The Civil Rights of Mary Mallon

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No one disputes the events after August 1906; the facts prior to this date, however, remain conjectural. Gen. William Henry Warren, a prominent New York City banker, rented a summer house for his family of three in Oyster Bay, Long Island. In July 1906 they moved in, bringing with them a complement of seven live-in servants. On August 27, one of the servants became acutely ill with typhoid fever, and by September 3, five more cases of typhoid had arisen within the household, including the general’s wife and daughter. There were no further cases but the owner of the home, fearing that the value of her property was now in jeopardy, recruited an established epidemiologist and sanitarian, Dr. George A. Soper, to seek out the origins of the contagion. He quickly eliminated the usual sources of enteric fever (faulty privies, deteriorating sewer systems, contaminated water supply), leaving him with the uneasy likelihood that a healthy human might be the carrier of the pathogen. By bacteriologic assays, he eliminated from suspicion Mr. Warren and six of the seven servants. The seventh, a Mary Mallon, had quietly resigned her job as the family cook shortly after the first case of typhoid had emerged and had then disappeared. She was described by her fellow house servants as remote, unfriendly, at times violently hostile and a “rather dirty person.”

Soper felt obliged to pursue his one remaining lead and he sought out a Mrs. Stricker whose employment agency in Manhattan had originally recruited Mary Mallon as the family cook. Slowly and deliberately Soper reconstructed Mallon’s employment history as a family cook, going back many years. He then interviewed most of these families. Beginning in 1900 there had been a household in Mamaroneck, then several in Manhattan, then one in Maine, then Sands Point in Long Island, then Tuxedo Park, New York. In each instance, one or more individuals in the household had developed typhoid, and in each instance, Mallon was said to have discreetly departed to seek employment elsewhere. In the seven households investigated, Soper identified 53 cases of acute typhoid fever (with three deaths), all temporarily associated with Mallon’s employment as cook. Soper readily admitted that these statistics were quite conservative since many of Mallon’s known places of previous employment could no longer be investigated and not all of her tours of duty had been obtained through the Stricker employment agency. Furthermore, Soper counted only those primary cases of typhoid ascribable to direct contact with Mallon’s food preparations while not considering the many secondary cases stemming from the momentum of the initial outbreaks. Soper fully acknowledged that the true number most likely exceeded 1,000.

Armed with circumstantial evidence of a compelling association between Mallon’s cooking and multiple outbreaks of typhoid, Soper tracked her finally to a new sight of employment, confronted her with the epidemiologic data and requested her voluntary cooperation in verifying her carrier state. Mallon’s pathologic temper was amply demonstrated and he barely escaped her wrath. Undeterred however, he appealed to the New York Department of Health and eventually Mallon was arrested, but only after a violent struggle in which two policemen suffered injuries, one losing most of one ear. Mallon was kept in an isolation ward at Willard Parker Hospital where she exhibited no ill health, but repeated stool cultures nevertheless demonstrated an abundance of S. Typhi. By order of the health authorities, she was then remanded to a small bungalow next to Riverside Hospital on North Brother Island in the East River. Her cottage was provided with all necessary amenities and she was free to roam the island and use its facilities, including the local chapel.

Mary Mallon’s story became widely publicized and the June 20, 1909 edition of William Randolph Hearst’s New York American vividly elaborated on the morbid events, labeling her as “…the most dangerous woman in America.” The newspaper also provided her with a new name: “Typhoid Mary.”

In 1908, G.F. O’Neill, a local attorney, took on her case as an instance of imprisonment without due process of law, without legal representation, indeed, without even a trial. The judge dismissed a request for release, pointing to a 1905 Supreme Court judgment regarding compulsory vaccination, which declared that prudent measures undertaken to protect the public were a legitimate exercise of the state police powers. By this time Mary Mallon’s story became widely publicized and the June 20, 1909 edition of William Randolph Hearst’s New York American vividly elaborated on the morbid events, labeling her as “…the most dangerous woman in America.” The newspaper also provided her with a new name: “Typhoid Mary.”

