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Review Article

The Theological, Grammatical, and Diagnostic Features of Asa's Disease

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Abstract

This study reexamines the biblical notice of King Asa's late-life disease (1 Kgs 15:22–24; 2 Chr 16:12–13) through a combined linguistic, textual, and diagnostic analysis. While many interpreters have approached Asa's illness primarily through theological or Deuteronomistic frameworks—often proposing symbolic, euphemistic, or punitive explanations—the Hebrew terminology employed in both Kings and Chronicles is anatomically specific and unusually detailed for a royal illness account. Lexical analysis of לֶגֶר (*regel*) and חָלָה (*chalah*) together with the Chronicler's description of a condition that was "severe" and possibly "advancing upward" suggests a literal pathology of the lower extremities rather than a metaphorical or genital euphemism. When evaluated against known medical conditions, peripheral arterial disease—particularly in its advanced, ischemic stages—emerges as the diagnosis that best accounts for the disease's severity, progression, bilateral involvement, and fatal outcome. While theological reflection remains possible within the narrative, the evidence supports reading Asa's disease as a genuine, age-related medical condition grounded in historical reality rather than literary symbolism.

Introduction

1 Kings 15:22–24 and 2 Chronicles 16:12 offer a fascinating glimpse at the Hebrew usage of the feminine noun לֶגֶר (*regel*) or the plural form מִיילגר ~ מִזַלְגַר (*raglayim*) in the context of the disease that befell King Asa towards the end of his life. As the Hebrew language does not have a distinct word for "foot" and "leg" (nor for hand and arm), the derived feminine noun, לֶגֶר occurs 245 times[1] and is translated in most cases as human feet or legs, despite the fact that no cognates in languages other than Aramaic are known. With respect to the concept of "disease," as used in the 1 Kings 15 passage, the Hebrew verb חָלָה (*challah*) is used and translated as "sickness," "disease," and in multiple places, "weakness" (Judg 16:7,11,17; Isa 57:10, Ezek 34:4,16.)[2]. In the 2 Chronicles 16 passage, the Hebrew root word אָלָה (*chala*) is employed in 12a as a verb, while the masculine noun, חֳלִי (*choli*) is translated "sickness" in 16 of its 24 OT appearances. It also translated as affliction (1), disease (2), grief (1), griefs (1), and illness (3).

Within modern scholarship, a number of interpreters read Asa's disease through the lens of the Deuteronomistic framework, viewing the notice as part of a theological or ideological shaping of the Kings narrative rather than a historical or medical report[3].

[1] "Strong's Hebrew: 7272. לֶגֶר (regel)," Bible Hub, accessed 2026, https://biblehub.com/hebrew/strongs_7272.htm.Compare Brown, Driver, and Briggs, *Enhanced Brown-Driver-Briggs Hebrew and English Lexicon*, s.v. "regel," which gives the total as 247; see also note below on this discrepancy.

[2] The Hebrew root word for "disease" as employed in 1 Kgs 15:23 (חָלָה) is often translated "weakness" in addition to the traditional "sickness." Although it is impossible to know for sure, this "weakness" could be an important diagnostic feature. This same word is used in reference to Samson when he tells Delilah, "If they bind me with seven fresh bowstrings that have not been dried, then I shall become weak and be like any other man" (Judg 17:7 NET).

[3] The "Deuteronomistic" approach refers to the view—first developed by Martin Noth and later expanded by Cross, Nelson, and Römer—that the books from Deuteronomy through Kings were shaped by a later editor who emphasized covenant themes and theological judgments. This study does not adopt that model; for discussion, see Martin Noth, The Deuteronomistic History (Sheffield, UK: JSOT, 1981); Frank Moore Cross, Canaanite Myth and Hebrew Epic (Cambridge: Harvard University Press, 1973), 274–289; Richard D. Nelson, The Double Redaction of the Deuteronomistic History (JSOTSup 18; Sheffield: JSOT, 1981); Thomas Römer, The So-Called Deuteronomistic History (London: T&T Clark, 2007).

Although this study does not adopt that approach, its influence on the discussion warrants mention, and it remains important to evaluate Asa's foot and leg disease through a comprehensive method that brings together the theological, linguistic, and diagnostic evidence.

Asa's Disease from a Deuteronomistic Theological Approach

Because references to royal illnesses are relatively uncommon in the Kings narrative, Asa's specific mention of a leg disease has drawn scholarly attention for many years. The rarity of illness reports within Kings highlights why Asa's condition has long been regarded as unusual[4]. Reflecting the Deuteronomistic (Dtr) viewpoint, Mordechai Cogan notes, "As a rule Dtr did not note royal illness; the only other instance recorded in Kings concerns the leprosy of Azariah (2 Kgs 15:5) which led to his quarantine and removal from office and Hezekiah's disease (2 Kgs 20)[5]."

Since both Azariah's and Hezekiah's illnesses were due to divine causation, it would only be natural for one to look for a direct theological framework when it comes to evaluating Asa's leg disease as well. The Lucianic tradition of the LXX connects Asa's disease to a punishment for evildoing when it reads v. 23b as: "In his old age Asa did what was evil and was diseased in his feet." Talmudic scholar Rashi (b. Sot. 10a)[6] argues that Asa's disease resulted from his policy that "exempted no one" (וְאֵא יִקְנ), thereby drafting even newly married men into forced labor. Deuteronomy 24:5 mandates that a newly married man be exempt from military or corvée service so that he may "bring happiness to his wife." Nelson notes that the new married man's exemption was "apparently not just from the military, but also from all compulsory : service[7]." Furthermore, later Jewish sages have asserted that Asa's compulsory service would, in his own day, have required Torah scholars to abandon their study, and that God punished Asa with a leg disease as a result. Likewise, 2 Chronicles 16:7–10 records Asa's imprisonment and mistreatment of Hanani, a prophetic figure who rebuked the king for relying on foreign alliances rather than on the Lord. Jewish sages and later commentators have suggested that Asa's disease was none other than "gout."

