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Michael P. Onorato

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Michael P. Onorato



On 6 August 1927, as Governor General Leonard Wood was undergoing surgery for the removal of a tumor, administrators at Boston's famed Peter Bent Brigham Hospital were struggling to find the right words that would satisfy the press and at the same time calm an anxious wife worried that political foes in Manila would derive some advantage over her ill husband.¹ While the hospital's administration searched for soothing words, Dr. Harvey Cushing was starting to lose control of his ability to remove a large tumor from his patient's brain. On the morning of 7 August 1927, Wood died and a coverup began.

Anyone familiar with the career of Wood knows the essential facts of his decades-old illness. While serving as governor general of Cuba, he struck his head on a chandelier with such force that its decorative point pierced his scalp. This, in turn, led to the formation of a tumor known as meningiomas, which unless totally extirpated, continues to grow. Within three years he began to notice physical difficulties later attributed to that incident. In 1905 he was operated upon and within weeks regained his usual strength and vigor. However, by 1909 his left arm and leg began to show signs of weakness. In February 1910, after several months of self-denial, he was operated on by Harvey Cushing, then a young neurosurgeon at Johns Hopkins University. The relief was almost instantaneous. According to Wood's biographer, it was not until the last half of his tenure as governor general of the Philippines that he began to show the effects of the recurrent tumor. He returned home at the most convenient moment, was operated upon, and died unfortunately while still in the operating room after many hours of struggling for life (Hagedorn 1931, 2: 60-63, 89-90, 465-67, 474, 477-81; see also Lane 1978, 145-47, 274-75; Chapman 1982, 109-22, 128-31). The above is all the family wanted the public to know about Wood's medical problem when they allowed his biographer, Hermann Hagedorn, to include information concerning the 1905, 1910, and 1927 operations. That permission, which took three-and-a-half years to obtain, had to be

coaxed from the family by Dr. Alexander Lambert, a good friend of General Wood (Cushing Mss. 1931b). Mrs. Wood and the family wanted to continue the coverup that the General began after his first operation.

Cushing's Case Notes

In November 1984, my son, John Onorato, while walking was struck by a car with such force that he was airlifted to a trauma center where Dr. Marc A. Morin used his skills as a neurosurgeon to save him. By a serendipitous coincidence, the doctor was a fellow parishioner at St. Catherine of Siena, Laguna Beach, California. Over the years we talked history until one day he asked about my thesis topic. When I mentioned my writings on Leonard Wood, he said, "I studied about his brain tumor. He didn't have to die because of it." At the time, I passed his comment off as simply meaning that if Wood could have left Manila earlier Dr. Cushing could have caught the malignancy before it spread. Then in 1990 Dr. Morin handed me a book written by a medical historian who used Dr. Cushing's manuscript notes to write a chapter about Wood (Ljunggren 1990, 70-75). This chapter contains diagrams and a photograph of the tumor. Previous to that, he had shown me Cushing's treatise on meningiomas in which Wood's medical problems and operations are described in some detail (Cushing and Eisenhardt 1938, 409-14). But it was Cushing's manuscripts that piqued my interest.

After reading both pieces about Wood, I asked Dr. Morin to explain in layman's terms the General's medical history. First of all, he explained that Wood did not have a malignant tumor. He did not have cancer. But the tumor would continue to grow unless completely excised. The General's first operation which was performed by Dr. Arthur T. Cabot only removed a portion of the tumor. In view of the medical knowledge at that time the surgeon did what was conservatively correct. By removing enough of the tumor, the pressure on Wood's brain was relieved. However the full extent of the tumor was not seen since Dr. Cabot did not go below the subdural. According to Dr. Morin, Wood's surgery in 1910 probably was at the known limits of neurosurgery at that time. Dr. Cushing must have cut away enough of the tumor since it was not until fifteen or so years later that Wood began to experience severe difficulties.² In response to questions about temperament and rational

behavior, Dr. Morin stated that the site of the General's tumor would not impair his temperament or rational behavior. Dr. Morin asked: "Did the Governor General order someone to do something that was wrong objectively in law or physics? Did he violate any decision of the Supreme Court? Did he ask a civil engineer to build a dam where none could be built? Or is the view that Wood was temperamental or lacking in rational behavior, the consequence of differing cultural and political views?"

