

The Strange Case of John Early

A Study of the Stigma of Leprosy¹

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Leprosy has undoubtedly been the least understood disease of man in the United States. To the public it has been regarded as a disease apart, not only a manifestation of uncleanness but also deeply discrediting to the person who is so afflicted and feared as a highly contagious calamity rising out of the dank mists of the medieval ages. When one is pronounced a "leper" in our society, he is often stigmatized, denied full social acceptance and shorn of his individual rights. Such a man was John Early, not only the most flamboyant and bizarre victim of leprosy in American history but also one of the more tragic. This unlikely candidate, in his unique way, did more to improve the plight of persons with leprosy in the United States than did almost anyone else of his time.

John Ruskin Early was born on a farm in the western part of North Carolina in 1874 and lived in that area until he was twenty-three years old. In 1896 he enlisted in the United States Army and served for nine years, rising to the rank of corporal. Taking part in the Spanish-American War, Early was stationed in Cuba from 1898 to 1900 and suffered severely from malaria. Subsequently, he was sent to the Philippine Islands until 1902, where he saw action against the Filipino insurrectionist army of Emilio Aguinaldo, and was then transferred to San Francisco and then to Plattsburg, New York. All this while, with the exception of his bout with malaria, this large, well-built man, had always enjoyed good health. The likelihood of his exposure to leprosy while in the Philippines is corroborated by the studies of Aycock and Gordon⁽²⁾, and Hasseltine⁽²⁵⁾.

When Early was stationed at Plattsburg Barracks in 1905, he and several other soldiers drifted into a hall where a Salvation Army meeting was in progress, attracted by the music and the warmth. He later reminisced that at the time he was just "a big hulking kid, fresh from service, and without respect for anything on the face of the earth except my mother and my flag." While sitting in a side seat listening and seeing what was going on, Early was struck by the sight of:

... this slip of a girl got up—little bit of a girl she was, only sixteen; she could walk right under my arm. Lord, but she looked pretty in the blue bonnet! She had a guitar slung across her shoulder on a red ribbon, and she sang and played up there on the platform. She sang hymns my mother used to sing—"Throw Out the Life-Line" and 'Let a Little Sunshine In,' and that other one, 'If You Love Your Mother, Meet Her in the Skies.' A fellow don't quite get the grip on those unless he happens to have lost his mother. I had⁽²³⁾.

The sixteen year old girl later recounted that she had noticed Early as well and that "when I was singing, he looked at me. He—he testified that night." Lottie wouldn't marry an army man however, since "I don't think it's right for them to be married when they have to go away off and leave their families behind." Thus when John's term of military service expired the following year, they were married⁽²³⁾.

Two years later with his wife and a one year old baby, Early moved to Canton, North Carolina, and began work at a pulp mill known as the Champion Fibre Company. At this time he was supposedly in perfect health. At first he was assigned to the bleach room, handling chloride of lime, but this caused him to cough so much that he became too sick to work on some days. Early was then transferred to the leach room where he was constantly in touch with what was known as "black ash," inhaling the fumes and dust, and coming in

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constant contact with a very strong, poisonous "caustic liquor" made from the ash which was largely a heavy solution of caustic potash, intensely corrosive to the skin (7, 40).

While working in the room one day, some of the caustic liquid dropped off the pipes and fell on Early's skin causing burning and itching sores. Eventually, his face and neck became very much inflamed. Moreover, the caustic ash dust seemed to be affecting his respiratory system. This condition forced John to give up his work at the mill on August 7, 1908. He later reminisced:

When I left, there were between a dozen and twenty in the same fix, and it was common talk among the workers that no man could work there more than two years without being poisoned by the ash. You not only get the ash dust all over you, but you must of necessity get the pulp on you as well. I know one poor fellow whose leg was so badly poisoned that it swelled up to the size of a boot (40).

After talking it over with his wife, who was six months pregnant with another child, Early, on August 18th, decided to travel up to Washington, D.C., alone to see about a pension claim for his recently aggravated malaria. Lottie later remembered:

I urged him to leave me and go. He kissed baby and me good-by, and we watched him ever so far when he went down the road. He turned back and waved his hat and laughed to make me cheer up. I was crying.

She further recalled:

That was the last time he kissed me, and I didn't know it was to be the last time. I think, if I had, I'd have run after him and held him back—I think so. But we neither of us knew, and he left me (23).

Upon his arrival in Washington, Early secured a room at the Salvation Army lodging house; then he contacted the pension board and began processing his claim. His face, however, had become so acutely inflamed and swollen that his eyes were almost closed. Moreover, the affected skin burned and itched severely. Hoping for relief, Early, on August 21, contacted a general practitioner in the city, named Stuart, who was completely befuddled by the case. As the local physician examined him and began to allude to the possibility

of smallpox and other contagious diseases, Early innocently remarked, "What have I got, doctor, leprosy (40)?"