Some interpreters who read Kings through that lens argue that Asa's disease should be understood as a theologically charged judgment rather than a literal medical condition. From within that viewpoint, the Septuagint strengthens the impression of moral causation by rendering the text in a way that more directly links Asa's wrongdoing with the onset of his disease—a connection less explicit in the Hebrew text[8]. Even so, there is little evidence that Asa's actions constituted a violation of Deuteronomic law, and nothing in the passage suggests that a disease of the feet or legs would correspond to a breach of Deuteronomy 24:5. Thus, while the LXX may provide a stronger moralizing tone for those who favor a Deuteronomistic reading, the linguistic and contextual details do not require such an interpretation[9].

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[4] These indicators include the references to the king's age at his accession, the length of his reign, and a reference to his mother's name. The Chronicler's account lends itself to more of a theological approach as the author seems to present Asa's disease as a consequence of his unfaithful reliance on physicians rather than God. Cogan notes that this association of Asa with physicians may arise from similarities in the proper name "Asa" and the Aramaic term "physician" as opposed to a concern for Deuteronomic law (Mordechai Cogan, 1 Kings, Anchor Bible 10 [New York: Doubleday, 2000], 402). Additionally, the Chronicler might have added the episode about the physicians as a humorous note on healers who were unable to heal the king, likely practicing Hellenistic medicine consisting of idolatrous magic and rituals. See John Jarick, *2 Chronicles, Readings: A New Biblical Commentary* (Sheffield, UK: Sheffield Phoenix, 2007), 116; Ralph W. Klein, "2 Chronicles: A Commentary," *Hermeneia: A Critical & Historical Commentary on the Bible* (Minneapolis: Fortress, 2012), 243. Cranz asserts that Asa is not criticized for consulting with non-Yahwistic or Hellenistic physicians, rather the Chronicler takes offense because King Asa relies only on the physicians (Isabel Cranz, "Advice for a Successful Doctor's Visit: King Asa Meets Ben Sira," *The Catholic Biblical Quarterly* 80 [2018]: 231–246).

[5] Cogan, *1 Kings*, 402.

[6] Shlomo Yitzchaki (AD 1040–1105), known by the acronym Rashi, was a medieval French rabbi and author of a comprehensive commentary on the Talmud and commentary on the Tanakh.

[7] Richard D. Nelson, *Deuteronomy: A Commentary*, OTL (Louisville: Westminster John Knox, 2002), 284–85.

[8] The Masoretic Text describes Asa's condition in neutral medical terms, noting simply that he was "diseased in his feet" in his old age (1 Kgs 15:23; 2 Chr 16:12). The Septuagint, however, renders the phrase more moralistically by adding a causal nuance—implying that Asa "did evil" in his old age and therefore became diseased in his feet. This interpretive expansion has led some scholars to read the LXX as reinforcing a moral–theological connection not required by the Hebrew text. See Dominique Barthélemy, *Critique textuelle de l'Ancien Testament*, vol. 1 (Göttingen: Vandenhoeck & Ruprecht, 1982), 229–231; Emanuel Tov, Textual Criticism of the Hebrew Bible, 3rd ed. (Minneapolis: Fortress Press, 2012), 145–147.

[9] John Gray, *I and II Kings: A Commentary*, OTL (Philadelphia: Westminster, 1963), 323.

Likewise, although the Chronicler commends Asa's earlier religious reforms, which resonate with the covenantal ideals reflected in Deuteronomy, it is not evident why an alleged editor would highlight a late-life illness that does not clearly correspond to any identifiable violation of that law[10]. Moreover, as Schipper notes, it is difficult to explain why a hypothetical Deuteronomistic editor would preserve a note about Asa's diseased feet, especially if the condition were merely gout[11]. Such an atypical medical reference would seem to require a more theologically significant explanation than a commonplace ailment.

Asa's Disease and Euphemism

Some contemporary interpreters, particularly those working within a Deuteronomistic framework, have suggested that Asa's condition may reflect a genital ailment rather than a literal foot disease. Such proposals arise largely from efforts to attach moral or theological symbolism to the narrative rather than from the linguistic or medical data of the text itself[12]. Marvin A. Sweeney remarks, "The notice that he became ill 'in his feet' is a euphemism for some sort of genital ailment." This suggestion comes from the euphemistic use of "feet" for genitals elsewhere in the Hebrew Bible[13]. Schipper and Olley note that according to a Dtr theological model (supporting rabbinic exegesis), King Asa's disregard for Deut 24:5 and subsequent exemption of newly married men from "bringing happiness to the wife" may have resulted in a venereal disease as a corresponding judgment to his sin[14].

In Judg 3:24, the courtiers of King Eglon of Moab thought that the king was relieving himself (אוֹ־תָּא וּיַלְגַּר) when in fact he had already been killed by Ehud the Benjamite. The Hebrew in this passage (וּיַלְגַּר) literally means to anoint one's self after washing. Targum Jonathan (Yevamot 103a), alleges the statement in this passage is a euphemism for bathroom functions. The Septuagint (Version-B) reads "he is draining (exhausting) his feet," allegedly a euphemism for moving one's bowel, while Version-A reads, "in the retreat of the bed-chamber[15]."

Furthermore, 2 Kgs 18:27 refers to an event during the monarchy when an Assyrian spokesperson insults the Judean soldier by saying that they "drink their urine" (מָהֶינֵיׁש מָתאָוצ) literally meaning the water of their feet. According to the BDB Lexicon, the Hebrew translation to "cover his feet" (literal translation of וֵיַסָּהְל וּיַלְגַּר־תָּא) is a euphemism for emptying the bowels[16]. The prophet Ezekiel accuses the Judeans of replicating the idolatrous ways of the Gentiles by proclaiming you "spread your legs (יְקִשַׁפְתַּו־תָּא דַיַלְגַּר) to every passerby, and you multiplied your harlotries" (Ezek 16:25).

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[10] Sara Japhet, *I and II Chronicles: A Commentary* (Louisville: Westminster John Knox, 1993), 703–705.

[11] Jeremy Schipper, "Deuteronomy 24:5 and King Asa's Foot Disease in 1 Kings 15:23b," *Journal of Biblical Literature* 128 (2009): 643–648.

