was meeting with him on official business, would often wander off to the happier days of the Prussian-Austrian War of 1866. He could recall the name of noncoms who served under him then, although even the memory of his famous victory on the Eastern front at Tannenberg in 1914 was hazy.

At least some of Hindenburg’s biographers agree that all those things that had characterized his personality in the past were now, in his senility, exaggerated. Imagination, initiative and the ability to assume responsibility, never his strong assets, were at their lowest ebb.

On January 18, 1933, Hindenburg authorized Hitler to form a cabinet in spite of the fact that the Nazi party may have been in a weakening condition. Once Hitler got control of the government, he was able to secure his party’s position by such devices as burning the Reichstag and calling this a Communist plot. However, although Hitler was able, through quasi-legal acts, to abolish the constitution and abrogate the powers of the President, Hindenburg still held a last, although fragile thread that might have been significant in holding Hitler in check. Andreas Dorplae19 believed that the Führer “whether from awe of the (Field) Marshall or from fear of political repercussions did not ignore various objections Hindenburg had if they were made with sufficient vigor. Yet as so often before, Hindenburg refused to involve himself in trouble or controversy and the decline of his physical state served to reinforce his natural lethargy.”

In June, 1934, Hindenburg left Berlin for his home in Neudeck. He declined rapidly and died quietly on August 2, 1934. Senility, probably secondary to cerebral arteriosclerosis, had run its natural course in an old man—not just another old man, but an old man who, at least in the last years of his life, may have held the chance and then lost it to prevent history running its tragic course toward the calamity of a great war, the results of which still engulf us.

Lenin

Lenin’s cerebrovascular disease presented as a stuttering course somewhat similar to Wilson’s. The major disability that Wilson’s illness imposed on him was an alteration of personality whereas, in the case of Lenin, although there may well have been some change in personality, the major influence of his disease process on history was the frank physical signs of his cerebrovascular disease—his hemiplegia and expressive aphasia. These prevented him from assuming an active role in selecting his successor. Prior to his illness, he was responsible for elevating Stalin to several important positions in the government, but in the last years of his life, Lenin developed grave doubts about Stalin and wanted Trotsky to be heir-apparent. If Lenin had lived to accomplish this, the course of modern history could well have been different. Trotsky and Stalin were, of course, both dedicated Communists, but they were significantly different personalities, had basic differences in philosophy, and probably were of different degrees of intelligence. What the world would have been like if Trotsky rather than Stalin had succeeded Lenin is, of course, difficult to say; the West’s relations with Communism might well have been even worse than they have been in the last 50 years. But, in any case, there is legitimate reason for believing that the world political situation would have been different!

In the winter of 1921 Lenin began suffering from insomnia, nausea, fainting spells and intense headaches; he was only 51. The headaches that Lenin suffered were described as being very intense and so were Wilson’s. This is certainly not the sort of headache usually seen in patients with cerebrovascular
disease. I wonder whether this represents a peculiar pattern seen only in famous men who have cerebrovascular disease or whether it is merely a poetically licensed exaggeration of a symptom for dramatic purposes.

In March, 1922, during the Eleventh Congress of the Communist Party, Lenin was already an ill man. This particular Congress, undoubtedly at the instigation of Lenin, appointed Stalin General Secretary of the Central Committee.

A week after this appointment was made, Trotsky was proposed by Lenin for the office of Deputy Chairman of the Council of Peoples Commissars, which represented his being named heir to Lenin's position. Trotsky rejected this appointment for various reasons but, in any case, the nomination for the "prince" had been established. The stage was now set for the battle of the "throne" once the ruler should die.

On May 26, 1922, Dr. Rozanov was asked to see Lenin because of abdominal pain and vomiting. The physician was less impressed with Lenin's gastrointestinal complaints than with the finding of some slurring of speech and a mild right hemiparesis. This, then, was the first of a series of strokes that was to result in Lenin's death 20 months later. The advised treatment was rest with an absolute minimum of work, the same advice, you will recall, that was given to Wilson.

Lenin apparently improved some and the doctors allowed him to return to work in the Kremlin although on a reduced schedule. Then, in December, after several attacks of nausea and vomiting and a return of his insomnia and headaches, the slight right-sided weakness suddenly became more definite.

Shortly after this second stroke Lenin dictated a brief note in which he for the first time indicated his doubts about Stalin: "Comrade Stalin, having become General Secretary, has concentrated immeasurable power in his hands, and I am not sure he always knows how to use that power with sufficient caution."

On awakening the morning of January 21, 1924, Lenin apparently was as well as he had been. But as the day wore on, he ate poorly and confined himself to his bed, sleeping most of the time. Then about 6 P.M., his breathing became labored and he became unresponsive. This was followed by a series of convulsions and finally death at 6:50 P.M.

The evidence for poisoning is quite tenuous and seems to be based largely on there being such a very good motive plus the presence of conflicting stories from unofficial and usually minor witnesses. An autopsy was performed which gave in excellent detail evidence of severe cerebral arteriosclerosis with multiple hemispheral infarcts particularly on the left. "In the left hemisphere: 1. in the anterior central gyrus; 2. in the area of the temporal and occipital pole; 3. in the area of the
the fissura paracentralis and 4. in the area of the high gyri there are noticeable signs of pronounced collapse of the cerebral surface. In the right hemisphere, at the border between the temporal and occipital poles, there are two adjacent spots of collapse of the brain surface.” The vertebral and basilar arteries were hardened and their lumens narrowed to “tiny slits.” There was also considerable narrowing and hardening of the anterior, middle and posterior cerebral arteries and the right internal carotid artery; the lumen of the left internal carotid artery was completely obliterated. The cerebral hemispheres on section showed cystic degeneration in the various areas of softening that were noted on the surface. The cerebellar vermis was found to be not remarkable and presumably the brain stem at the level of the fourth ventricle was at least partially inspected because it was noted that the “fourth ventricle was free of any pathological contents.” Then we come to an enigma which if there had been more examination or greater details reported may have given evidence that Lenin did, indeed, die of an acute cerebrovascular accident rather than something else, such as poisoning. “The vascular plexus overlying the corpora quadrigemina is well irrigated with blood and there are signs of fresh hemorrhage in this area.” What vascular plexus is there overlying the corpora quadrigemina? Was this hemorrhage something that actually involved the corpora quadrigemina? Although the fourth ventricle was apparently inspected and the cerebral hemispheres must have been sectioned, there is no description of sectioning and inspecting the mesencephalon. That this hemorrhage was not just some minor finding is reflected in the fact that it was listed specifically in the final anatomical diagnosis. No diffuse subarachnoid hemorrhage was described. An acute hemorrhage in this area, secondary to arterial disease, could conceivably cause an acute demise not dissimilar to what did occur. Although Lenin was unwell for 12 hours, the acute terminal course lasted only 50 minutes. If there had been an acute hemorrhagic lesion in this area, this would have been a quite adequate explanation for his almost sudden death, and it would have been difficult to understand how a poison could have produced these pathological changes. But we do not know!

So, here are at least three old men whose cerebral arteriosclerosis may well have influenced the course of recent history. I would submit that it was not only the fact that they were ill at certain critical times but that it was at least in part the specific quality of their illness that was the important thing.

References
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