

Biden's physical: What it reveals—and what it doesn't

written by Dr. Ronald Hoffman | December 4, 2021



A presidential physical is always a big deal. Particularly when the current occupant of the White House is, at 79, the oldest president in US history.

The purpose of this analysis is neither to cast doubt on the POTUS's competency, nor, on the other hand, to vindicate claims of his perfect fitness; Opinions about his health are inevitably colored by political partisanship. I did the same analysis for President Trump when he had his physical—and I didn't pull any punches.

So let's do a deep dive on what the exam report discloses, and importantly what it omits.

First, some pertinent statistics for a 79-year-old American male. It's in the interest of the Social Security Administration to compile actuarial tables that predict the life expectancy of recipients. US men, on average, live to 76. Does that mean Biden is living on borrowed time?

On the contrary, their table predicts that the average 79-year-old man has another nine years to live. Some more, some less, of course. That's because with each passing year that you cheat death, your warranty is extended, but it's a bit shorter.

Biden says he intends to run for a second term. If we take him seriously, he would be 82. Social Security bets that he might collect premiums for another 7.4 years.

Another way of looking at it is by calculating the average risk of death in any given year. For 75 to 84-year-old US men, it's 1 in 15. For comparison, a younger president aged 55 to 64 is said to have a 1 in 112 risk of dying in any given year. During a Biden second term when he reaches 85, that risk becomes 1 in 6.

Death aside, we also monitor mental and physical capacity in a President. Studies vary in their estimates of the incidence of mild cognitive impairment in individuals over 75, but it's acknowledged that it may be as high as 50

percent, particularly if there are contributory underlying health issues. Late in his presidency, Ronald Reagan evinced signs of diminished memory as a prelude to a formal diagnosis of Alzheimer's Disease after he left office. Woodrow Wilson had a long history of cerebrovascular disease. His first stroke is reported to have occurred in 1896 when he was only 40; he had several more prior to a debilitating stroke that incapacitated him in 1919 during his second term.

It's common knowledge that President Biden had a ruptured cerebral aneurysm in 1988. The death rate for these catastrophic events is about 1 in 3; timely emergency brain surgery saved him and he went on to undergo an additional elective surgery when a second aneurysm was detected. He made a remarkable recovery, but it's estimated that 22 percent of survivors of ruptured aneurysms have long-term cognitive deficits.

The report by Biden's personal physician, Dr. Kevin C. O'Connor, is incredibly detailed, running six pages single-spaced. It gives the impression of extreme transparency, but at the same time, it can be said that sometimes you can't see the forest for the trees, and the truth may be hidden in plain sight.

The report tackles some of Biden's most obvious problems. His frequent hoarseness and throat-clearing were investigated, and an upper endoscopy revealed inflammation, confirming GERD. Indeed, among the President's medications is the acid-blocker Pepcid. He also suffers from allergies, and uses an antihistamine and a prescription nasal spray containing steroids. So his vocal cords may be under assault from both above and below.

More disturbing is Biden's gait problem, with a history of stumbling. Sometimes he tries to disguise this, with a "hut-two-three" arm-pumping acceleration that gives the impression of vigor.

Dr. O'Connor assembled a team of specialists to break down this problem. The big concerns are Parkinson's Disease or stroke-related deficits which the experts ruled out. Ultimately, the President's doctor attributes the walking problem to age-related wear-and-tear arthritis, some degree of spinal stenosis which compresses nerves that control his legs, instability due to a recent ankle fracture sustained while playing with his dog, and a finding of peripheral neuropathy. The latter makes it harder to feel the ground, and sufferers have trouble planting their feet correctly.

It's suggested by Dr. O'Connor's medical team that Biden get some orthotics and enroll in physical therapy for balance and gait—something I recommend to many of my patients ("Use it or lose it!").

Biden's not diabetic, so why the peripheral neuropathy?

A clue comes from his cardiovascular workup. He suffers from atrial fibrillation like many septuagenarians, and takes a blood thinner, Eliquis, to prevent strokes. He also takes Crestor, a statin drug, because he is said to have had high cholesterol.

But here's what's weird: His total cholesterol is—wait for it—100. Yes, 100. And his LDL cholesterol is a mere 46! It must take a whopping dose of Crestor to get that low. Why so aggressive? It's unusual to lower LDL so zealously unless a patient has a documented history of heart disease. An LDL less than 130 suffices for prevention. Does a president deserve "super-prevention" even when his arteries are healthy?

Absent from the health report are the results of a stress test or heart scan indicating the presence of calcium in the coronary arteries. By contrast, President Trump revealed in his health disclosure that his coronary calcium score was in the 100s and that therefore he was taking a statin, lowering his cholesterol into the moderate range. Does Biden deserve uber-aggressive cholesterol-lowering on account of a high risk of a heart attack? Dr. O'Connor's summary elides that.

And, oh, by the way: Patients taking statins, especially at high doses, are up to 15 times more likely to develop peripheral neuropathy. Is Biden even taking CoEnzyme Q10 to avert statin side effects?

Amid all of this workup, another evaluation is conspicuously absent: a cognitive test. Biden's many slips and blunders have occasioned much speculation about his mental performance. But Dr. O'Connor's report does not touch that third rail. Revealing the results of a simple mini-mental status test, like the MoCA, might go a long way to reassuring the American public that the POTUS is cognitively intact. Nor is there a report of a brain imaging study such as a CT/PET which many patients with cognitive problems might undergo.

And finally, after input from multiple specialists including neurologists, cardiologists, gastroenterologists (he had a benign polyp removed), otolaryngologists, orthopedists, etc. why no mention of urology? After all, prostate problems are ubiquitous in senior men, and PSAs are routine performed, but there's no mention of those in Biden's health report.

And so, O'Connor blandly concludes, "The President remains fit for duty, and fully executes all of his responsibilities without any exemptions or accommodations."

One can't escape the impression that the President's health disclosure is biased, of necessity (in the national interest), towards reassurance of his fitness for office—as probably have been all presidential health assessments since the Founding.