Remembering that Early had admitted to military service in the Philippines, the doctor, in fear of contagion, retired precipitously. He returned shortly with Dr William C. Fowler (1864-1937), inspector for contagious diseases in the District of Columbia, who had never seen a true case of leprosy in his life. After a brief look, the two medical men went out, carefully locking the door behind them but soon returning with Dr. Joseph J. Kinyoun (1860-1919), pathologist at Washington University and founder of the U.S. Public Health Service Hygienic Laboratory. After a brief examination, Kinyoun remarked that the case was "strongly suspicious" and took a small cutting of Early's facial skin to his laboratory. There he reported finding bacilli "corresponding morphologically with those of leprosy." These findings were speedily endorsed by Dr. William C. Woodward (1867-1949), health officer of the District of Columbia and expert in medical jurisprudence, and Early was immediately removed from the locked room at the doctor's office and forcibly quarantined in a hastily erected tent down on the marshy bottom adjacent to the eastern branch of the Potomac River (7, 30).

Up to this time Lottie heard from John every day and he had written her that he expected to get the pension and if he didn't, he would find work and send for her and the baby. "Then I didn't hear from him for several days," she recalled, but "we expected John would send for us any time, until that morning when the news came." Early's brother suddenly came running along the road waving a newspaper shouting, "John's got leprosy." In spite of her condition, Lottie, learning that John was isolated all alone without any friends or help of any kind, decided that she must go to him (23,34).

After finally making it to Washington, nearly a week later, Lottied found that:

They would let me talk to him from a distance. They said he was a leper, and under strict quarantine. And they gave me the choice then of what I



FIG. 1. John Early in his quarantine tent in May, 1909, nine months after he was charged with having a case of leprosy. (*Munsey's* photograph)

might do, I could share his quarantine, if I wanted to run the risk. They could not prevent me being with him if I wished. But if I did—if I stayed and nursed him and was near him—then I, too, had to be placed under quarantine; and they would take Manly from me, and the baby as soon as it was born.

Not wanting to lose the children, Mrs. Early promised the health authorities that she wouldn't touch him, if they would just let them live near each other so that she could see and talk to him from a distance⁽²³⁾.

The answer of the Washington officials was to move Early into an old weather-beaten, ramshackle house four miles out from the Capitol where a lonely, dead-end road terminated next to the mud flats of the river. However, as one entered the door, he saw a strange sight as the doorways between the two halves of the house were crudely walled-up. Mrs. Early was allowed to live on one side and John on the other. A full-time policeman was hired by the government to make sure that the couple did not go near each other. A sentry box was erected in front of the back porch and equipped with a large searchlight which shone directly on the door leading from Early's room every night. She painfully remembered how:

We were all alone here in this big house, and it was bitterly cold and bare. There was only one stove. The plaster was all fallen off the walls in places, and the rats—ugh! . . . They came out and stared at me. I could see their eyes in the dark. Manly was afraid of them (23).

The Early case now attracted consider-

able national attention. The *New York Sun* wondered what the government was about, and asked if Early was to be a victim of a tangle of futility and ineptitude. The *New York Times* suggested it was a case of medievalism, for according to that newspaper, a member of the Army Medical Corps had proved fairly conclusively that the disease was not really infectious, but a form of tuberculosis contracted from eating bad food at sea. The *New York World* offered the consolation that Early's solitude "has been mitigated to some extent by leave to see as much of his wife as the law admits." The controversy even carried across the Atlantic to the pages of the *London Times* (34, 39).

Meanwhile back in Washington, on long winter nights, the Early's only communication was by rapping on the wall. Lottie remembered that:

I would rap on it, and he would answer. It was lots of fun. And I brought my little army organ with me, you know—the kind the Salvation girls sing out in the streets. Here it is. I could move it up