[12] Both Schipper and Marvin A. Sweeney are advocates of this notion. See Schipper, "Deuteronomy 24:5"; Marvin Sweeney, *1st and 2nd Kings: A Commentary* (Louisville: Westminster John Knox Press, 2007).

[13] Sweeney, *1st and 2nd Kings: A Commentary*, 195.

[14] See Donald J. Wiseman, *1st and 2nd Kings*, vol. 9 of Tyndale Old Testament Commentaries (Westmont, IL: IVP Academic, 2008); Schipper, "Deuteronomy 24:5," 643–648; Sweeney, *1st and 2nd Kings*, 195; Jeremy Schipper, "Embodying Deuteronomistic Theology in *1 Kings* 15:22–24," in *Bodies, Embodiment, and Theology of the Hebrew Bible (The Library of Hebrew Bible/Old Testament Studies)*, ed. S. Tamar Kamionkowski, et al. (New York City: Bloomsbury Publishing, 2010), 87; John Olley, *The Message of Kings* (Westmont, IL: InterVarsity Press, 2016).

[15] Louise H. Feldman, *Judaism and Hellenism Reconsidered* (Leiden, NL: Brill Publishing, 2006), 595.

[16] Francis Brown, Samuel Rolles Driver, and Charles Augustus Briggs, *Enhanced Brown-Driver-Briggs Hebrew and English Lexicon* (Oxford: Clarendon Press), 697.

The general consensus among modern interpreters and translations, both Christian and Jewish, is that the reference in 2 Kgs 18:27 and Judg 3:24 to "covering his feet" is a euphemistic reference to relieving oneself. Most languages have such euphemisms (i.e. "relieving oneself" and "going to the restroom"). This understanding seems to go back at least to the Septuagint, which translates the Judges passages as "exhausting/emptying the feet." Admittedly, Josephus reads the passage as implying that the servants thought their master to be asleep, yet it makes little sense as to why the authors would have used a euphemism for being asleep.

Although several scholars—including Marvin A. Sweeney, Jeremy Schipper, and, to a lesser degree, John W. Olley—have suggested that *rāglāw* in Asa's case might function as a euphemism for the genitals, this interpretation represents a small and highly specialized subset of modern scholarship. Their proposal depends largely on analogies to other well-defined euphemistic idioms in biblical Hebrew (e.g., Judg 3:24; 1 Sam 24:3; 2 Kgs 18:27), yet these idioms consistently appear in contexts marked by explicit bathroom, exposure, or sexual cues, none of which are present in the Asa narrative. Moreover, the major Hebrew lexicons[17] and the standard critical commentaries on Kings and Chronicles do not support a euphemistic reading here, preferring instead the straightforward meaning of regel as "foot/feet" in its ordinary anatomical sense[18]. As a result, while the genital-euphemism theory continues to appear in scholarly literature, it remains a minority and contextually strained interpretation when evaluated against the linguistic, narrative, and diagnostic evidence.

Asa's Disease and a Diagnostic Approach: Diagnostic Characteristics

Having addressed the linguistic data and evaluated the theological proposals—including the limited and contextually strained euphemistic interpretations—the evidence favors understanding *rāglāw* in its ordinary anatomical sense. This allows the discussion to move from literary and philological considerations to the medical features implied by the text itself. On the basis of the Hebrew grammar, lexical usage, and narrative context, the following physical and diagnostic characteristics can be identified as essential for assessing Asa's underlying condition.

- Asa's disease occurred in advanced age.
- Asa's disease was one that was "severe" or "exceedingly great," and likely advanced (spread) upwards (proximally).
- Asa's disease likely led to his death.
- Asa's disease likely affected both feet (considering the large majority of cases where the Hebrew word regel is translated "feet" as opposed to "legs").
- Asa's disease may have involved both the feet and the legs.
- Asa's disease, considering the meaning of the chalah', may have manifested some form of weakness.

Asa's disease: One of advanced age. 1 Kgs 15:23 indicates that the onset of Asa's condition occurred when he was advanced in age: "only in the time of his old age he was diseased in his feet." Asa was afflicted with his disease two years before his death in 871 BC[19]. Though the nature of the disease is not specified here or in Kings, the Chronicler adds additional clues. The detail provided here that the disease onset was in Asa's old age may prove helpful to narrow down a medical diagnosis. While many disease processes can occur both in youth and in old age, some conditions are far more likely to manifest with age. In addition, some feet/leg conditions are more common in older age and more inclined to lead to death.

The nature and progression of Asa's disease. Asa's condition according to 2 Chr 16:12 was one that was "exceedingly great" or, according to some Hebrew readings, a disease characterized by "advancing upwards[20]." The Hebrew word utilized in 16:12a is the root word לְעֻמַּ (*maal*) which can be translated as "spreading upwards," "above," or "exceedingly[21]."

[17] Koehler, Ludwig, Walter Baumgartner, and Johann Jakob Stamm, *The Hebrew and Aramaic Lexicon of the Old Testament*, 5 vols. (Leiden: Brill, 1994–2000). See regel entry, which lists literal "foot/feet" as primary meanings; euphemistic uses are clearly marked and limited. Francis Brown, S. R. Driver, and Charles A. Briggs, *A Hebrew and English Lexicon of the Old Testament* (Oxford: Clarendon Press, 1906). Regel entry shows literal meaning as dominant; euphemisms listed only under special idioms such as Judg 3:24, 1 Sam 24:3. See David J. A. Clines, ed., *The Dictionary of Classical Hebrew*, vol. 7 (Sheffield, UK: Sheffield Academic Press, 2010). Again, literal "foot" is primary; euphemisms are idiomatic and not generalized.

[18] Mordechai Cogan and Hayim Tadmor, *II Kings: A New Translation with Introduction and Commentary*, Anchor Bible 11 (New York: Doubleday, 1988); Simon J. DeVries, *1 Kings*, Word Biblical Commentary 12 (Nashville: Thomas Nelson, 1985); H. G. M. Williamson, *1 and 2 Chronicles*, New Century Bible Commentary (Grand Rapids: Eerdmans, 1982); Sara Japhet, I & II Chronicles: A Commentary; John W. Olley, *The Message of Kings: God Is Present*, BST (Downers Grove: IVP Academic, 2011); Marvin A. Sweeney, *I & II Kings*.