On 3 May 1991, I visited the Historical Section of Yale University Medical Library in New Haven. In the one bound volume of manuscripts and newspaper clippings the complete details of Wood's illness and death were revealed. The medical historian, whose story led me to Yale, was interested in describing the medical aspects of Wood's illness with narrative about his career added as connective material. He missed the political significance of what was contained in the Cushing papers. This oversight may be explained by the fact the author is not an American citizen and may have been unaware of the significance of what Cushing had kept locked in his desk drawer from 1909 until his retirement.³

Dr. Harvey Cushing had taken a personal liking to Leonard Wood from their first meeting in mid-1909, his operation on the General in February 1910, and the fateful surgery of August 1927. He served on Wood's Massachusetts presidential campaign committee in 1916. In 1920, he used his prestige to have leading Boston doctors sign a public testimonial for Wood's second attempt at the Republican presidential nomination. When questions were raised about Wood's mental capacity and temperament because of the operation in 1910, Cushing wrote Mrs. Douglas Robinson, who was a leader in Wood's presidential campaign, that "his mentality is not affected in the slightest and is absolutely perfect. General Wood enjoys health such as is given few men. He is the most vigorous and sound human being, mentally and physically, that I have ever seen."⁴ What Dr. Cushing did not know until his preoperation examination of the ailing Governor General in August 1927 was that his friend had been experiencing weakness to his left arm and left leg as early as November 1919 and had kept it hidden.

The death of the General tore at Cushing who wrote on the covering page of his Wood file:

On my return [from Europe] we were not yet in full swing. Nor were my surgical reflexes and judgement at their best.

He was a great man. We never lost a patient after an operation that so upset me. It was so (underlined by Cushing) near to success (Cushing Mss. 1927e).

The last sentence of his post-operation statement reads:

All told, it looks like a very bad record of attempting to do too much at a single session but the circumstances were such that we were led on from one stage to another until it was too late to do anything but see the matter through.⁵

In many respects, Wood's wish to minimize his stay in the hospital forced Cushing's hand. But it is also apparent from the detailed medical reports of Cushing's team of specialists at Peter Bent Brigham Hospital that there was real concern about Wood's loss of sight. Fear for the General's health and worry that his political foes would make the terrible inference that he suffered from epilepsy pushed doctor and patient to the fateful decision to do the procedure in one session, if possible.

The years 1926-27 were terrible from a medical standpoint for Wood. He had suffered from double hernias for years. Then in rapid succession he had two operations. In early 1927, while motoring from Baguio, his car went into a ditch and he was thrown against its roof. Then, while enroute to the United States, he lost his balance in rough seas and cracked several ribs. His physical appearance, which frightened friends and political foes alike when he left Manila, was cause for alarm in the Coolidge administration (Biedzynski 1990, 271-76). Jack Lane, in his biography of Wood, writes that his visit with President Calvin Coolidge at the presidential summer retreat in South Dakota buoyed the ailing General's spirits (Lane 1978, 275). The Governor General had much to be elated over after his visit with the President. On the public level, the President was going to let him return to Manila, and the issue of the Philippines being assigned to some department other than the War Department was placed on hold. On a personal and private level, he and Mrs. Wood were happy to be back. He was even happier when he learned that his son's illness was related to a chemical imbalance resulting from a serious fall two decades earlier. Osborne was dear to his father and the young man's sudden resignation from the army, his divorce after a short marriage, and sometimes odd behavior grieved Wood in Manila.⁶