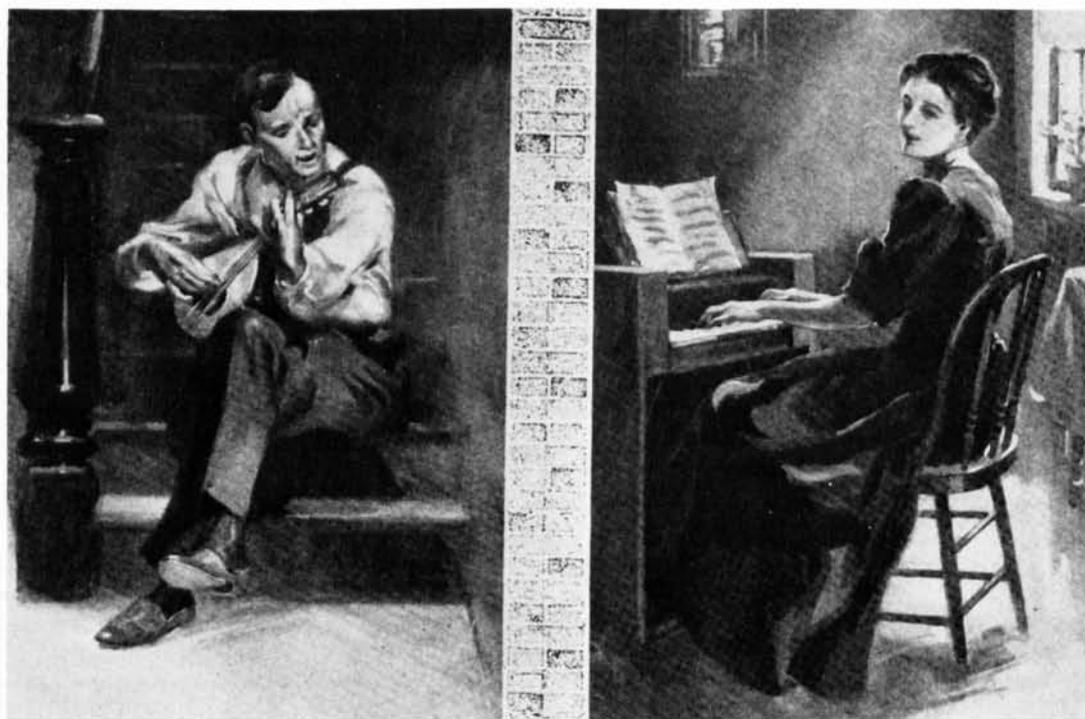


FIG. 2. The brick wall between John and Lottie Early as depicted by a *Munsey's Magazine* artist in May, 1908.

close to the wall, and John had his mandolin, and we would sit here and play to each other for company all the hymns we liked the best, and John's army songs. I could hear his voice through the wall, you see, and he could hear my playing, and it wasn't so lonely.

Soon, however, it became time for her baby to be delivered. She recalled that the night that her baby was born:

... we were all alone, mother and I, and we couldn't get help. John and the guard were down in the tent, half a mile away, and mother said we mustn't let him know, for fear he'd break quarantine and come to me. She went across the road in the snow and called for help, and the neighbors were afraid to come. Why? Because I was the leper's wife. So mother went out there on the porch and blew the police-whistle of distress that they had given to us to use in case of extreme danger (23).

After giving birth to the second child, the twenty-one year old Mrs. Early engaged in a constant fight to keep her children and improve John's plight. She wrote to Mrs. Theodore Roosevelt and the incoming President Taft, as well as skin specialists throughout the country. As the months went by, Washington officials were at a loss as to how to dispose of Early and his very expensive quarantine arrangement which was costing the District about \$3,000 per year. There was talk of shipping him to either the Philippine or Hawaiian leprosy colonies. In the meantime, his skin condition had improved and eight and one half months following his arrest his skin problem had completely disappeared except for a slight redness on the forehead (7, 23).

A prominent New York dermatologist, Dr. L. Duncan Bulkley (1845-1928), was then persuaded by a lady from the Salvation Army to look into the case. Dr. Bulkley, widely respected as the founder of the New York Skin and Cancer Hospital and former editor of the *Archives of Dermatology*, first asked a certain Washington dermatologist to investigate the case but the latter declined to do so, and wrote Bulkley that if it were known that he had visited a case of leprosy, it would ruin his practice (7).

Taking up the cause himself, Bulkley journeyed to Washington on May 9, 1909, and found the Early family walled-off from each other with "a policeman on guard outside to prevent their having anything to do

with each other." Mrs. Early cooked John's food and passed it to him over a fence outdoors. His hair hung very long over his shoulders as the health officers had refused to let anyone cut the "leper's" hair (7). During the following week, Dr. Bulkley gave Early a very thorough medical examination, even to the extent of making a hundred needle pricks on all parts of the body to check for anesthesia, which is a symptom of leprosy. The results were all negative. To be even more accurate he cut out different portions of skin and prepared several dozen preparations for bacteriologic study and sent them to Dr. William H. Welch (1850-1934), Professor of Pathology at Johns Hopkins University and Dr. William H. Park (1863-1939) Director of New York City's Health Laboratories. Both of these men reported that their microscopical study of the tissue had yielded no leprosy bacilli. As a result of his investigation, Dr. Bulkley insisted that "Mr. Early had not and never had leprosy." In an editorial in the *Medical Record* of June 19, 1909, Bulkley cited Dr. Welch of Johns Hopkins Hospital, who, in reference to the Early case, had remarked that "leprosy is practically the least contagious of all infectious diseases (6)."

The Washington health authorities, however, still stubbornly held to their diagnosis of nine months previous and would not even examine Bulkley's specimens of Early's skin. Bulkley reported his findings to the newspapers and public pressure began to mount for Early's release (6, 35). Finally one month later on July 3, 1909, Early was shipped to New York in a locked baggage car (1). There he was carefully examined again by numerous skin specialists who found nothing to indicate that he had leprosy (35, 40).

At a special news conference on July 10, Dr. Bulkley pointed out that whereas Fowler and Kinyoun had examined only one specimen, he had taken seven. Moreover, he had offered to divide each piece of skin into two parts, giving half to the Washington physicians and retaining the other half for himself and his associates at the New York Skin and Cancer Hospital, but Fowler and Kinyoun would have none of this.

