

## Book Reviews

### Typhoid Mary – Captive to the Public's Health

Judith Walzer Leavitt  
Beacon Press, 1996, 332 pages, \$US14.00

REVIEWED BY GREG DEVER

*Typhoid Mary* - A person from whom something undesirable or deadly spreads to those nearby.  
*The American Heritage Dictionary of the English Language, 3rd Ed., 1966.*

Judith Waltzer Leavitt's book *Typhoid Mary – Captive to the Public's Health* is a book about viewpoints - "where you stand determines your perceptions and your understanding". The book addresses - through both historical and contemporary analysis - complex issues regarding the need to protect the public's health versus the protection of civil and personal rights of the individual. Although the pathological touchstone may be typhoid, clearly the author's observations are relevant to the public debate about developing and implementing equitable public health policies to address HIV/AIDS, multiply drug resistant tuberculosis, the alphabet hepatitis viruses, and other emerging infectious diseases.

Mary Mallon, an Irish-born cook of modest means, was identified in 1907 as the first healthy carrier of the typhoid bacillus in the North America. As a cook for many prominent elite in New York City, she was linked over her life time to 47 cases of typhoid fever including three deaths. She was discovered by a civil engineer, George Soper, hired by one of the households where Mary was a cook that experienced a mysterious typhoid fever outbreak. Soper, through shoe leather epidemiology, traced Mary's places of employment and discovered cases of typhoid fever in four previous and two subsequent households. As the concept of a healthy

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carrier was not generally known by either the public or health authorities, it is not surprising that Mary Mallon became very hostile to Soper's requests to test her stool for typhoid germs. Mary was eventually seized by public health authorities who tested her stools (positive for typhoid bacillus) and banished to a TB isolation center on North Brother Island in New York City. In 1909 she mounted an unsuccessful legal attempt to gain her freedom. Leavitt observes that "whereas late twentieth century courts are extremely vigilant of individual rights and due process, early twentieth century judges demonstrated a preference for social control over individual autonomy," a point of view that was evident in the 1909 proceedings.

With the advent of a new and more compassionate Health Commissioner, Mary was released in 1910 only to return in 1915 when she was discovered as a cook in a maternity hospital that experienced an outbreak of 25 cases of typhoid fever. Working under the pseudonym of Mrs. Brown, Mary was again seized by public health authorities and sent back to North Brother Island until her death in 1938.

To the end Mary refused to accept that she was a carrier: She was quoted by a reporter saying, "*This contention that I am a perpetual menace in the spread of typhoid germs is not true. My own doctors say I have no typhoid germs. I am an innocent human being. I have committed no crime and I am treated like an outcast - a criminal. It is unjust, outrageous, uncivilized. It seems incredible that in a Christian community a defenseless woman can be treated in this manner.*"

Unlike many of the subsequently identified healthy and sometimes uncooperative typhoid carriers, many of whom were identified as causing more typhoid outbreaks and deaths than Mary, she alone was quarantined. She alone was demonized by public health authorities and the press and stigmatized as "*Typhoid Mary*", an epithet which today has worked its way into the American Heritage Dictionary as a person who spreads something undesirable or deadly to others. This transference of "*Typhoid Mary*" - originally quoted from a scientific medical paper - into our common lexicon is an example of how our language has adopted Typhoid Mary as a symbol of infamy.

Leavitt explores the dynamics leading up to Mallon's incarceration by analyzing the effects of the new science of bacteriology and its affect in reducing typhoid fever which was one of the most serious health problems in the 19<sup>th</sup> century. Salmonella typhi was identified in 1880 and thus traced to contaminated water supplies. With the addition of

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community water filtration methods in the early 20<sup>th</sup> century, morbidity and mortality rates from typhoid dramatically diminished. However, typhoid fever did not disappear. "By 1907 when bacteriologists identified Mary Mallon as a healthy typhoid carrier, scientists had already firmly established that healthy people could carry salmonella typhi in their excreta and transmit the disease to others." Laboratory investigations then became influential tools in health departments' legal investigations and the public justification of subsequent events. Leavitt observes that with Mary Mallon health department thinking concentrated on the bacteria rather than on a more comprehensive approach to eliminating the dangers that Mary Mallon posed. "The energy and commitment of these particular bacteriology guided health officials was not directed toward social rehabilitation but focused more narrowly on the pathologic bacilli, illustrating how for them bacteriology reduced the scope of health-related work. The necessity for keeping Mary Mallon isolated emanated from her laboratory-defined carrier state and from her refusal to accept the authority of bacteriological findings."

Vilified in the press as Typhoid Mary, she was then, unlike any other healthy typhoid carrier, isolated as a "menace to public health" for a total of 26 years. During this period the authorities continued to try to learn through her bodily secretions how carriers' infection patterns might change over time. Her incarceration apparently represented the triumph of the new science of bacteriology with laboratory verification vital to what became identified as the "new public health". "Finding and isolating Mary Mallon represented the scientific optimism of the early twentieth century and the faith that science would serve humanity in curbing disease." What they forgot was Mary Mallon the person.

