Frida Kahlo: diagnosis 70 years after her death

Frida Kahlo (1907-1954) is one of the most celebrated artists of the 20th century, mainly known for her self-portraits, in which she combined fantasy and realism. Although she was often categorized within the surrealist movement, she claimed that her works were not the product of dreams, but of life. A life that was marked by a traffic accident as a result of which she suffered intense pain and had to remain immobile for long periods of time. But what exactly was the origin of his pain? The medical documents of the time suggest the sum of multiple causes: fractures, immobilization, post-polio, spina bifida... Now, experts from the Institut Guttmann have <u>published</u> in the *Journal of Neurology* that part of his symptoms could be caused by a cauda equina syndrome -a lesion in the lower part of the spinal cord-of traumatic origin. This diagnosis provides a more complete explanation of the symptoms that affected the artist's life and work.

At the age of 6, Kahlo contracted polio, which caused permanent sequelae: her right leg was shorter and weaker than her left. But the event that most marked her life was a bus accident at the age of 18. Kahlo, who was one of the passengers on the bus, dislocated her left elbow, ankles and shoulders; she broke multiple ribs and suffered 3 fractures in her pelvis and 11 in her right foot, which was crushed. Two of her lumbar vertebrae, L3 and L4, were fractured and dislocated, and an iron rail caused an abdominal perforation with entry through the left hip and exit through the vagina. Following the accident, the artist spent a month in the hospital and two months recovering at home, but after this period she continued to experience fatigue and pain in her back, legs and genitals.

Chronic pain and fatigue

Kahlo's condition worsened over time. Between 1946 and 1950, she underwent eight operations, yet continued to experience chronic pain and fatigue. Documents from her physician, Dr. Leo Eloesser, further indicate "decreased sensation in her lower body and worsening of her right foot and leg."

The authors of the article have concluded that the reduced sensitivity in the legs, added to the neuropathic pain (pain caused by injury or abnormal functioning of the nervous system) in the legs and genitals, are consistent with a diagnosis of

cauda equina syndrome (CES), caused by damage to the nerve roots in the lower part of the spinal cord - the so-called cauda equina. This syndrome, the authors state, would be a consequence of the accident and would explain part of Kahlo's symptomatology: intense back pain, leg pain and loss or alteration of sensitivity in the lower part of the body, including the genital areas.

CES is classified into several categories: suspected CES, early CES, incomplete CES, CES with retention, and complete CES. In Kahlo's case, her symptoms matched those of early CES. "Kahlo's medical history, her letters indicating sensitivity changes in the genital area and Dr. Eloesser's description of the symptoms are compatible with this classification," says Dr. Hatice Kumru, a neurologist at the Institut Guttmann and corresponding author of the article. The artist also referred in her writings to persistent "sciatic" pain and hypersensitivity to contact, also in the genital areas, which the authors attribute to continuous spontaneous pain and allodynia, respectively. Both are neuropathic pains that could be related to CES.

Beyond historical curiosity, the work offers insights into the progressive deterioration of neuropathic pain. "Cauda equina syndrome is a rare condition, and identifying it in historical patients like Kahlo may help to better understand its symptoms and impact," says Dr. Kumru.

Improper treatment

Part of Kahlo's treatment involved wearing corsets like the one she painted in her work <u>The Broken Column</u>. "It is now known that these methods can often lead to muscle atrophy, worsen pain and cause gait disorders, which likely contributed to her disability," explains Dr. Kumru.

Her medical records indicate that she also had congenital spina bifida. However, neither her letters nor the available literature reveal any complaints related to this condition prior to the accident. Professionals have also ruled out that her symptoms were due to post-polio syndrome, because it usually appears 50 years after the disease and is not associated with a sensory deficit.

In 1953, due to gangrene, doctors amputated Kahlo's right leg below the knee. After the amputation, she also experienced phantom limb pain and said, "I have the impression of having suffered centuries of torture and at times I nearly went crazy." The following year she died. A pulmonary embolism was listed as the official cause of his death, although suicide was also suspected. She left a legacy of paintings - such as The Wounded Deer - that can be interpreted as an artistic reflection of her physical and emotional pain. Thus, Kahlo transformed her suffering into beauty and became unforgettable.