Bulkley emphatically observed that every intelligent physician:

. . . will first study carefully and minutely the features of any case and then seek the aid of whatever scientific instruments of precision he can employ. In this instance there was apparently no attempt to study the case clinically very carefully, and there was no effort made to seek the aid of an expert in skin diseases, or the mistake of even imagining that Early had leprosy would have been avoided in the very beginning (40).

After two weeks of being closely observed at the New York Skin and Cancer Hospital and being presented for examination at the September 1909 meeting of the New York Dermatological Society, Early gained his freedom (40). Lottie and the two children now joined John and they settled in the suburbs of Brooklyn under an assumed name. But his identity was soon learned, and then began the "hounding" which has been the lot of the suspected leprosy victim down through the ages. Doctors or no doctors, neighbors with children were determined to take no chances. The Early family was virtually driven out of Brooklyn and they fled to a Connecticut farm. Here again the pressure of local stigma forced them out. The Early's were driven from Connecticut in October, 1909, and settled subsequently upon a few acres in Virginia (7, 15).

In the meantime, the Second International Conference on Leprosy met in Bergen, Norway, in August 1909. The previous winter, John had cut out a portion of skin with a pen knife and Lottie had sent the specimen to the illustrious Dr. Armauer Hansen (1841-1912), the discoverer of the leprosy bacillus and president of the conference, hoping that Hansen, regarded as the world's greatest authority on leprosy, would find John free of the disease and alleviate the pressure against them. At the conference, however, Hansen declared in a personal statement to a United States delegate, Henry Shively of New York, that after a long search he had found the bacillus of leprosy in the section of skin Mrs. Early had sent him. Simultaneously, the eminent Danish leprologist, Edvard L. Ehlers, editor of *Leprosy*, and author of numerous scholarly articles on leprosy, endorsed Hansen's

verdict on the basis of a single microscopic examination of a specimen of Early's skin that had previously been supplied him by Dr. Woodward in Washington, D.C.

The London *Times* remarked that "the controversy regarding this famous case may now be regarded as definitely settled (11)." Thus, when John went to Washington to receive the payment of his back pension on December 2, 1909, the Health Department secured a warrant for his arrest, charging him with being an exposed contagious disease carrier and he was hustled off to his former quarantine quarters on the muddy banks of the river (17). Rushing to his aid, John's lawyer and family friend, Judge Egbert C. Everest of Plattsburg, New York, began an active fight for his liberty. Finally the Washington health officers agreed that John would be sent to New York, again in a sealed baggage car which was to be afterwards disinfected and for which he was required to pay \$89.00 (26). Early was not allowed to send any letters in the mail and the check for his back pension which was all the money he possessed was fumigated before it was cashed so that he could pay for the rental of the baggage car (7).

He arrived in New York on December 11, 1909, and was again subjected to a minute examination by Dr. Bulkley and other leading skin specialists with the end result being that there was no evidence of leprosy, contrary to the esteemed Dr. Hansen's diagnosis. Bulkley publically labeled Early's experiences with the Washington, D.C., health officials as "one of the greatest outrages ever officially perpetrated upon an American citizen," and pointed out that Welch of Hopkins, Park of the New York City Health Department, and Captain Dutcher of the Army Medical Corps totally supported him in his contention that Early was not and never had been tainted with leprosy (26). At a meeting of the New York Society of Medical Jurisprudence on December 13, Bulkley told how:

Dr. Woodward, of the Washington Health Department, who caused Early's imprisonment and recent rearrest, was himself apparently assured that there was no danger in his case.

Said Dr. Bulkley:

... for when Early was arrested while seeking his pension at Washington a few days ago, Dr. Woodward himself took him in his automobile, covering him with his lap robe, and shook hands with him. He likewise permitted Early to raise chickens and eggs for the public markets. Yet they would not let him write to his people; and all checks and vouchers that came and went were fumigated. I feel that they realized their mistake early, but were afraid to acknowledge it, thinking that it would blow over. Thanks to the activity of the press in the case it did not. I have a letter from Dr. Woodward, in answer to one from me demanding why Early was not sent to me as finally promised, in which Dr. Woodward writes that in view of a possible suit for damage later, they were unwilling to let Early out of their jurisdiction.

When reporters asked Early whether he would attempt to recover damages, he sighed, "I don't know. I am very tired of it all. If only they would let me go home (36)."

Again exonerated by New York dermatologists, Early was then allowed to leave New York and in the spring of 1910, was reported to be living somewhere in the West under an assumed name. His attorney wrote Surgeon General Walter Wyman of the U.S. Public Health Service on January 31, 1911, asking that John be allowed to go to Washington "on private business of importance." The lawyer testified that both Early and his wife were "continually in fear and trembling that his identity may be discovered and he will be quarantined as a leprosy suspect and stamped unclean (21)."