[19] James E. Smith, *2 Chronicles: A Commentary*, 131.

[20] D. J. Wiseman notes that based upon the Hebrew, Asa's disease could have been one that "spread upwards" (See D. J. Wiseman, *Medicine and the Bible*, ed. Bernard Palmer [Exeter: Paternoster, 1986], 33–34). Also, see Robert Jamieson, A. R. Fausset, and David Brown, *A Commentary, Critical, Practical, and Explanatory on the Old and New Testaments (*New York: S. S. Scranton, 1882). They describe Asa's condition as exceedingly great or one that "moved upwards" in his body.

[21] Gill notes that Asa's disease was exceedingly great and increased upon him, becoming very severe and intolerable. Furthermore, Gill asserts that the Hebrew phrase may be "that his disease got upwards, into a superior part of his body, head, or stomach, which, when the gout does, it is dangerous." Gill cites Dr. Johann Jakob Scheuchzer who did not think Asa's disease was gout but instead an "aedematous" swelling of the feet, which "insensibly gets up into the bowels, and is successively attended with greater inconveniences; a tension of the abdomen, difficulty of breathing, very troublesome to the patient, and issues in a dropsy, and death itself." See J. Gill, "2 Chronicles 16:12 Commentary," *John Gill's Exposition of the Bible* (Paris, AR: Baptist Standard Bearer, 2016).

It is certainly conceivable that the Chronicler is indicating that Asa's condition was one that spread through his whole body, but the context does not necessarily demand this reading. Asa's condition may simply have been one that was "exceedingly great." However, by narrowing our search among those lower extremity disease processes that could be characterized by being "exceedingly great" and "spreading upwards" one may be able draw closer to Asa's diagnosis.

Asa's disease and death. As Asa's condition began two years before his death in 871 BC, it is logical to conclude that his disease may have been fatal. It should be noted that the onset of Asa's disease came before his irrational overreliance upon his physicians (conjurers) as opposed to trusting in God[22]. Though the author of the Kings account creates only a subtle connection between Asa's disease and subsequent death, the Chronicler implies much more of a direct connection: "In the thirty-ninth year of his reign, Asa developed a foot disease and his disease became severe. Yet even in his disease, he did not seek the Lord, but only the doctors. Asa passed away in the forty-first year of his reign" (2 Chr 16:12–13 NET)[23].

Foot or feet. In the 245 cases where the feminine noun לֶגֶר (regel) is employed in the OT, it is predominately used for the human feet or legs (plural).

As can be seen by the list noted below, לֶגֶר can be translated in a variety of ways[24]. Nevertheless, לֶגֶר is translated "feet" (plural) 139 times, "foot" (singular) 60 times, and "legs" only 5 times. Though it is impossible to know based upon the text itself whether Asa's condition was one that involved a single foot (unilateral) or both feet/legs (bilateral/plural), considering the predominant use of the Hebrew noun, it is likely that Asa's disease involved both feet (symmetrically) as opposed to a single extremity (asymmetrically).

Feet, legs, or both. Since לֶגֶר is a term that can mean feet (the far majority of cases) or legs, one must take into account certain medical conditions that may involve both. As previously mentioned, it would be highly unlikely that Asa's condition would be one that did not involve both feet. While it is impossible to know if Asa's condition was one that affected both the legs and feet, this potential textual clue could be very helpful when deliberating upon Asa's proposed disease processes[25]. For instance, gout is a disease that rarely involves the leg, but instead, typically involves a single joint on one foot. On the other hand, a condition like peripheral arterial disease (PAD) and peripheral neuropathy (PN) would involve both the feet and legs.

Weakness of the feet and legs. As indicated above, in 1 Kgs 15:23, the Hebrew root חָלָה (chalah) is frequently translated as "weakness" in addition to the traditional "sickness" and "disease. Although it is impossible to know if Asa's disease was one that was characterized (in some part) by weakness, considering the frequency in which the word indicates some form of physical weakness instead of a generic illness (Judg 16:7,11,17; Isa 57:10), muscle weakness should be taken into account when investigating Asa's disease. Among several of the lower extremity diseases hypothesized below, several are characterized (in some part) by weakness while others are not. Those disease processes that do not entail weakness of both of the extremities should not necessarily be dismissed, but they should be at least shifted further down the list of likely options. Among the top causes of bilateral feet/leg weakness include:

- Stroke: can involve both legs, but symptoms often manifest in one limb.
- Guillain-Barré syndrome: a rare autoimmune disorder in which the immune system attacks the peripheral nerves, causing tingling and weakness that usually begins in the feet and legs. The weakness can spread quickly and eventually paralyze the whole body.
- Multiple sclerosis: an autoimmune disease of the central nervous system most often diagnosed in people aged 20 to 50. MS is a lifelong condition that can include periods of relapses of symptoms that are followed by periods of remission, or it can be progressive.
- Peripheral neuropathy (PN): Discussed in more depth below, PN involves nerve damage to the body's peripheral nervous system, which connects the nerves from the central nervous system to the rest of the body. It can be caused by injury, infection, and a number of other conditions, including diabetes (diabetic neuropathy) and hypothyroidism.
- Myasthenia Gravis: An autoimmune condition in which a person's antibodies mistakenly attack and destroy receptors in muscles that receive nerve impulses. This leads to gradual muscle weakness and fatigue.

[22] Smith, *2 Chronicles: A Commentary*, 131.

[23] Unlike Hezekiah's illness in 2 Kgs 20:1–11, which was healed, Asa's foot disease was not healed by God but instead seems to lead to his death — in this respect resembling Azariah's leprosy in 2 Kgs 15:5, which likewise persisted, unhealed, until his death.