In early July, Wood saw Dr. Charles A. McKendree, who was a neurologist of some reputation in New York City.⁷ After examining Wood, the doctor contacted Dr. Cushing's office asking if Wood's fields of vision had been checked periodically after the 1910 operation. Writing for his vacationing colleague, Dr. Gilbert Horrax replied that there was no record of Wood's fields of vision being tested "until your examination just now. He had no choked disc, even at the time when his tumor was removed. . . . I think the presence of his hemianopsia makes a recurrence [of the earlier tumor] rather suggested" (Cushing Mss. 1927a). What Dr. McKendree discovered was that Wood could see only out of the right half of each eye. He was in effect blind in the other half of each eye. This meant, even without opening his skull to see if there was a tumor, that there was sufficient evidence that something was pressing on the brain. This manifestation of near blindness, coupled with the obvious fact that it took all his rapidly diminishing strength to walk and just make himself comfortable, caused Wood to wire Peter Bent Brigham Hospital asking when Cushing would be in Boston (Cushing Mss. 1927b). Wood had hoped that Dr. Cushing would return from Europe via New York City (Cushing Mss. 1927c). Instead the doctor chose to take a steamer directly to Boston. He arrived on August 1 and immediately wrote his friend asking that he "come directly to the hospital, incognito if you desire, and I hope we may be able to put the thing through quietly and with no more fuss than was the case twenty years ago" (Cushing Mss. 1927d).

• The 1927 Operation

Governor General Wood was admitted to Peter Bent Brigham Hospital on 4 August.⁸ What Dr. Cushing and his team saw shocked them. In his preoperation medical history, Cushing wrote:

I had always supposed that he was doing well, though he is the kind of person who refuses to admit physical disability. It was not until the return of Mr. James Williams [noted Boston newspaperman] from the Philippines last April that I learned that things were not going well and that his palsy was unquestionably returning (Cushing Mss. 1927e).

In 1909, Dr. Cabot would write Cushing that Wood "is the most optimistic person I have ever seen and makes light of everything"

(Cushing Mss. 1909). In a letter to Cushing on the eve of the General's operation at Johns Hopkins, Cabot wrote that he "is a first rate patient, but will constantly deceive himself and you in the effort to put the best appearance on things" (Cushing Mss. 1910).

Wood's medical history is dismal reading. Wood confided that he was experiencing difficulties prior to the 1920 campaign as soon as reaching Manila. In 1923 or 1924, he was found on the floor at Malacañang lying in his blood. The severity of the problem increased with each passing year. Sometime in 1925, according to Major Lindsay Fletcher, who accompanied Wood as his personal physician, the General began to experience difficulty in reading and "that everything was read to him. He would merely go through the motions of perusing a paper and say that he had read it all" (Cushing Mss. 1927e). Wood insisted that he could see perfectly well. Cushing notes parenthetically, "He evidently has a complete right homonymous hemianopsia" (Cushing Mss. 1927e).

As the examination went on, the Governor General tried to put the best light on his situation. Cushing continues:

The patient admits that he began losing the use of his arm and began having some increased difficulty in walking for at least four years. . . . He has been apparently been using . . . recent injuries . . . as an excuse for his present crippled condition when visiting the President and other officials in this country.

The patient's mental processes are possibly not quite as acute as formerly. This may be because he has had a hard night's trip from New York. Nevertheless he has an extraordinary alertness and memory for names and past episodes. . . . He as always puts his best foot forward and thinks he is fooling the doctor (Cushing Mss. 1927e).

The detailed report by Cushing's neurological team indicated that Dr. McKendree was correct about the fields of vision being impaired. The General was unable to walk without assistance or turn in bed without aid "owing to left-sided hemiparesis. His "mentality [was] normal. . . . Comprehension [was] unimpaired, possibly a slight defect in memory through [sic] for any person of ordinary mentality his memory would be regarded as normal" (Cushing Mss. 1927e, Neurological Examination). As for the weakness in the left leg, it was more pronounced than in his left arm. There was a complete loss of knowing where his left hand was. While Wood could walk alone, it was apparent that he could fall easily. He was able to balance

himself by keeping his left leg extended. Although the General could turn in either direction when standing, he was in danger of falling. He was strong enough to raise his left arm high enough to place his left hand on his head. But he could not put his left hand in his trouser pocket. Wood was able to put his hands behind his back and stand still with his eyes closed. The team report concluded:

The above notes hardly give an idea of the patient's actual incapacitation. He is unable to get up or sit down without help for his left side is practically useless though with great effort he can raise his arm and he has some grip with his fingers. . . . When left alone he sleeps profoundly, sitting up in his chair, tilted over to the left side (5 August 1927, Cushing Mss. 1927e, Neurological Examination)

The following day Dr. Cushing wrote that "we had a stupendous task ahead of us, far worse than I had anticipated" (Cushing Mss. 1927e, Special Note). Still on the eve of his surgery "the patient. . . [was] cheerful" (Cushing Mss. 1927e).

The early part of the operation went fairly smoothly. The fact that Wood's pulse rate had not changed in six hours gave Dr. Cushing a false sense of security. Wood, in characteristic style, was making light conversation during the early stages of the procedure. But his fidgeting caused by the awkwardness of his position on the operating table distressed Dr. Cushing. In his immediate postoperation notes of 6 August, he took issue with his own handling of the operation. On reflection, he believed that he should have stopped at the point when he had exposed the tumor and seen that it extended "down toward the occipital region, easily accounting for his hemianopsia." The use of the electric current made the patient jerk which scared Cushing because he did not want Wood to suffer a Jacksonian attack. Again blaming himself, Cushing wrote that the General's reaction to the use of the electric device was "because we were a little out of practice" (Cushing Mss. 1927f, Operative Note). Wood died from a blood clot that "had given rather inconspicuous symptoms owing to his low blood pressure and failure of his medullary mechanicism to show the usual responses." Faulting himself again, Cushing wrote that "it is quite possible . . . that if at 8 o'clock [p.m.] I should have re-elevated the flap, I might have even then had a chance of saving him" (Cushing Mss. 1927f, Operative Note).

As she was preparing to leave Boston, Mrs. Wood wrote "How can I tell you how much I appreciate your skillful and affectionate

devotion to my dear husband and your sweet consideration of myself. You are so part of these past days' indelible memories. You can never know what you gave me" (Cushing Mss. 1927g). It was small consolation for Dr. Cushing.

The Postmortem Coverup

Soon after Wood's death, his friends decided that a biography would be the means to establish a nest-egg for his widow and make certain that his story would be told.⁹ Hermann Hagedorn who had written a multi-volume history of Theodore Roosevelt was chosen to write the biography. His retainer was \$25,000 (which is approximately \$250,000 in today's purchasing value).¹⁰ Unfortunately for Hagedorn's professionalism, Mrs. Wood and the family wanted to sanitize¹¹ the controversial aspects of the General's career and hide the full extent of his illness.

By December 1928, Hagedorn was ready to tackle the question of Wood's health.¹² Cushing let him know that "Dr. Cabot was not a brain surgeon and the small bit of growth that he removed was merely a part of the growth that extended out through the bone. Even so, in those days (1905) had the presence of the deeper part of the tumor been suspected, it would scarcely have been regarded as operable" (Cushing Mss., 1928). In dealing with his own operations on Wood, Cushing gave Hagedorn several interviews.

Two years later Wood's biographer was still struggling with the problem of how to write of Wood's obvious illnesses while in Manila. He wrote Cushing that Dr. Alexander Lambert was concerned that some future physician might make the assertion that Wood had epilepsy and thus "create an impression which would be fundamentally false" (Cushing Mss. 1930). A few weeks later, Cushing counseled the biographer that "so far as the matter of his ill health is concerned, I think you will certainly have to face it squarely. But the matter can be treated so that his stoical attitude toward his malady was heroic. Then, it was not mentally incapacitating, and not physically so until near the end" (Cushing Mss. 1931a; Cf. Hagedorn, 2: 466-67). Four days later, Hagedorn replied that Dr. Lambert helped Mrs. Wood and the family realize "that the discussion about the General's seizures will have to be met with the exact truth concerning it, and anything but the truth will bring about disaster, and require explanations, which is the last thing . . . [we] want" (Cushing Mss. 1931b). The two-volume biography came out shortly there-

after. Hagedorn had dealt with the issue as forthrightly as possible as he was given to understand it. Dr. Cushing hid in his files evidence that Wood suffered spasms as early as November 1919 and that he said nothing about them during the 1920 presidential campaign.

