

Celebrities and candor

By Barron H. Lerner, M.D.



When the famed ballplayer's condition worsened, sports journalists who had been giving optimistic reports clammed up.

In the springtime, as the nation's thoughts turn to baseball, it is worth looking back 70 years to 1938—to the final full season played by the great Lou Gehrig. When one thinks about Lou Gehrig and the Ivy League, one usually thinks of Columbia, where the famed first baseman attended college and set hitting records. But Gehrig had a Dartmouth connection, too.

Dr. Harold Habein, Jr., a 1945 Dartmouth Medical School graduate, is one of only a few people still living who interacted with Gehrig after he was diagnosed with amyotrophic lateral sclerosis (ALS). The devastating neurologic illness that killed the Yankee slugger is now, of course, commonly called Lou Gehrig's disease. Medical historians like me who are interested in researching Gehrig's illness still periodically track down Dr. Habein in Billings, Mont., where he practiced surgery for 30 years. Habein, now 84 years old, never actually met Gehrig—but his father, Dr. Harold Habein, Sr., did. An internist at the Mayo Clinic, it was he who diagnosed Gehrig.

Feat: Gehrig showed the first signs of illness in 1938, when he had difficulty hitting and fielding. But a late-season recovery suggested he was just exhausted. After all, he'd played more consecutive games than any other player. But by the spring of 1939, it was clear something was gravely wrong. Gehrig let balls go through his legs, stood frozen at the plate, and reportedly fell off a bench in the locker room. Nevertheless, he began the season at first base and, in what might be the greatest sports feat of all time, managed to get four hits in 28 at bats before he was removed from the lineup in May of 1939.

Gehrig had seen several doctors in the previous year but hadn't been properly diagnosed—an example of the so-called VIP syndrome, in which famous people receive poor care because doctors are blinded by their patient's star status. Eleanor Gehrig, the ballplayer's devoted wife, feared a brain tumor. But when Gehrig saw Dr. Habein on June 13, 1939, the diagnosis was almost instantaneous.

Disorder: The younger Dr. Habein shared with me his father's account of how he was able to so quickly identify Gehrig's ALS: "The most serious observation was the telltale twitchings, or fibrillary tremors of numerous muscle groups. I was shocked because I knew that these signs meant amyotrophic lateral sclerosis." One might wonder how an internist, even as capable a one as Dr. Habein, could so easily diagnose a fairly uncommon disorder. It turns out that his mother had died of ALS just a few years earlier.

When Gehrig was discharged from Mayo on June 19, the hospital

released a formal statement (with Gehrig's permission) indicating the findings. Newspapers across the country avidly reported the diagnosis and, for a time, the progress of Gehrig's illness. Such candid disclosure was highly unusual in that era.

The younger Habein, then 16 years old, was away at camp at the time. But he heard the story when he got home and soon received some gifts from the grateful Gehrig: an autographed poster and a baseball signed by the entire Yankees' roster. (These items were later handed down to the next generation—Peter Habein, a 1979 Dartmouth College graduate who is a lawyer in Billings.) Until he could no longer walk, Gehrig continued to travel periodically to Mayo for checkups with another physician, Dr. Paul O'Leary.

Lou Gehrig's story demonstrates the mixed messages generated by celebrity illnesses. On the one hand, such events can serve as a tremendous educational opportunity. In Gehrig's case, the public learned about the diagnosis and treatment of an uncommon neurological disorder. Gehrig received thousands of letters from individuals with ALS and similar conditions.

On the other hand, much misleading information can be propagated, by patients and by the press. For example, when Gehrig's condition worsened, sports journalists who had been giving optimistic reports clammed up, for reasons of both respect and privacy. As one later wrote, "All of us, or rather most of us, in the newspaper game had decided we'd let Gehrig die in peace." *Pride of the Yankees*, the moving 1942 film starring Gary Cooper as Gehrig, omitted all mention of his deterioration and death, ending with Gehrig walking out of Yankee Stadium following his famous "luckiest man" speech.

Illusions: Gehrig himself was even misled by his physicians about the mortal nature of his disease, despite the fact that he eagerly sought the truth. "I feel you can appreciate how I despise the dark," he wrote to Dr. O'Leary, "but also despise equally as much false illusions." Yet O'Leary, with Eleanor Gehrig's assent, never told his patient he was dying. Physicians in his father's era, Dr. Habein reminded me, routinely shaded the truth, figuring it would preserve their patients' hope. This type of paternalism is much less common today.

Gehrig died on June 2, 1941, about two years after his diagnosis and three years after his symptoms had begun. Those figures are about average for ALS patients.

But Gehrig's legacy has lived on in many ways. After his death, Eleanor Gehrig actively publicized and raised funds for a related disorder, muscular dystrophy, and a research center at Columbia. Most notably, however, Gehrig's candor opened the door for other celebrities—such as Betty Ford, Michael J. Fox, Lance Armstrong, and, recently, Elizabeth Edwards—to go public about their struggles with devastating illnesses. The knowledge thus gained benefits us all. ■

The Point of View essay provides a personal perspective on some issue in medicine or science. Lerner is an associate professor of medicine and public health at Columbia University. This essay draws on his book When Illness Goes Public: Celebrity Patients and How We Look at Medicine, for which he received support from the Robert Wood Johnson, Greenwall, and Arnold P. Gold Foundations.