[24] Brown, Driver, Briggs, and Gesenius list the following translations of לגר and their occurrences: "1. accompany 1; 2. after 1; 3. attended 1; 4. feet 139; 5. follow 2; 6. followed 2; 7. following 1; 8. foot 60; 9. footstep 1; 10. footsteps 1; 11. footstool 6 ; 12. four-footed 1; 13.haunt 1; 14. heels 1; 15. hoof 1; 16. journey 1; 17. legs 5 (1 Sam 17:6, Ezekiel 16:25); 18. pace 2; 19. relieve 1; 20. relieving 1; 21. step 1; 22. steps 2 ; 23. swift-footed 1; 24. times (feet, paces) 4; 25. toes 2; 26. turned 1" ("Hebrew Lexicon Entry for Regel," *The NAS Old Testament Hebrew* Lexicon). It should be noted that this itemized breakdown, drawn from Gesenius, yields a total of approximately 240 occurrences — a figure close to, but not identical with, the totals reported elsewhere (245 per Strong's Concordance; 247 per BDB's headword entry). Concordance counts of ג vary modestly (240–247) depending on the lexicon consulted and on whether certain idiomatic or Qere/Ketiv forms are counted separately; the figure of 245 above follows Strong's Concordance.

[25] The Hebrew feminine noun קוֹשׁ (shoq) denotes the upper leg and is therefore synonymous with the thigh. Shoq is used 19 times in the Old Testament and also can express metaphorically the muscular strength and pride of a runner: "He taketh no pleasure in the legs of a man" (Ps 147:10).

Most of the conditions referred to above do not meet the textual and grammatical clues already discussed, with one exception: PN. It is also important to note that muscle weakness could have been a secondary symptom or manifestation of whatever underlying disease process afflicted King Asa.

Asa's Disease and a Diagnostic Approach: Lower Extremity Diseases for Consideration

Gout

For generations, "gout" has been offered as a potential diagnosis for Asa's feet/leg condition; however, there is no evidence (textual or diagnostically) to support this diagnosis for several reasons that will be discussed below.

Although there is an increased incidence of gout in the elderly, this condition is not exclusive to old age as it is also common among those in middle age. Certain feet/leg diseases like gout certainly can be characterized by intermittent severe pain in the extremities; however, if the Hebrew word *maal* implies a disease that "advances upwards," gout is again unlikely as it does not spread or advance proximally.

If Asa's foot disease did in fact contribute to his death, a condition like gout should be eliminated as a likely diagnosis as gout is not known to be linked with death. On average, an acute gout attack will generally reach its apex within 12–24 hours after onset and then will slowly begin to resolve itself. In most cases, a full recovery from a gout attack (without treatment) takes approximately 7–14 days[26]. Thus, though gout can be extremely painful, it normally self-resolves. In addition, gout is an asymmetrical condition, typically involving a single joint of *one* foot[27]. It does not usually occur in both limbs. Also, this diagnosis is highly suspect if the Hebrew word regel implies "legs" since gout in most cases involves the joints of the foot (primarily the first metatarsal phalangeal joints)[28].

Though gout can be "exceedingly" painful and is a condition associated with enjoying a kingly diet, many of the features simply do not match the descriptions of Asa's disease.

Syphilis

As the word "nevertheless" (אַךְ) is the word that commences 1 Kgs 15:23, it may be inferred that Asa's condition may have been a consequence of the sin in his reign. The word "nevertheless" most certainly may infer that Asa's condition needs not have caused so much suffering. Scholars such as Schipper propose that Asa's illness reflects a genital or venereal condition on the assumption that *rāglāw* is being used euphemistically rather than literally. In that model, certain writers have suggested possibilities such as tertiary syphilis or related sexually transmitted diseases. Yet this reading depends entirely on treating regel as a euphemism for the genitals, a usage that in biblical Hebrew appears only in contexts explicitly marked by sexual exposure or bathroom activity—features that are wholly absent from the Asa narratives. Thus, while the venereal-disease hypothesis appears in the literature, its linguistic and medical foundations remain tenuous.

While it is appropriate in a comprehensive differential diagnosis to consider any condition that could theoretically involve the lower extremities or be interpreted as "spreading upward," a venereal or genital-related disease remains an unlikely fit. The textual evidence, however, does not strongly support such a diagnosis. Although regel can function as a euphemism for the male genitals in a few well-defined contexts, nothing in the Asa narrative invites or requires that interpretation. The Hebrew phrasing used to describe Asa's condition is direct, anatomical, and unusually specific for a royal illness, making a euphemistic or sexually-oriented reading linguistically unnecessary and diagnostically improbable.

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[26] "Gout Symptoms and Diagnosis," Johns Hopkins Arthritis Center, accessed 2026, https://www.hopkinsarthritis.org/arthritis-info/gout/clinical-presentation-of-gout/.

[27] Frank Christian, A Scientist's View of the Bible and More (Bloomington, IN: WestBow, 2011), 83. Chemist Frank Christian cites gout as a possible diagnosis that affects both extremities; however, this is not common as gout is typically monoarticular. Christian furthermore asserts the possibility of both skin cancer and infection as possible diagnoses. Though it is impossible to rule either of these conditions out, neither typically start in both extremities and skin cancer specifically is not known to appear with symptoms that could be described as "exceedingly great." Furthermore, left untreated, infection in the feet would more than likely lead to death (or septicemia) much more rapidly than two years.

[28] Liubov (Louba) Ben-Noun, "What Was the Disease of the Legs that Afflicted King Asa?," *Gerontology* 47 (2001): 96–99.

From a medical and diagnostic standpoint, syphilis or tabes dorsalis (a syphilitic infection of the spinal cord that impacts the extremities) does not fit the above criteria already indicated within the text itself. Venereal diseases (like syphilis, gonorrhea) are often characterized as possessing few if any symptoms upon onset. While syphilis can cause dementia, heart disease, and loss of coordination, this condition is not one that best fits the designation of "exceedingly great." While transient abnormal sensations (paresthesia) or what are often called "lightning pains" are common with tabes dorsalis, in many cases numbness is more often noted. Though sexually transmitted diseases can spread between sexual partners, venereal diseases are not characterized as "advancing" or "spreading upwards." Furthermore, symptoms of this form of neurosyphilis that chiefly impact the legs may not appear for more than 25 years after the initial infection. "Genital Dysfunction" is also not characterized medically as a disease likely to cause weakness in the extremities (feet/legs)[29].