After returning from New Haven, I consulted with Dr. Morin again about the relevance of fields of vision and choked discs in determining the possible presence of a tumor. After his explanation, I asked if any competent physician could have diagnosed the presence of some abnormality in the brain based on observing Wood's gait and arm motion. He said that it would be difficult to make any determination from casual observation. There could have been several explanations: the aging process, a slight stroke, a bad night's sleep. As long as Wood avoided close medical scrutiny, there was nothing anyone could do. Dr. Morin then explained that by using an ophthalmoscope, which allows a physician to look directly into a patient's eye to observe the condition of the optic nerve, the presence of a tumor can be diagnosed. However, its size and exact location could have been determined only by surgery. I then asked Dr. Sidney J. Weiss, a well-respected ophthalmologist in southern Orange County, California, to explain the procedure of looking in the eye and determining that neurological damage might be present.

In my opinion, it is must be said that General Wood, who was himself a medical doctor, did not allow any physician in the Philippines to examine him thoroughly despite his two hernia operations. Perhaps this explains his insistence on local anaesthesia for his second hernia operation (Hagedorn 1931, 2: 473). Perhaps, by January 1927, he was worried that general anaesthesia would have set in motion a reaction which would have revealed his secret. The use of the ophthalmoscope was common practice among the medical profession then. Most thorough examinations, especially before major surgery, involved an examination of the optic nerves.

Several questions are raised by the above narrative. Why did Wood and later his family attempt to hide his brain surgeries from the public? The obvious answer is that Wood did not want anyone to use his physical condition to deny him promotion in the army, his campaigns for the presidency of the United States, and, while in the Philippines as chief executive, force his resignation. But it was more than that as Dr. Lambert pointed out to Hagedorn. It was fear of being tarred with the brush of epilepsy. It is an affliction about which the public knows so little. Wood and his family worried that

his children and grandchildren would be scarred by any suggestion that he suffered from epilepsy. Thus the first surgery was performed in a small private hospital and in secret. The reason for the second surgery was passed off as a harmless cyst on the skull (*New York Times*, 7 March 1910).

Why did Wood go to the Philippines with W. Cameron Forbes in 1921 when he knew he was ill and that President Warren G. Harding wanted him to remain as governor general? The standard answer is that he was hung up on his own standard of national service over personal considerations. That is only part of the answer. Mrs. Wood and friends of Wood were opposed vehemently to his going to Manila and remaining there.¹³ If Wood's 1913 diary is read with respect to his advice to Francis Burton Harrison about not going to Manila, as well as Wood's papers for the months preceding his decision to join Forbes, the question of why he accepted the President's call cannot simply be answered by the usual: "Service above Self." Notes from my interview with Hermann Hagedorn and several conversations with Mrs. Wood's niece, Frances McCoy, widow of General Frank R. McCoy, now seem to come together.¹⁴ In my opinion, General Wood was running away from the embarrassment of losing the Republican nomination to Harding. The General also needed a job that would befit his stature. Friends secured the job of provost at the University of Pennsylvania for him in the belief it would help his campaign in 1924 for the presidency. But, in truth, the position was not equal to that of being president of the United States or governor general of the Philippines.¹⁵ Wood also needed money to live. In several letters from Manila, he indicated that he was hurting for money.¹⁶ While that was true,¹⁷ the pay of governor general was \$36,000 (the equivalent of \$360,000 in today's purchasing power). Moreover he would escape income taxes in the United States and enjoy a modest expense account covering his official duties at Malacañang Palace.¹⁸