Wyman wrote back that inasmuch as a diagnosis of leprosy had been made by the health authorities of Washington, D.C., and by Dr. Hansen, the discoverer of the lepra bacillus, the U.S. Public Health Service "cannot do otherwise than treat him as a leper (43)." Early's lawyer now concluded that "it is now perfectly apparent to me that they propose to adhere to their diagnosis in regard to Mr. Early—be it right or wrong." Indeed he could see now that John was doomed for life with the brand of leprosy and was as a result to be "an outcast of society . . . an object to be feared and hunted out for the purpose of being quarantined." Lawyer Everest confided that John "cannot stand the intolerable situation longer; but what can he a poor man

without money or many friends do (21)?"

Several months later the Early family is known to have settled on a small farm on the outskirts of Tacoma, Washington, under another name, hopeful of beginning a new life. A third child had been born to Lottie and it was imperative that John earn an adequate living. His pension had been cut off back on August 26, 1909, and he decided to file a claim for restoration by mail (42).

The U.S. Bureau of Pensions now raised some questions regarding the exact nature of his disability and ordered him examined by a board of surgeons in Tacoma along with the city bacteriologist and a missionary physician who had seen leprosy cases in China. This body of medical men pronounced him again "a leper" on September 6, 1911. When word on this diagnosis leaked out to Early's neighbors, they indignantly demanded his removal. It was first proposed to enclose one acre of his farm with two rows of barbed wire fences six feet apart, thereby shutting him off from contact with any other person, but even this plan did not satisfy the local citizens (5, 13, 29).

Lottie again wrote to President Taft, "appealing to you for help as you have much authority." She told him that their little home was heavily mortgaged and asked his aid in getting John's pension from the time it was cut off two years previous. She claimed that this "would enable us to clear our mortgages and so save the little home for our children's sake and would be a very small sum to the government compared with what it will mean to us and our little ones (16)."

It was finally decided with the approval of President Taft to give Early a pension at \$30.00 per month and employ him at \$50.00 per month to attend to the needs of a sailor who had an advanced case of leprosy and was isolated at the quarantine station near Port Townsend, Washington (4, 14). Surgeon General Rupert Blue noted that "of course his family could not be taken to the quarantine station (3)." Thus, John and Lottie parted on March 23, 1912. Their relationship had broken under the strain by this time as a friend, George N. Tausan,

local commander of the Spanish-War Veterans, several weeks later testified that Lottie "lived in constant fear that Early will sometime leave the station and come home to her" and that "he is little better than a beast in his treatment of her sexually and otherwise, and that his religious pretensions are simply a mask to hide his animal nature." Whatever the case might have been, Lottie applied for and secured a divorce a short time later (14, 37).

About one year later the Public Health Service admitted to a correspondent for the *New York Times* that John Early had "gone insane as the result of his experiences (18)." What is more, on May 17, 1914, he escaped from the quarantine station and was traced to Victoria, British Columbia, where officers lost track of him. Then two weeks later the front pages of newspapers across the country announced that John Early had been discovered as a guest in the exceedingly fashionable Hotel Willard in Washington, D.C., and the other occupants were "thrown into a panic." He had been staying for the past several days at the same address as Vice President and Mrs. Thomas R. Marshall, numerous senators and representatives, as well as a number of ambassadors. Indeed, a leprosy patient had "tainted" the establishment "frequented by the highest circle of official diplomatic, congressional, and residential Washington life (31)."

Early had dramatically made his presence known by telephoning Dr. William C. Fowler, Chief Medical Inspector of the city health department and telling him that he, a diagnosed "leper," was registered at the Willard under the name of E. J. Watson. Dr. Fowler later recalled, "I did not know whether it was someone joking with me or not, but I went, however, to the hotel named, and on entering the room found John Early in consultation with several newspaper reporters." Early told these uneasy reporters:

The John Early that was is dead to the world. I have put the world behind me. From now on I am willing to be isolated, to have the warning bell of the unclean rung as I approach, to feel that men shrink from me with the world-old fear of the terrible disease that has been laid upon me, but I want my appeal to be heard.

John had a far better understanding of mass psychology than most medical men and combined within him was the promoter's urge for fantastic success as he pointed out to his audience that:

To demonstrate how easy it is for a leper to mingle in cities, I planned my present trip six months ago. I knew that it is only when a great truth is sent home to the hearts of the people that attention is paid to it. I knew that if I mingled among the well-to-do and the rich and exposed them to contagion that they would arise out of self-protection and further my plan of a national home. That is why I chose the Pullman car, why I slept at the best hotels, ate in the best restaurants. No one cares what happens to the poor. If I had kept to the slums in my travels, the agitation would have been little. I had no desire to hurt anyone. I do not believe that the present stage of my disease is contagious. I had the money to travel as I did. I saved my wages and my pension for months to do so, and I hope the lesson has struck home (9).