Leprosy

It has been well established that the Hebrew term *tsara'ath* translated as "leprosy" in our modern vernacular bears no real resemblance to modern day leprosy or Hansen's disease. Modern day leprosy became interchangeable with biblical leprosy due to an unfortunate translation. The Hebrew word צָרַעַת (*tsaraath*) was translated into Greek as λέπρα (*lépra*) in the sixth century and again later in the ninth century.

Upon examination of the Levitical record describing leprosy in Lev 13, it should be noted that all the references to leprosy are preceded by the definite or indefinite article suggesting that "the plague of leprosy" does not cover one single disease but blemishes caused by a whole group of diseases[30]. Although the real nature of צָרַעַת remains unknown, the differential diagnosis might include the following: psoriasis, crusted scabies, seborrheic dermatitis, dermatophyte infections, nummular dermatitis, atopic dermatitis, pityriasis rosea, syphilis, impetigo, sycosis barbae, alopecia areata, furuncles, scabies, neurodermatitis, scarlet fever, lupus erythematosus, lichen, folliculitis decalvans, morphea, sarcoidosis, and lichen planopilaris[31]. Hence, the Hebrew word צָרַעַת that was translated as leprosy didn't define a specific disease but instead uncleanness or imperfections according to ritual standards. The symbolism of the condition extended to the idea of rot, blemish, or punishment for the consequences of sin.

It is highly unlikely tsaraath was the cause of King Asa's diseased feet/legs as the predominant and characteristic form of leprosy in the Old Testament manifested itself primarily in the skin in bright white spots on the skin along with depressions of patches below the level of the skin, leaving behind either raw flesh or a scab or scale. If Asa's disease was leprosy as a consequence of divine punishment, like in the case of Azariah (2 Kgs 15:5; 2 Chr 26:19–21), the biblical author would have simply used the term tsaraath.

Lymphedema

Another condition that should be mentioned briefly in the context of Asa's foot/leg condition is dropsy, an outdated term that now simply refers to swelling of the soft tissues due to the accumulation of excess water. Several commentators over the years have used this term in their attempts to identify King Asa's disease[32]. The chronic form of this condition is called lymphedema, a disease marked by the increased collection of lymphatic fluid in the body, which causes swelling that leads to skin and tissue changes. Swelling associated with lymphedema can occur anywhere in the body, including the arms, legs, genitals, face, neck, chest wall, and oral cavity.

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[29] Schipper, "Deuteronomy 24:5"; Sweeney, *1st and 2nd Kings: A Commentary*; Klein, "2 Chronicles: A Commentary," 243. Klein employs the term "genital dysfunction" though none define this term medically other than implying some form of sexually related disease. Today, this term is most used in connection to erectile dysfunction (impotence) which I would contend is not what the above authors had in mind in describing Asa's disease.

[30] Reference to "the plague of leprosy" occurs in Lev 13:2, 3, 5, 6; in verse 8, "it is a leprosy;" in verse 11, "it is an old leprosy;" and in verse 12, "and if a leprosy break out." In other words, this description suggests that the biblical disease known as comprised several cutaneous disorders, chief among which were likely some variety of vitiligo and psoriasis. Furthermore, there is no evidence in the Levitical description to warrant the notion that leprosy, in the modern sense of the word, existed among the Jews (Jay F. Schamberg, "The Nature of the Leprosy of the Bible: From a Medical and Biblical Point of View," *The Biblical World* 13 [1899]: 162–169).

[31] Andrzej Grzybowski and Małgorzata Nita, "Leprosy in the Bible," *Clinics in Dermatology* 34 (2016): 3–7.

[32] Robert L. Hubbard Jr., *First and Second Kings* (Chicago: Moody Press, 1991), 89; Gary Staats, Expository Commentary on Kings (Gary Staats, 1991); Ronald B. Allen, H.W. House, and Thomas Nelson, *Nelson's New Illustrated Bible Commentary* (Nashville: Thomas Nelson Publishing, 1999), 450.

[33] R. A. Cambria, et al., "Noninvasive Evaluation of the Lymphatic System with Lymphoscintigraphy: A Prospective, Semiquantitative Analysis in 386 Extremities," *Journal of Vascular Surgery* 18 (1993): 773–782.

Although lymphedema is found in both sexes, it is more commonly seen in women than men. It can be seen at any age, and two thirds of cases are unilateral[33]. While the feet can be involved, the distal part of the leg is affected initially with proximal extension occurring later. The initial symptoms with lymphedema are usually painless swelling; however, the condition can be a marker for more serious underlying medical conditions including congestive heart failure, pulmonary edema, cirrhosis, and renal (kidney) disease. Lymphedema isn't generally life-threatening, but it is a life-long condition. Furthermore, this chronic disease is not one typically associated with muscular weakness of the extremities.

As can be ascertained from this brief summary of edema/lymphedema, little is consistent with the textual criteria already established. Although lymphedema can become severe and quite painful, it is usually not bilateral and in most cases the condition is not known to be "exceedingly great" from a symptomatic standpoint. Although an edematous condition like lymphedema can't be ruled out, it seems unlikely based upon its clinical presentation.

Rheumatoid arthritis

Rheumatoid arthritis (RA) is an arthritis that is symmetrical and is characterized by involvement in the small joints of the hands and feet, progressing subsequently into the wrists, knees, ankles, elbows, hips, and shoulders. RA is an autoimmune disease, which means the body's own immune system attacks the joints. Those affected typically possess a higher risk of premature death as well as serious complications if the inflammation resulting from RA isn't well-controlled. Besides an increased mortality rate, RA is often associated with a higher risk for heart disease and immune system compromise.

Nevertheless, RA is not the most likely diagnosis that would lead to death within 2 years. Although RA is known as a condition that spreads to different joints of the body, its spreading would not be best described as "advancing upwards." RA is known to begin subtly with the slow development of signs and symptoms over time. Depending on the stage of RA, the condition can be painful, but in end stage RA, the inflammation stops, but the damage continues. Even at its end stage, RA does not remotely produce "exceedingly great" or severe symptoms. It is often a condition individuals live with (uncomfortably) for many years.