Why did Leonard Wood remain in Manila after it became evident that he needed medical attention? He had been a physician and remained interested in medical science. He knew what his problem was. He took secret precautions by having medicine with him at all times to relieve spasmodic attacks (Cushing Mss. 1927e, Interval History; see also Hagedorn 1931, 2: 466). The answer that historians have given, based on his biography and other information known about him, is that he was determined to beat the Filipino politicians, reverse the course set by his predecessor, Governor General Francis Burton

Harrison, advance Christianity and Western Civilization in Asia, and maintain the U.S. flag there. That is only part of the answer. Wood wanted to leave Manila by early fall of 1923 but the cabinet crisis of 17 July 1923 intervened and the home government preferred that he remain in Manila. He wanted to leave in late 1924 and then again in mid-1925 and still again in 1926. Letters to close friends show that Wood wanted to come home, either permanently or on vacation, ostensibly to give Mrs. Wood and his daughter some change of scenery.¹⁹ But as the political situation in Manila became more fluid and heated up among Filipino political leaders and between them and the Governor General, the Coolidge administration did not want his absence from Manila to be misconstrued. As much as the White House grew somewhat tired of Wood's fierce and dogged determination to beat the politicians, the President was not about to allow Wood to leave Manila. But by late 1926, reports were coming back to the effect that Wood was suffering from something and needed immediate medical attention. He could have come home sometime in late 1926 and return, if that was his wish, to Malacañang Palace (Biedzyski 1990, 269–76). But Wood had one last card to play: abolition of the Board of Control. With his decision upheld by the Philippine Supreme Court in early spring 1927, he could leave Manila knowing that he had bested Senate President Manuel L. Quezon.

When Wood left Manila on 28 May 1927, he was, in his mind, triumphant. He had already made quiet peace overtures to Quezon. As he struggled up the gangway, his departure could not be misinterpreted.²⁰ He was going to be back in Malacañang Palace by September or October.²¹ The man, who had forced his body to obey him, was going home so that medical science could correct his problem and make him whole again (Hagedorn 1931, 478–80).

Conclusion

What might have been the fate of the Philippines had Wood not accepted the position of governor general knowing that he had a serious medical problem? What if his government had ordered him home after rumors of his ill health had proved true? Would the history of Philippine-American relations have been different if Wood left in 1925 or 1926? Ambition, pride, personal considerations, political machinations, lack of national policy toward the Philippines, and the firm belief by one man in the rightness of his actions cost Leonard Wood his life.

Notes

1. "Physician's Statement. Evening of August 6, 1927," Harvey Cushing Collection, Yale Medical Library, Historical Section, Yale University, New Haven, Connecticut. (Hereinafter cited as Cushing Mss.)

2. Since meningiomas return unless removed completely all that a neurosurgeon can hope for is that the recurrence will occur many years into the future.

3. See Cushing's note to himself. Cushing Mss. For some reason, Cushing, probably because he felt somewhat responsible for Wood's death, kept all the pertinent material concerning his two operations on the General in one file and in his desk. He did publish some parts of his post-operation comments on Wood's operations done at Johns Hopkins and the Peter Bent Brigham Hospitals.

4. Dorothy Forbes, Vice Chairman, Leonard Wood League, Massachusetts Chapter, to Harvey Cushing, 21 April 1920. Cushing Mss. See also News item, 25 March 1920. Cushing Mss. Mrs. Susan Cabot, widow of Dr. Cabot, tipped off Cushing several weeks earlier that people were asking if her husband had operated on Wood. She referred them to Dr. Cushing. Susan Cabot to Harvey Cushing, 8 March 1920. (Cushing Mss.) Unlike the operation by Dr. Cabot, Wood's second operation was not kept hidden from the public. The only thing that was hidden was the reason for the operation. Wood's biographer wrote that the General entered Johns Hopkins Hospital incognito. See Hagedorn, p. 89f. He is wrong unless we consider the change in title from General to Doctor as being incognito. The General was admitted as Doctor Leonard Wood. On 7 March 1910, the *New York Times* ran an article on Wood's operation for the removal of a cyst.