The same afternoon the *Washington Times* showing a rare insight into the affair, editorialized that:

The case of John Early, leper, has been an amazing series of demonstrations that American civilization is yet afflicted with a good deal of the barbarism of the Middle Ages. Early had been handled . . . in a way that shows how liable the public is to fall into panic over that which it does not understand . . . Nobody wants him, and nobody, in the face of the strange, medieval terror inspired by his disease, seems concerned whether he shall be given civilized treatment; to get him as far away as possible and to insure that he will not return is the uttermost ambition of everybody and every community that he might possibly impose himself upon. It is a pitiful reflection of the inefficiency of provision for such cases (9).

Whatever the reactions of the press were, the spectacular appearance of Early at the Willard Hotel was a matter of grave concern to Congress and that afternoon his appearance was the subject of debate in the House of Representatives. Congressman John Raker of California was of the opinion that letting Early loose upon this country was "worse than turning loose a band of murderers." Representative Albert Johnson of Washington suggested that one of the Aleutian Islands could be used as a leprosy colony, where Early and the others like him "could be put to gardening and homesteading." He noted that the climate there was good even though it was perhaps a little damp in the winter. This recom-

mendation, however, elicited bitter protest from the delegate from Alaska. Representative Johnson then introduced a bill which would simply provide funds for the erection of a national leprosarium. Even a third similar bill along with a joint resolution was put forth regarding leprosy and John Early on the same day, followed by yet another on September 15, 1914. None of these bills, however, were reported out by the Committee on Interstate and Foreign Commerce during that session (12).

Upon receiving the news that Early had turned up in the nation's capital, Governor Ernest Lister of the State of Washington telegraphed the state delegation in Congress that:

Understanding that the District of Columbia Commissioners are urging the Secretary of the Treasury to return leper Early to Diamond Head, in this state, on the ground that that point is an official leper colony, I beg to protest as chief executive of this state against his return. Hope you will be able to convince the Secretary of the Treasury that such action would be unfair to this state and to the residents in the vicinity of Diamond Head (12).

Since the State of Washington adamantly refused to take Early back, it was finally decided to imprison him in the same house down by the river in Washington, D.C., where he had been isolated twice previously.

Dr. William C. Rucker, following close on the heels of the publicity, used his appearance before the annual convention of the American Medical Association on June 23, 1914, to denounce the inhuman treatment of "lepers" and also urged the founding of a federal leprosarium. The next day the *New York Times* approvingly commented in an editorial that:

If lepers must be segregated, they should not be treated as wild and dangerous animals. The case of John Early, who has been driven to post all over the United States, is in point. Communities refused to care for him. Bills to establish hospitals for his pitiable kind never reached a vote in the state legislatures. Dr. Rucker would have the United States appropriate enough money to establish a national hospital for the unfortunates, wherein they may have the treatment of human beings (33).

Despite the clamor of Early's visit, the wheels of congressional procedure contin-

ued to turn exceedingly slowly and it was not until December 15, 1914, that hearings were held by the House Committee on Interstate and Foreign Commerce regarding the necessity of a national leprosarium. At these hearings, much testimony was given in which Early's name was mentioned (20). Although a bill was reported out favorably to the floor and passed the House on February 24, 1915, the Senate failed to take action before the 63rd Congress terminated. The next session, however, saw a similar piece of legislation which was again introduced and again passed the House and was again referred to the Senate. Long-awaited Senate hearings were finally held on February 15, 1916 (28). As part of these hearings, Dr. Fowler narrated the current status of John Early and his testimony was illustrative of the social forces generated by the leprosy stigma:

Dr. Fowler. We have Early in this brick building at the present time; the windows are barred, and the door is barred.

The Chairman. Barred with steel?

Dr. Fowler. Yes, John Early, at the present time, is under arrest under the laws of the District of Columbia, for coming into said District while suffering from leprosy and without a permit so to do.

The Chairman. He is under arrest because he came here, being a leper?

Dr. Fowler. Yes; and knowing it. The grounds surrounding the home are enclosed with a barbed-wire fence.

The Chairman. About how high?

Dr. Fowler. About eight feet in height.

The Chairman. With a projection over at the top?

Dr. Fowler. Yes; sort of a T-shape top.

The Chairman. So it would be almost impossible for him to get out?

Dr. Fowler. It would be quite difficult, I should say . . .

Senator Works. You are treating him practically as a wild animal?

Dr. Fowler. Practically, I am afraid; we have to in order to keep him (8).

Early now wrote the following letter to Senator Joseph E. Ransdell, Chairman of the inquiring Committee on Public Health and National Quarantine, who had visited his prison several days earlier (8).

DEAR SENATOR: Sunday you asked the question is there enough lepers in the United States to justify a national leprosarium, to the which I will answer through the following facts: There are about 500 known cases in the United States that have developed mostly within the past 10 or 15 years . . . leprosy is spreading in the country to an extent that calls forth sharp local attention and certainly should call forth national. To segregate a leprosy person is wise and humane thing to do, but to let matters to drift on in the present road is another thing. As soon as a leper is found, under present conditions, he finds himself out of a home and absolutely unwelcome in the jurisdiction where he is found . . . Remember we are outcasts of society; yes, with human tastes and feelings.