It also seems unlikely that the biblical writers would associate rheumatoid arthritis with a condition impacting the lower extremities (knees and small feet joints). In fact, RA affects the upper extremities (hand/wrist/shoulder) more than the lower extremities. While RA is linked to weakness and declined physical function, these manifestations are again not isolated to the lower extremities, and most symptoms will be isolated to the joints. Muscle weakness is commonly reported by patients with RA and intrinsic muscle atrophy is the underlying mechanism of muscle weakness associated with this chronic joint disease. Ultimately, although RA possesses many characteristics consistent with the biblical text regarding Asa's disease feet/legs, many features of the disease make it less likely.

Peripheral neuropathy

Peripheral neuropathy (PN) is a condition that involves damage to the peripheral nerves resulting in a tingling, painful, or burning sensation in the extremities. It most commonly occurs in both feet and legs and typically involves symptoms of weakness and altered sensation in the feet (numbness, burning, needles). Poorly controlled diabetes is one of the most common causes of peripheral neuropathy, but a number of other conditions can be responsible for damage to the peripheral nerves. Examples of other causes include alcoholism, kidney failure, vitamin deficiency, and shingles.

PN can present itself with a myriad of differing symptoms, including numbness, pain of different types, weakness, and loss of balance. Because the autonomic nerves are often involved in PN, control of bodily functions such as heart rate, digestion, and emptying of the bowel and bladder is often lost and can lead to death. Autonomic nerve symptoms associated with PN can include problems with blood pressure, voiding, passage of stools (diarrhea or constipation), heart rate, or sweating[34].

In many respects, this disease of the feet and legs fits the biblical and textual description of Asa's disease extremely well. Though PN is often a manifestation of another underlying disease, Asa could have had at least one of the two most common underlying causes of PN: diabetes and alcoholism. PN can be a terribly painful condition that legitimately could be described as "severe" or "exceedingly great." Furthermore, PN symptoms and distribution do tend to ascend "upwards" proximally with worsening and progression of the underlying disease.

[34] Richard A. C. Hughes, "Peripheral Neuropathy," BMJ 324 (2002): 466–469.

Peripheral arterial disease

Today, the number one cause of death among those over 65 is heart disease. Heart disease is often associated with heart failure, heart attack, heart arrhythmia, and impaired circulation to the extremities. Those with peripheral arterial disease (PAD) involving the lower extremities have a higher risk of coronary artery disease, heart attack, and stroke. The prevalence of PAD in the lower limbs among those in the elderly population is somewhere between 10% and 25%, and it increases with age[35].

PAD is a condition that in its later stages can cause extreme pain and advance upwards (proximally). Narrowed, hardened arteries resulting from PAD typically start in the toes and then progress to the feet and legs[36]. Left untreated, PAD can lead to gangrene and amputation. Gangrene is one of the most severe symptoms of an advanced form of PAD called critical limb ischemia (CLI), and it is potentially life-threatening.

Advanced PAD is a condition that certainly is associated with a high mortality rate. While it is not known how common PAD was nearly three thousand years ago in the Middle East, today it is a condition that can lead to death within two years. Patients with PAD alone have the same relative risk of death from a cardiovascular cause as those with coronary or cerebrovascular disease. The risk of death in patients with PAD within 10 years is 4 times more than those without the disease[37].

Thus, in light of the pathophysiology of PAD and the information gleaned from the biblical text regarding King Asa's feet/leg disease, PAD presents the most promising diagnosis. Extreme pain, gangrene, and limb loss are all factors that would certainly meet the definition of a disease that was "exceedingly great" and severe symptomatically. It is also a condition that "advances upwards" (*maal*). PAD is well established as a condition that most commonly begins distally—in the toes and forefoot—and progressively advances proximally as arterial flow becomes increasingly compromised.

Although PAD can present asymmetrically, especially in earlier stages, advanced disease and critical limb ischemia frequently involve both lower extremities due to the systemic nature of atherosclerotic occlusive disease. The resulting ischemia affects not only the feet but also the muscles and soft tissues of the legs, producing symptoms such as rest pain, claudication, tissue necrosis, and gangrene. These features align closely with the Hebrew description of Asa's condition as "severe" and possibly "advancing upward." Importantly, end-stage PAD carries a high mortality rate, with many patients dying within two years of the onset of critical ischemic symptoms—an outcome consistent with Asa's rapid decline and death shortly after the disease's appearance[38].

Conclusion

Although some scholars continue to approach Asa's illness primarily through theological constructs—often within a Deuteronomistic interpretive framework—such readings encounter significant difficulties when measured against the linguistic and clinical data. The Hebrew terminology employed in both Kings and Chronicles is anatomical, direct, and unusually precise for a royal illness narrative, offering no clear markers for euphemism or symbolic retribution. Moreover, the progression, severity, and terminal character of Asa's condition align far more closely with identifiable medical pathologies than with literary or theological motifs. For this reason, while theological interpretations contribute to understanding the narrative's reception history, a careful exegetical and diagnostic analysis provides a more coherent and empirically grounded account of the disease described in the text.

While certain medical conditions mentioned above may have one or more characteristics that fit within the textual framework, only two diagnoses seem to best fit the grammatical and textual clues given to us by the biblical authors. While both PN and PAD best meet the textual criteria set forth above from 1 Kgs 15:22–24 and 2 Chr 16:12, PAD remains the best fit diagnostically and grammatically.

Though gout has traditionally been conjectured as Asa's most likely feet/leg disease, Wiseman[39] astutely promotes the more likely diagnosis of peripheral arterial disease with possible gangrene manifestations. Yet while Wiseman, among others, has rightly cited PAD as a more likely diagnosis over gout or a venereal disease, few have cited PN as a possible candidate[40].

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[35] C. Cimminiello, "PAD: Epidemiology and Pathophysiology," *Thrombosis Research* 106 (2002): 295–301.

[36] E. B. Jude, I. Eleftheriadou, and N. Tentolouris, "Peripheral Arterial Disease in Diabetes—A Review," *Diabetic Medicine: A Journal of the British Diabetic Association* 27 (2010): 4–14.

[37] N. R. Hertzer, "The Natural History of Peripheral Vascular Disease: Implications for Its Management," *Circulation* 83 (1991): 9–12.