In February 1910, after 35 months of isolation during which time she repeatedly asserted her innocence claiming that her imprisonment was a British plot to suppress her activities...
on behalf of Irish independence] Mal-
lon was offered her freedom on two
conditions: that she refrain from any
employment requiring direct contact
with food and that she report to the
Department of Health at three-month
intervals.

She was then released and promptly
broke both promises, disappearing
into the urban sprawl of municipal
New York. For the next five years she
held various cooking posts at numer-
ous homes and in restaurants, under a
number of aliases, producing a further
series of typhoid fever outbreaks.

In 1915, there was an unexplained
cluster 20 cases of typhoid among
the patients at the Sloane Hospital
for Women. Soper was called, and he
immediately recognized the chef as
Mary Mallon, now under the assumed
name of Brown. She was promptly
remanded to the same East River cot-
tage. Some 17 years later, on Christmas
morning 1932, Mallon suffered a severe
stroke, remaining in a semicomatose
state for another six years, ultimately
dying on November 11, 1938. In what
some regarded as undue haste, she was
buried in a Bronx cemetery within
hours of her death.

These, then, are the accepted details
in the tragic life of Mary Mallon.

Civil liberties vs. population safety
The New York Department of Health
had been accused of abridging Mal-
lon’s civil liberties; indeed, banishing
her without trial to life imprisonment.
Many claimed that a mere quirk of
microbial happenstance, ultimately
beyond her control, had somehow con-
verted her into an unwilling chronic
carrier. The department, on the other
hand, pointed to as many attempts to
work out some sort of compromise
with Mallon; it insisted, nevertheless,
that it could never abdicate its obliga-
tion to protect the health of the larger
community. It claimed that all soci-
ety represents an uneasy equilibrium
between private autonomy and the
needs of the community and that no
system of government can prevail for
long without some visible authority in
matters of health and social stability.
(Plato describes an important trial in
Athens: “The judges: Tell us Socrates,
do you suppose a city can exist and not
be overthrown, in which the decisions
of law are powerless, set aside and
trampled upon by individuals?”)

The debate regarding the civil liber-
ties of the innocent carrier may have
obscured yet another area of conten-
tion. The arrival to the shores of some
36 million immigrants between 1880
and 1920 was greeted with varied emo-
tions, particularly so since most new-
comers were poor, under-educated and
with a greater vulnerability to such
infectious diseases as cholera, typhoid,
tuberculosis and poliomyelitis. The
waves of arriving Irish that, for exam-
ple, coincided with major outbreaks of
cholera and typhoid in East Coast cit-
ties, and nativist hostilities to the new
immigrants, were translated readily
to blanket accusations that the Irish were
the cause of these outbreaks. These
complaints ignored the fact that the
Irish were the chief victims of these con-
tagions, which had been spread exclu-
sively by contaminated water supplies.
The spread of poliomyelitis, between
1910 in 1920, was similarly blamed
upon immigrant Italians and Jews.

Newspaper reports invariably men-
tioned Mary Mallon’s Irishness, as
well as her alleged temper, suggesting
that a Celtic heritage and a confront-
ing personality were somehow the
necessary preludes to the carrier state.
Epidemiologists, on the other hand,
concluded that at least five percent of
those exposed to the typhoid bacillus
became chronic carriers, meaning that
they were at least 20,000 carriers of all
ages and persuasions wandering the
streets and country roads of the United
States in 1906. Yet Mary Mallon’s
name crops up as the evil exemplar of
the carrier state.

Some further observations need to be
offered: without any help from carrier
immigrants, typhoid fever had contin-
ued to flourish throughout the United
States, including those heartland cities
where few if any immigrants had ven-
tured. Indeed, in the United States
Army of 1898 to 1900 with approxi-
mately 107,000 officers and men, most
of whom were native-born, there were
20,738 cases of typhoid, with 1,580
deaths.

Even if all immigrants had some-
how been excluded from this nation,
typhoid would nevertheless have con-
tinued to exert its toll until American
society could instill better personal
hygiene habits in its residents and until
local communities were sufficiently
motivated to establish water supplies
free of fecal contamination. ✴

[Editor’s Note: This article, written by
the late Stanley M. Aronson, MD, found-
ing dean of Brown’s medical school and a
former editor-in-chief of the Rhode Island
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