Yours very truly,

JOHN EARLY

P.S.—Please pardon mistakes. I had to write in haste.

The committee was impressed by this and other testimony and as a result the long-awaited bill was reported on favorably and passed the Senate, January 25, 1917. President Woodrow Wilson signed the legislation, authorizing \$250,000 to provide for the care and treatment of persons afflicted with leprosy, into law on February 3, 1917. The bill, in effect, established a national policy of segregation and permanent care for all persons suffering from leprosy within the United States at federal expense, including their transportation from the place of origin to the national leprosarium. From what we know of the origins of federal concern over the leprosy problem, the impetus for its action came for the most part from outside. There was no concerted effort on the part of the Wilson administration to create a national leprosarium until Early's exploits had stirred up Congress and the public over the matter.

John Early was confined in the brick house in Washington until November, 1918, when a special arrangement was made, which calling for a payment of \$5,000 in advance, allowed the District of Columbia to admit him to the leprosy home of the State of Louisiana at Carville. There he became a patient, number 306, and was listed as having a mixed type of leprosy but being in an "improved" state of health. Forty-seven year old John Early was thus on hand more than two years later for the ceremony that occurred on February 1, 1921, when the national leprosarium was

belatedly founded at the old Louisiana Leper Home after a long and futile search for a better location (28). He reportedly made inflammatory speeches on that occasion. Early did not stay long thereafter, however, finding the security system at Carville to be of no restraint to his freedom to come and go at his pleasure (41).

Indeed a little more than two years later he was in Washington, D.C., on his fourth escape, and drew attention to himself by calling the local health authorities after touring half the country (32). Dr. Fowler told the press that although fifteen years had passed since Early had first come to Washington, "the man looks better today than when I saw him last." Sent back to Carville, he arrived in time to be the first subject of Dr. L. L. Cazenavette of Tulane University, the visiting neurologist and psychiatrist at the national leprosarium, who observed him and several other patients from 1923 to 1926 in an attempt to correlate leprosy with mental abnormalities (10). Cazenavette noted that shortly after readmission:

. . . he became greatly agitated and excited because he had been apprehended and returned to the leprosarium against his wish. This he considered a personal offense. During the time of my first examination, four months after his readmission, he was at first courteous and affable, though evincing some surprise at my unexpected call, the purpose of which he would not understand, even though explained to him. He gave the examiner little chance to say anything. He was very loquacious, and kept himself much in the center of the stage. At time he was rather hostile and suspicious, and displayed much arrogance in his manner of expression. He was restless and agitated. His emotional reactions disclosed marked fluctuations. He manifested no reserve in expressing his indignation at what he termed the absolute unfairness of the officers in charge, meaning the physicians and health officers in general and the attendants, in allowing the present state of affairs to go on. He believed that they should be censured and proposed to enter a protest to the effect that these officials be made to suffer for not doing their duty toward enlightening the public and showing them the truth.

Subsequent examination led the psychiatrist to the conclusion that Early's:

. . . querulousness, and the delusions of persecution in which he imagined himself and others at the leprosarium unjustly treated, brought forth a reactive mental disturbance of a paranoid type not unlike the psychotic reactions of prisoners.



FIG. 3. Early was instrumental in arousing governmental action which turned this decrepit "Louisiana Leper Home" into a modern national leprosarium. (National Library of Medicine, Bethesda, Maryland)

His later medical record at Carville reveals that he "continually complained and referred to this facility as a jail and to its administration as tyrannical." Moreover, he wrote to Presidents Calvin Coolidge and Franklin D. Roosevelt protesting the treatment accorded inmates at the leprosarium⁽³⁷⁾. The onset of Early's querulousness, however, correlates with his conduct when he was taken from his family at Tacoma, Washington, and quarantined at Port Townsend, Washington; as the medical officer there had noted back in May of 1912 that:

Mr. Early has shown a disposition to be surly and very suspicious of us all and to want to run things generally at the Station since his arrival there, frequently threatening what he will do through the combined influence of the Elks, the Spanish-American War Veterans, and the newspapers, if we at the Station and even the Bureau and the Department did not allow him to have his way and

grant his demands. . . . I have also about become satisfied that he is very much of a hypocrite and a grafter and particularly anxious for newspaper notoriety⁽¹⁴⁾.

Thus, one wonders to what degree his behavior was the result of his social treatment.

Be that as it may, Early soon escaped again, attempting to go into seclusion at his brother's farm in North Carolina but finding, in his own words, that:

This the Public Health Service refused, sending marshal, sheriff, doctor, and a ham-headed deputy up and in our blessed mountain retreat and secluded isolation, the last Sunday morning of August, 1927, they hunted me down like I was a desperado, manhandled and lugged me out of my hiding place in the shrubbery . . . brought me to Spartanburg, South Carolina, where the health doctor and the ham-handed deputy entrained with me back to the swamp-polluted, mosquito-infested and the then flood-threatened leprosarium where I

landed in a concrete jail cell about midnight, August 28, 1927, and in which jail cell I am still locked at this writing, March 6, 1928 . . . (38).