5. Operative Note, 6 August 1927. (Dr. Cushing) Cushing Mss. In view of Dr. Cushing's feelings about his handling of Wood's operation, I asked Dr. Morin how he might have dealt with Wood's tumor. He said that because of the General's age (almost 67) and the fact that it took at least a decade for the tumor to cripple him, he would have opted to remove enough of the tumor so that the pressure on the brain would have been relieved. He would not have attempted total extirpation of the tumor unless he had pressing reasons to do so. This follows the safe approach of Wood's 1910 operation. It is possible that Cushing believed his skills, which were world-famous, allowed for the more dangerous approach of total excision of the tumor.

6. In an interview with Hermann Hagedorn on 29 July 1959, he told me that Wood hid his anxiety over Osborne's illness from everyone. It was as if a boulder had been removed from his back when he learned that his son's alcoholism and thus seeming bizarre actions were triggered by a fall in 1908. All the young man had to do was avoid alcohol. Interview notes, 29 July 1959 in the possession of author.

7. In his biography, Hagedorn has Wood seeing Dr. Lambert who then contacted Dr. Cushing in Boston. See Hagedorn (1931, 2: 479). This may be so. However the only doctor of record who contacted Cushing's office several times was Dr. McKendree. Most likely, Hagedorn was practicing damage control by laying everything at Dr. Lambert's doorstep. The doctor was a longtime friend of General Wood. He could be counted on to keep quiet about Wood's illness.

8. The General's Peter Bent Brigham Hospital file number is 57598 and his surgical number is 29347.

9. General Wood left Mrs. Wood in dire financial straits. The hoped-for nest-egg from the royalties associated with publication of the biography never materialized.

The price of ten dollars (about \$100 today) proved too much at the beginning of the great Depression. Hagedorn in his determination to write a biography that would be virtually challenge proof had taken too long. As he wrote to Dr. Cushing, "I am trying to make my book so straightforward and honest that [any hostile biography] will appear merely an impertinence." See Hermann Hagedorn to Harvey Cushing, January 16, 1931.

10. In my conversation with Hagedorn, he said that the Wood family and close friends thought they could dictate how the book would be written in view of the size of the retainer. Interview notes, 29 July 1959. It is hard to believe that \$25,000 was once considered a princely sum.

11. In 15 July 1959 Hagedorn wrote me:

My Leonard Wood notes are in the Library of Congress and I have no objection to your using them. The reason I could not give Mrs. Wood the notes was the fact that things were said to me in confidence by some of General Wood's friends that I had no right to pass on to Mrs. Wood. I feared, too, that she would destroy any papers that might impair, for future historians, the picture of the perfect knight that she wants the world to see.

12. This was very difficult for Hagedorn. He had no access to Dr. Arthur T. Cabot's records of Wood's first operation. He had none from the Johns Hopkins operation except as provided by Cushing. He had to depend on Dr. Cushing for an understanding of the tumor and its effects upon the General's body. It was Cushing who gave the tumor its name in 1922. See Ljunggren, p. 74, fn 2.

13. Hagedorn told me that Mrs. Wood was livid when her husband agreed to go to Manila with Forbes and subsequently accepted the post of governor general. As the General and Mrs. Wood were preparing to leave Manila in 1927, she was sending out word that he was not going to return. See "Mrs. Wood Says Governor General Won't Return," *Philippines Herald* (30 April 1927).