[38] Even RA, which is linked to higher mortality rates, is not comparable to the mortality rate of PAD.

[39] Wiseman cites a study by A. de Vries and A. Weisberger whereby the two physician authors propose arterial disease as a more likely diagnosis than gout (A. de Vries and A. Weisberger, "King Asa's Presumed Gout," *The New York State Journal of Medicine* [1975]: 452–455). See Wiseman, Medicine and Bible, 33–34; Ben-Noun, "What Was the Disease of the Legs that Afflicted King Asa?," 96–99.

[40] Ben-Noun aptly mentions PN as a possible cause of Asa's disease; however, he prematurely dismisses this diagnosis based upon the lack of additional signs that include "weakness, polyuria, polydipsia, bone or abdominal pain." A more comprehensive review of the Hebrew word *chalah* may have persuaded Ben-Noun to consider "weakness" as potentially inherent within the meaning of the word translated "disease" (Ben-Noun, "What Was the Disease of the Legs that Afflicted King Asa?," 96–99).

Both PN and end stage PAD (also known as critical limb ischemia [CLI]) could be legitimately described as "severe" and "exceedingly great." In addition, both conditions are associated with lower limb weakness and both are known to "spread upwards" or ascend proximally with time. PN, as a disease process, involves a more symmetric distribution than does PAD, which can often involve only one leg as opposed to both legs/feet. Additionally, while the majority of those diagnosed with PN will experience some symptoms, only 35% of PAD patients have severe symptoms such as intermittent claudication or critical limb ischemia[41]. Conversely, about 60–70 percent of people with diabetes have mild to severe forms of damage to sensory, motor, and autonomic nerves that cause such symptoms as numbness, tingling, or burning feet[42].

The one factor that most appreciably separates PN and PAD with respect to the textual and grammatical clues that have been elucidated above is the fact that PN rarely leads to death while those with CLI have a mortality rate of more than 50%, comparable to the deadliest cancers[43]. While the underlying causes of PN, like diabetes, can create higher mortality rates, those who have PAD with progression to CLI are much more likely to die within two years as in the case of King Asa[44]. This factor puts PAD slightly ahead of PN as a likely candidate for King Asa's disease.

While it remains impossible to be definitive with any diagnosis hypothesized for review without diagnostic testing and advanced imaging, discussion such as this should be a reminder that the events and stories written by the biblical authors reveal historical human beings with bodies that were as susceptible to disease and age as we are. While the medical data strongly support a diagnostic reading of the passage, Walter Brueggemann rightly observes that the narrative itself "makes nothing of the point." Instead, it offers only subtle hints that later interpreters developed into theological speculation. As Brueggemann notes, "the way is left open for theological speculation. It remained for later theology to bring Asa under judgment in a verdict that seized upon hints of negativity made here[45]."

Whether Asa's illness is intended to be read as a form of divine retribution—either for a perceived violation of Deuteronomy 24:5 or for his harsh treatment of the prophet Hanani—remains a subject of scholarly discussion. The narrative allows room for later theological reflection on these actions, yet it does not explicitly connect either episode to the onset or nature of Asa's disease. When the linguistic and medical details are examined, the description more strongly supports a literal pathology of the lower extremities rather than a euphemistic or symbolic genital disorder. Even Schipper—who offers one of the most developed theological readings of the episode—acknowledges that his approach "appears no more natural, stable or universal than do the medical models underlying many contemporary discussions of disability[46]."

Whether Asa's disease reflects divine punishment or a naturally occurring age-related condition cannot be stated with certainty. However, the Chronicler's narrative strongly implies that Asa's failure lay not merely in the severity of his illness but in his refusal to seek the Lord, relying instead exclusively on physicians. Within this theological framework, the possibility of restoration was available, yet unrealized because the king turned to human remedies without appealing to divine aid[47]. As a result, Asa's condition intensified dramatically, manifesting the very progression described by the Chronicler as "spreading upward," until the disease reached a terminal stage and culminated in his death.

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[41] Francesco Secchi, et al., "Peripheral Artery Disease: How Much Inter-Leg Symmetry? A Contrast-Enhanced Magnetic Resonance Angiography Study," *Medicine* 99 (2020).

[42] National Institute of Diabetes and Digestive and Kidney Diseases, *Diabetic Neuropathies: The Nerve Damage of Diabetes* (Bethesda, MD: National Institutes of Health).

[43] Barry T. Katzen, presentation at the International Symposium on Endovascular Therapy, reported in "Long-Term Mortality After CLI Diagnosis High, Urgent Action Needed," *Healio*, January 27, 2020.

[44] The leading known cause of PN is diabetes, which ranks as the seventh leading cause of death in the United States. See Sherry L. Murphy, et al., 'Mortality in the United States, 2023,' NCHS Data Brief no. 521 (Hyattsville, MD: National Center for Health Statistics, 2024); National Center for Health Statistics, FastStats: Diabetes, accessed 2026, https://www.cdc.gov/nchs/fastats/diabetes.htm. Individuals with diabetes have a twofold to threefold increased risk of mortality compared to individuals without diabetes. See Klara J. Rosenquist, et al., 'Fat Quality and Incident Cardiovascular Disease, All-Cause Mortality, and Cancer Mortality,' The Journal of Clinical Endocrinology & Metabolism 100 (2015): 227–234.

[45] Walter Brueggemann, *1 and 2 Kings*, Smyth and Helwys Bible Commentary (Macon, GA: Smyth & Helwys, 2000), 192.

[46] Schipper, "Embodying Deuteronomistic Theology," 87.

[47] Yigal Levin, *The Chronicles of the Kings of Judah* (New York: Bloomsbury Publishing, 2017), 82. Some have surmised that Asa was condemned for using physicians, yet scripture repeatedly refers to the value of physicians and their role in healing (Jer 8:22; Matt 9:12; Col 4:14). Asa's problem was not that he used physicians, but instead his refusal to ask God for help. When Asa's son succeeded him as king, he is praised because he didn't "consult the Baals" or consummate the idolatrous practices of Israel (2 Chr 17:3–4). See also Donal O'Mathuna and Walt Larimore, *Alternative Medicine* (Grand Rapids: Zondervan, 2010), 68.