



Dr. Henry writes about Polio and Economic Status

There has been considerable discussion regarding the occurrence of polio and economic status. The consensus on this list [[SJU Polio](#)] seems to be that the poor were more likely to have acquired a natural immunity and the middle and upper class folks were more vulnerable to polio because they were less likely to acquire this natural immunity. I believe the polio virus was not class conscious nor racially conscious. In Virginia in 1950 when I had polio, the hospitals were racially segregated. At the time, the all African-American St. Phillip Hospital here in Richmond had its share of children with polio. As you know, the Tuskegee Institute had a center for African-American polio victims similar to Warm Springs. Most African-American children during the polio epidemic years living in the South were poor. Statistics should be available somewhere to determine if there were any statistical differences among economic or racial groups acquiring polio during the epidemic years. The March of Dimes archives or state health departments might have this data.

Because most of us on this list may not have been poor does not mean much. We all have computers and some education. Local support groups are composed of those who are aware of PPS and have means to get to the group meetings or at least get on a mailing list. There are many polio survivors that may be unknown to us. Also, the poorer polio survivors were at greater risk to die from other causes as they grew older. I know of several cases of poorer polio survivors who died of respiratory failure because they were without the means to acquire expensive medical care or equipment before the days of medicare and medicaid.

From what I have read, the greatest sanitation advance in the earlier part of this century was the development of public water that had been filtered and treated. Even the poor, who lived in cities, usually had this same water. In very poor urban areas and rural areas, well water was the source of water and naturally was more at risk for contamination. I simply think the polio virus became more virulent during the epidemic years and those who had central nervous system involvement with the polio virus were victims of random choice and perhaps temporarily weakened immune systems. The same random choice reality that operates as to who gets a common cold and who does not. If you are on an elevator and are tired and run down, and someone with a cold sneezes on an elevator, you will likely catch that cold, but not everyone on the elevator will catch that cold.

As for President Roosevelt, it is true that he grew up in a wealthy family, was his mother's only child, and his mother was overprotective. However, during his childhood, he went to Europe seven times (I believe) during the summers, attended Groton boarding school during his teen years, and certainly traveled to many parts of the world as Assistant Secretary of Navy during his 30's. He had ample opportunity to be exposed and acquire a "natural immunity" to the polio virus. But like us, he never got that immunity. Thus, at age 39 when he was exposed to the polio virus, he was vulnerable. He did manage to acquire scarlet fever and influenza during his youth and had chronic sinus problems throughout his life.

I do not feel that the poor had any advantage in defending against the polio virus unless epidemiological statistics reveal such. Such an investigation might be a master's thesis for some graduate student unless it has already been done. I think this is an interesting topic, but there are many factors to consider.

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