An Educated Guess

In my first book, <u>Chopin's Heart</u>, <u>The Quest to Identify the Mysterious Illness of the</u> <u>World's Most Beloved Composer</u>, I summarized that Frédéric Chopin had died from tuberculosis, albeit in an unusual form. In that 2008 work I speculated that he might have had tuberculous pericarditis, a rare and particularly lethal form of a relatively common disease. I also believed he died of congestive heart failure related to this manifestation of tuberculosis. Like selecting a final and important piece of a large complicated puzzle, I believed I had found an elegant solution to complete the picture. Although I had no proof of this theory I believed I had diligently done sufficient research on this subject for it to merit this diagnosis. Still, I knew I was sticking my neck out.

Over the years thereafter I continued to advocate for an investigation of Chopin's preserved heart, ideally by means of an international inquiry, and one that would include a DNA analysis of the preserved heart's tissue. Repeatedly, my calls for this approach were either ignored or rejected.

Unannounced and undisclosed, on the night of April 14th, 2014 a small group of Polish citizens clandestinely gathered in The Holy Cross Church in Warsaw to open the longundisturbed crypt containing Chopin's heart. One of the scientists present that night, Tadeusz Dobosz, described the moment as "sublime." The crypt was carefully opened and the glass container containing the relic was finally revealed. After taking multiple photographs and then finally resealing the jar with wax, the boxed was mortared back into its crypt. The group left the church that night agreeing to insist that the tomb not be reopened for at least a half a century.

No word was leaked about that undercover adventure until a news conference announcement in Warsaw many months later. At that news briefing, Artur Szklener, the Director of the National Institute of Fryderyk Chopin, announced that Chopin had most likely succumbed to tuberculosis on the basis of the opinion of those present during the crypt's secret opening. He indicated there was a fine granular coating on the surface of the heart very suggestive of a tuberculous process. Upon hearing this I began what turned out to be a difficult process to view the photographs. Eventually, I succeeded in seeing one of those images. What I saw led me to believe I had been correct in my assumption of there being tuberculous pericarditis. I communicated my belief to Director Szklener and others in the group who had witnessed the disinterment of the treasured relic, yet never received a reply. I felt I was sticking my neck out even farther.

For several years I gave a series of lectures on the subject of Chopin's disease and cause of death and shared my thoughts about this unusual manifestation of tuberculosis being the cause of Chopin's chronic disease. At the time many still believed cystic fibrosis was the leading suspect, despite the fact that nothing in the visual inspection of either the relic or its many photographs suggested it.

As the years passed I felt that the matter might never be settled and I would be left with only my educated guess. To my astonishment I recently read an article in October 2017 issue of <u>The American Journal of Medicine</u> that was the result of an investigative study written by several of those present at the crypt's opening as well as by other Polish scientists. The article states unequivocally that Chopin died from tuberculous pericarditis and congestive heart failure. The authors stated there was sufficient evidence for them to come to this conclusion after a painstakingly detailed visual examination of the relic. The article made the headlines around the world.

My fears of having made the wrong diagnosis quickly dissipated and I felt enormously relieved to know that my reasoning was accurate and not proved unfounded. I later contacted the main author of the article, Dr. Michał Witt, a geneticist from Poznan Poland, and congratulated him for leading a fine investigation. He shared with me that he felt I was the first to identify correctly Chopin's disease and cause of death, and without the benefit of any photographs of the heart.

I take private joy in this small accomplishment. Although my name will not be one of those listed among the scientists who comprised the investigatory group, I will always know that I played a tiny role in solving the fascinating mystery of this perplexing puzzle. For that I will be forever grateful.

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