



The American writer Louise Bryant in Russian costume, circa. 1936. Photo by © Hulton-Deutsch Collection/CORBIS/Corbis via Getty Images

LOUISE BRYANT

An adventurous life and painful death from Dercum's disease



Bryant, Louise - Journalist, Writer, Portrait - 1929. Ullstein bild Dtl./Getty Images

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The year 2017 marked the 100th anniversary of the Russian October Revolution that brought the Bolshevik Party to power. This led to the withdrawal of Russia from World War I, and a civil war from which the Red Army emerged victorious. The limited information reaching America during this time elicited a negative response by a strongly anti-communist public and press. However, a more nuanced view would be presented by two married American journalists, Jack Reed and Louise Bryant,^{1,2} who witnessed the events, interviewed the main participants and described their observations in best-selling books.

Their story was dramatized in the 1981 epic movie *Reds* with Warren Beatty and Diane Keaton. Reed died of typhus in 1920, and was the first American to be buried in the Kremlin. Bryant died at age 50 from a rare, painful, and incurable disease—Dercum's disease.

Life and career

Bryant was raised by her grandparents in a small mining town in Nevada.^{1,2} She graduated from the University of Oregon in 1909. In that era, career opportunities for women were very limited, but she eventually found a newspaper job in Portland, later rising to the position of society editor. She married a dentist, who tolerated and respected her independent nature and disinterest in housework.

In 1914, Louise met Reed, whose articles in a socialist magazine, *The Masses*, she had appreciated. He came from a wealthy, conservative Portland family, attended Harvard, and found himself in sympathy with students devoted

to the labor movement and radical social change. After graduation, he pursued a career in journalism and found support among the community of artists, writers, and intellectuals in New York's Greenwich Village.

Bryant fell desperately in love with Reed, left her husband, and moved to New York. They agreed to have an open relationship, which continued even after their marriage in 1917.

Since her college days, Bryant had been wildly independent and unconventional—smoking, drinking, sniffing ether, and embracing women's rights. She thrived, and was admired, in the Bohemian environment of Greenwich Village and in their summer retreat in Provincetown on Cape Cod, where she took pleasure in sunbathing nude on the dunes. She met playwright Eugene O'Neill, joined his theater company as an actress, and had an affair with him.

With news of a revolution in Russia in 1917, Reed saw a life-defining opportunity to witness and report these momentous events and Bryant was eager to share the exciting experience. With war still raging in Europe, theirs was a long and difficult journey via Scandinavia.

Reed and Bryant arrived in Petrograd (St. Petersburg), the Russian capital after the Tsar had been forced to abdicate in March 1917. Both were credentialed as journalists. Bryant was expected to cover the revolution from a woman's point of view.

The provisional parliamentary government was unable to cope with violence in the streets, massive desertions on the battle fronts, and widespread starvation leading to the October Revolution in which the well-organized Bolshevik Party seized power. Reed and Bryant interviewed Lenin, Trotsky, and other party leaders. Bryant found the policy of equal rights for women particularly appealing since American women could not vote and had limited employment opportunities.

Between the United States and Russia

Before the end of 1918, Reed and Bryant returned to the United States to write and lecture in support of the revolution. Jack's book *Ten Days that Shook the World*, and Bryant's *Six Red Months in Russia* attracted a wide readership, as well as heated criticism by most politicians, religious groups, and conservatives. Reed and Bryant's presence was greatly desired at parties and social events, and Bryant's Russian costumes elicited much interest and many critical comments.

Bryant took part in suffrage demonstrations in Washington, DC, and was put in jail, where she participated in a hunger strike. Later, she was called to testify before a Congressional committee investigating Communist influences in the labor movement, and her activities were monitored by federal agents.

In 1919, Reed and Bryant returned to Russia. Bryant, armed with a special letter from Lenin, was permitted to travel freely and stay in superior government hotels. After Reed's death from typhus in 1920, Bryant returned to the U.S. and published her second book *Mirrors of Moscow* in 1923. She met William Bullitt, her third husband, in 1921. He was a wealthy married diplomat six years younger than Bryant. Their affair led to a pregnancy, and Bullitt's divorce. They married in 1923. Bryant's only child, Anne, was born in Paris, where they lived in a mansion previously owned by the British writer Elinor Glyn.

Louise took a recess from journalism, and despite her dedication to socialist principles, she immersed herself in the excitement of life in Paris in the 1920s—the parties, the designer clothes, the *avant garde* artists, poets, and composers. Bryant's friend, writer Lincoln Steffans, remarked that Bryant had never been a Communist, she only slept with one.¹

Illness, downfall, and death

In 1926, the first symptoms of Bryant's illness appeared. She developed painful, tender lumps in her thighs that were

accompanied by malaise, insomnia and fatigue. Later, similar lumps were found in her jaw, and upper arms. The pain extended beyond the clustered nodular areas, and was severe, particularly at night. Analgesics gave little or no relief.