Leavitt also explores the phenomenon of scientific discoveries outdistancing public health policy. In Mary's case she was isolated and studied while the public health department determined policy based on what they learned from her. Perhaps this was easier to accomplish on a demonized, poor, single, female Irish-born domestic servant without any family or influence in America while the rest of the healthy typhoid carriers, estimated to be in the thousands in New York City alone, were left to their respective freedoms.

In examining the law and the limits of liberty at the time, "the court and the health department put the protection of

society and the public's health as they saw it above the protection of one individual's liberty." Mary's legal case asked important questions: "Is it possible to protect health of the population and at the same time not infringe on individual liberty?" In 1909, the judge ruled that Mary's liberty "could be taken away in the name of protecting the public's health." This decision reaffirmed the broad sweeping powers vested in public health authorities at the time. However there were inconsistencies. In 1924 when a male healthy carrier, also a food handler, became before the New York courts as a repeat offender, the courts did not follow Mary's case as precedent but dismissed the case. "The judges in 1909 and 1924 did not speak about the universal applicability of their rulings; and the health officials, who understood it, chose not to bring it up. They had no intention of isolating all the carriers." It was clear that there were no

strict rules "to determine which carriers health officials should isolate." Class, gender, and ethnicity-based perceptions about Mary's social position "all contributed to defining her as dangerous in the eyes of those who pursued her".

Leavitt brings up the relevance of studying Mary's legal efforts: "The public health laws that exist today are basically similar to the ones developed at the beginning of the twentieth cen-

tury. The states' obligation to protect the health of citizens cannot be abridged or obliterated, but that obligation is constantly open to interpretation as to how it should be carried out and whose expertise might be called upon to help. Legal questions like the ones posed earlier in the century continue to face public health officials trying to prevent the spread of HIV infection and drug resistant tuberculosis."

In the 61 years since Mary Mallon's death, Typhoid Mary has been the subject of many articles, a novel, five stage plays, one theater dance production, and many rumors. With time her life has been treated more sympathetically particularly by the playwrights. Leavitt observes that "it was predictable that our experiences at the end of the twentieth century with the new epidemic of HIV infection and AIDS and an upsurge in drug-resistant tuberculosis, in addition to other emerging viruses like Hanta, Ebola, and sabia, and Lyme disease, Legionnaire's disease, and toxic shock syndrome, would have inspired writers to use Mary Mallon's story to develop the human meaning in our health worries." The premier performance of one play in 1988 was a benefit for People for AIDS Coalition. The playwright was "struck by

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*the similarities between the way Mary was treated, her social position, and contemporary editorials and news articles about AIDS and prostitutes."*

Leavitt has shown how Mary Mallon appeared from different standpoints. Early on public health officials, medical writers, and the media created a "powerful negative image" replacing Mary's humanity. "Typhoid Mary" became a popular and stigmatizing phrase which actually affected how she was treated. Other perspectives include those of scientists identifying carriers, health officials trying to protect the public, and lawyers and judges trying to balance medical and social concerns. Mary's perspective was that she was unjustly accused and isolated. Leavitt observes that "without considering our cultural biases, we cannot fully understand how the medical and public health communities saw this defiant immigrant Irish cook, nor begin to comprehend their actions toward her." Leavitt then joins these perspectives together in an effort to see how Mary Mallon's example raises general issues that concern public health today and asks: "Would it have been possible to protect the health of New Yorkers without taking away Mary Mallon's liberty for twenty-six years? Is it possible, today, to protect the public from diseases such as drug resistant tuberculosis and AIDS (and the new ones will yet emerge) without infringing in individual's rights and liberties?"

The concluding chapter addresses "the identification and labeling of new categories of people who challenge the public's health; the question of isolation and its potential threat to personal liberty; and the attributes of blame and responsibility for the spread of disease." These issues all "emphasize the interdependence of medicine and society" and "revolve around a basic conflict between individual rights and the public health."

Leavitt concludes: "The conflict between priorities of civil liberties and public health will not disappear, but we can work hard developing public health guidelines that recognize and respect the situation and point of view of individual sufferers. People who can endanger the public health of others would be more likely to cooperate with officials trying to stem the spread of disease if their economic security were maintained and if they could be convinced that health policies would treat them fairly. Equitable policies applied with the knowledge of history should produce very few captives to the public's health."

Perhaps Mary Mallon's plight and Leavitt's comprehensive analysis of the issues surrounding her case will contribute to our understanding on how to balance civil liberties and the health and well being of our communities, families, and individuals. □

O health! health! the blessing of the rich! the riches of the poor! who can buy thee at too deare a rate, since there is no enjoying this world without thee?

**Ben Johnson (1573 – 1637) in 'Volpone', II:2**