14. Frances McCoy married Wood's longtime aide-de-camp. She allowed me several interviews between 1959 and 1965.

15. The thought of being Provost did not excite Wood terribly although he put a good face on about being disappointed that duty called in the Philippines. As he wrote to Albert R. Brunker, who was one of his loyal stalwarts, "There is more work and anxiety here in one week than one would have in the University of Pennsylvania in a year." See Leonard Wood to Albert R. Brunker, *Leonard Wood Papers*, Manuscript Division, Library of Congress, Washington, D.C., Box 159. In a letter to Hagedorn, Wood wrote about the University of Pennsylvania:

The institution is a fine old establishment, operating in a highly civilized community, with a very large graduate personnel upon which it can draw more or less in control. A fine lot of fellows, most of them never served their country outside the tinkle of the domestic dinner-bell and are about as appreciative of Philippines situation and needs as the American public was when Dooley described it as not knowing whether the Philippines were islands or canned goods.

See Leonard Wood to Hermann Hagedorn, 16 January 1923, *Wood Papers*, Box 164. Wood publicly gave out that his decision to remain longer in Manila was due in part to the need to establish a four-year plan of action and in part to the petition of the lepers at Culion.

16. A representative letter would be the one written to his friend, Albert R. Brunker, on 12 May 1922, *Wood Papers*, Box 159. Wood retired from the Army three years earlier than he had to. Ostensibly, he was putting "Service before Self" in doing so. He would serve as the Philippine chief executive. The fact is he was angry at missing the nomination and then being passed over for the rank of Lieutenant General.

17. Hagedorn in his interview with me on 29 July 1959, as well as Mrs. McCoy, intimated that Wood had married above his station in life. Mrs. Wood was very ambitious and her ambition for her husband sometimes drove the General to distraction and embarrassment. He needed money to maintain the life style that Mrs. Wood was accustomed to.

18. Quezon felt that Wood was using his expense account to feed himself while claiming that he was entertaining official guests of the government. See Francis Burton Harrison, *Origins of the Philippine Republic*. Edited and annotated by Michael P. Onorato (Ithaca: Southeast Asia Program, Cornell University, 1974), pp. 172-74. I think that there is reason to believe that Wood kept careful records as to how his expense account was used since he found it difficult to live on the \$18,000 salary (about \$180,000 today) of the governor general. See Leonard Wood to Bishop Charles H. Brent, 20 March 1923, *Wood Papers*, Box 174.

19. Leonard Wood to W. Cameron Forbes, 7 December 1922, *Wood Papers*, Box 160; Leonard Wood to Halsted Dorey, March 4, 1924, *ibid.*, Box 169; Leonard Wood to Mrs. Douglas Robinson, 24 October 1924, *ibid.*, Box 172; Leonard Wood to E. Mont Reilly, 15 July 1925, *ibid.*, Box 178; Leonard Wood to Mrs. Theodore Roosevelt, March 17, 1926, *ibid.*, Box 182; Nicholas Roosevelt, July 9, 1926, *ibid.*, Box 182.

20. In April 1927 there was a spate of rumors to the effect that Wood was making secret, quiet overtures to Quezon. It was an embarrassment to Quezon and he wrote Wood to the effect that his press statement should handle the matter. Wood had beaten Quezon badly. Younger Filipinos were questioning the continuous public tirade against Wood by Quezon since it was delaying any grant of autonomy. Wood could have used smooth relations on the eve of his visit home during which he could expect to be questioned by the President and congressional leaders about his stewardship. See *Philippines Herald* for 29 and 30 April 1927. See also Manuel L. Quezon to Leonard Wood, 29 April 1927, *Manuel L. Quezon Papers*, National Library, Manila. There is no question from Quezon and Wood papers that both men privately got on well enough to conduct public affairs. But after the cabinet crisis of 17 July 1923, both men had to maintain a public posture that unfortunately belied their personal feelings toward each other.

21. Leonard Wood to Emilio Aguinaldo, 27 May 1927, also 3 August 1927, *Wood Papers*, Box 155; Leonard Wood to Felipe Agoncillo, 27 May 1927, *ibid.*, Box 155; Leonard Wood to Charles H. Brent, 27 July 1927, *ibid.*, Box 183.

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