In despair over her unsightly appearance, Bryant started to drink heavily, ate less, and lost weight. She exhibited erratic behavior, confusion, and depression. She was examined by many physicians in Paris and elsewhere in Europe but no diagnosis or amelioration was forthcoming until she consulted with specialists in London in 1928. Their diagnosis was Dercum's disease, or *Adiposis dolorosa*,

a progressive, incurable condition that typically occurs in obese menopausal women. Bryant was 41 at onset, but not obese.

Dercum's disease had been described in 1892 by Dr. Francis X. Dercum (ΑΩΑ, Sidney Kimmel Medical College, 1903, Honorary), a prominent Philadelphia physician.³ Bullitt, contacted Dercum by telephone from Paris and offered to bring his wife to Philadelphia for a consultation. Dercum replied that it would not be helpful, adding, "Pray that she die as soon as possible."¹

Bryant continued to experience unbearable pain, drink heavily, and behave outrageously. She was frequently drunk in public, expressing paranoid ideas, and consorted with a lesbian lover. In 1929, Bullitt filed for divorce and was awarded custody of Anne. Bryant didn't learn of the decision until she read about it in a European newspaper. She would never see Anne again. No alimony was awarded, but Bullitt continued to send her money regularly.

The downhill course continued and Bryant was hospitalized three times in Paris. In January 1936, she was found unresponsive outside of her room in a cheap hotel clutching a bottle of milk and a newspaper. The cause of death was said to be cerebral hemorrhage, a diagnosis often used in cases of unexplained sudden death. She was 50-years-old.

At the time, Bullitt was completing a three-year term as the first U.S. ambassador to the Soviet Union. Bullitt was an outspoken anti-communist.



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*“Pray
that she
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soon as
possible.”*

Francis X. Dercum, MD

Adiposis dolorosa was first described by Dr. Dercum in 1892.^{3,4} He was a professor at Jefferson Medical College, and an early leader in the field of neurology. When President Woodrow Wilson had a stroke, Dercum was summoned to the White House and served as a consultant until the President's death.

As President of the American Philosophical Society, Dercum was presiding at a meeting, sitting in Benjamin Franklin's chair, when he slumped forward and died in 1931.³

Dercum's disease is a rare disorder occurring mainly in middle-aged women, 85 percent of whom are obese.⁵ The abnormal fat deposits resemble ordinary lipomas on examination and histologically, but are painful and tender to the touch. They often occur in clusters at any location, sparing the face, but most commonly in the thighs, upper arms, abdomen, and buttocks. In some cases, pressure applied to a nodule produces radiating pain into adjacent areas.⁶ Pain may be chronic, but frequently there are acute exacerbations. It is usually symmetrical and resistant to analgesics. Some patients have arthralgia, myalgia, or muscle weakness. Other associated conditions include depression, sleep disturbances, impaired memory, confusion, dementia, alcoholism, and substance abuse. Laboratory studies are not helpful diagnostically; inflammatory markers and autoantibodies are normal or absent.⁵

The clinical picture in Dercum's disease is quite polymorphous. Less common forms include a generalized distribution of painful fat, without discrete nodules, and localized forms, including a juxtra-articular variety.⁵ In the latter subset the medial fat pad of an osteoarthritic knee is usually involved, but a few patients with rheumatoid arthritis have been reported. Some patients have sharp, shooting pains suggesting nerve irritation. Dercum believed this to be the source of the pain,⁴ however, the pathogenesis and mechanisms of pain in Dercum's disease have yet to be determined.

Most reports of successful therapies are based on a few cases with short follow-ups. Many treatments have been used with limited benefit. Recent reports have advocated referral to a multidisciplinary pain management program,⁶ liposuction,⁷ transcutaneous electrical stimulation,⁸ and intravenous lidocaine.⁹

Little is known about the long-term prognosis of Dercum's disease. If remissions occur, they are rare. Death



Francis X. Dercum, MD, circa 1915. PD-US-expired

is seldom due directly to the disease, but rather, as in Bryant's case, to comorbidities, or complications. Bryant's clinical picture was atypical in that she was not obese, but otherwise her presentation was characteristic of Dercum's disease. Her most dramatic comorbidities were depression, alcoholism, and aberrant behavior.

A century ago, Bryant lived the life of an adventurous, liberated woman, who would have fit into the modern world better than the more conservative society of her time. As a glamorous, energetic, and talented journalist she was in her element in the Bohemian atmosphere of Greenwich Village and the chaos of revolutionary Russia, as depicted gloriously in *Reds*. However, the movie did not show the final tragic decade of her life when romance was replaced by pain, and despair in the form of a rare, incurable disease.

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