President Trump To Have Customary Physical Exam in January. But, Does It Matter?

By Jamie Wells, M.D. — December 29, 2017

White House Press Secretary Sarah Sanders recently revealed President Donald Trump will undergo his first physical examination at Walter Reed National Military Medical Center (see video [2]) on January 12th [3], affirming the results will be released to the public.

Questions surrounding his and former presidential candidate Secretary Hillary Clinton’s health plagued the political landscape throughout the election. The politicization of this aspect of those running and the subsequent inflammatory dialogue that ensued among pundits, the media and polarized partisans over the subject could often turn your stomach. (See Suppressing Coughs At Tonight's Presidential Debate [4]).

But, how much does their health status even matter? Given the medical advances today in managing chronic disease, for example, what actually would be limiting for the job? What condition or circumstances genuinely would be disqualifying? And, given that the patient --albeit a president or any member of society--is the ultimate arbiter of what information is disclosed about him, would the public ever fully know a complete and thorough picture?

Consider the unfortunate events that were highly publicized this year alone with respect to physical injury and disability that have in no way precluded these members of Congress or officials from fulfilling their professional obligations (while under some very distressing situations). Click on the blue links to review in greater detail:

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So, what does matter?

An annual or routine comprehensive history and physical examination by a physician is an important evaluation for anyone, let alone a president. It is an opportunity to catch new disease at a point when it might be possible for cure or curtailing significant progress and intervention. It is a chance for surveillance to review chronic problems and reassess while optimizing medications so as to minimize further complications. And so on.

When it comes to medical clearance, what is required of a physician in their assessment is not necessarily what you might think. And, regardless of the prominence of a patient, he or she is bound to a code of conduct and integrity along with ethical principles distinctly defined by their medical licensing board and profession. Political expediency should play no role in the doctor-patient relationship, in fact it should be totally immune from it.

What would actually be medically disqualifying for President?

Given the ugliness of the political spectrum this year and this election cycle in particular, much insidious commentary made its way to center stage (and still does). Psychiatrists, psychologists even bioethicists to name a few violated the basic tenets of their profession by making very irresponsible claims to the media that cannot possibly be fully informed when they are not the treating physician.
A true medical professional, like in any field, treats every patient whether they are in agreement politically or not with the same level of excellence, objectivity, and sense of duty to the core convictions of the oath they take to practice medicine. The President’s actual physician-- like any other individual’s-- who has direct knowledge of the complete history, examination and access to the full record is the only person who can determine medical fitness for the office. And, it is at the patient’s sole discretion what is permitted to be released, in part or in full.

To further understand the bounds of doctor-patient privilege click on these articles: Diagnosing Hillary Clinton’s Medical Statement [15] and Did Sex Therapist Break Privilege Speaking About Matt Lauer? [16]

With respect to this determination of what would be disqualifying for the position, I detailed extensively how a physician systematically assesses this and what specific conditions would make a contender ineligible in Who’s NOT Medically Fit To Be President? [17] In that article (click here [17]), I discuss the actual job description from the Constitution and what is mandated of a doctor in clearing a patient. Other considerations are addressed in Hillary Clinton Vs. Donald Trump: Who’s Got The Stamina? [18]

Dr. Connie Mariano [17], who was the White House physician for George W. Bush and Bill Clinton, says it best when it comes to this role, “It’s a very touchy subject. Having been at the White House for nine years, my opinion is only as it impacts their ability to perform their job in office, which is to make decisions and communicate.”

The take home message is that chronic illness and a person’s medical story has a life of its own, and it is unique to that person. Yes or no can be too subjective. A person's medical status is fluid and dynamic, requiring continuous reassessment. Also, conditions from before ascending to the position does not mean the issues are still present or will persist during office---as evidenced by the litany of developments to the government officials discussed earlier in this article. Before modern media, many were elected who would stand no chance today. Not because doctors would disqualify them, but because the public might not elect them.

That's likely why most candidates don’t reveal their entire medical record. John McCain did but he was an outlier. Instead, the history of presidents shows a shocking lack of transparency about their personal well-being (see here [17] for more detail). Since privacy laws handicap the physician, what is released is at the complete discretion of the patient.

Based on the limited medical information available, the public casts the ultimate vote.