Amazingly, he was returned to Carville only to be discharged as "cured" less than six months later. In an announcement on the occasion, Public Health Service officials hailed Early's case as "another triumph in modern medicine that was brought about by the injection of chaulmoogra oil." Furthermore, they credited the mountaineer's "eccentricities" with having contributed much to the passage of the law creating the leprosy hospital and to "awakening public interest in the leprosy problem in this country (19)." He left for North Carolina saying he was going to his farm near Tyron but came back for some reason in 1930, supposedly a relapse, and again became a patient. Early was once again discharged as bacteriologically negative several months later but was readmitted in April, 1931.

His fellow inmate Stanley Stein later recalled:

I was proud of the title of crusader, but I could not claim to be the Carville Crusader as long as John Ruskin Early was alive and kicking. During my period of "retrogression" his kicks were not as strenuous as they once were, as he was bedridden and almost blind. Yet from his hospital bed he continued to dictate his vituperative letters to the President of the United States or the world at large. He was a religious fanatic, a bigot, an exhibitionist, and, I think, at times bordered on the psychotic. Yet I must admire him for his long and dedicated fight for the cause of Carville patients (38).

From the time of his ninth and last admission on April 20, 1934, until his death on February 28, 1938, at age 64, Early largely maintained his home at the leprosarium, continually agitating and preaching. Just before his death he announced in his privately published pamphlet, *John Early, World-Famous Leper: Twenty-eight Years at the Quarantine Bat*, that "leprosy is NOT a contagious disease; it is remotely infectious, and that by sexual or venereal route, like gonorrhea or syphilis (15)."

On the same pages as his lengthy obituary in the *New York Times* was the notice that Dr. H. E. Hasseltine, director of the United States Public Health Hospital at

Carville, and Dr. Victor G. Heiser, president of the International Leprosy Association, had embarked on the Italian liner *Conti di Savoia* to attend the Fourth International Leprosy Conference at Cairo, Egypt (22). By odd coincidence, thirty years before, Dr. Armauer Hansen had sealed John Early's fate as the "wandering leper" of modern times at the second conference.

The medical side of the Early case is still a puzzle. Why did Bulkley, Welch, Park, and Dutcher not see the same leprosy bacilli in Early's skin that Kinyoun, Ehlers, and Hansen saw, and why did Woodward and Fowler isolate him like a wild animal, but, at the same time, privately show no fear of him? Carville reports indicate that he died of cancer, that he had, at times, positive skin smears for bacilli and had neural involvement resulting from leprosy. Thus, hindsight indicates that he probably suffered from slight to moderately advanced neural leprosy for some thirty years. Whatever the diagnosis of the case, it remains frankly incredible. No other leprosy patient has ever been the subject of study for so much dermatological talent.

From a social and psychological point of view, the case of John Early illustrates how leprosy status in American society, quite recently, mandated a life-long form of rank complete with a unique type of stigma. Society failed to accept leprosy in reality terms. The disease was popularly regarded as highly infectious, grossly destructive, and absolutely incurable. One could escape these limitations in approved fashion only by death. Social disapproval of the patient who violated society's prescribed norms was stringent and effective. Individuals who were publicly identified as having leprosy were denied the social, economic, and legal rights of normal people. Socially they were treated as objects of fear, ridicule, and scorn; economically they were summarily dismissed from employment in disgrace; legally their personal rights and freedom were violated and they were hunted down by police and health authorities as common criminals (27).

The sociologist Erving Goffman, an authority on stigma theory, observes that

those who have dealings with the stigmatized person "fail to accord him the respect and regard which the uncontaminated aspects of his social identity have led them to anticipate extending, and have led him to anticipate receiving; he echoes this denial by finding that some of his attributes warrant it." The final blow occurs and the vicious circle is completed when the leprosy victim agrees with his detractors and considers the discriminatory treatment which is meted out to him as deserved and the prejudicial attitude which underlies it as justified. Thus the victim is not only discriminated against, but is made to understand that he deserves it, and eventually comes to regard his treatment as just⁽²⁴⁾.

It is clear that our society created the apparent menace of leprosy through a symbolic social process of labeling. Since other people saw John Early as so "different" as to be "frightening" it was most difficult for him to see himself otherwise. Furthermore the actions that society took in regard to his existence contributed to his image of being completely apart from his fellow man. Thus, John Early's incarceration appears to have accentuated in his own mind as well as that of his wife, that he deserved to be set apart. An almost inevitable corollary to his institutionalization was the increasing dependency he exhibited along with his self-view as sort of an Old Testament prophet whose mission was to proclaim the cause of "the unclean."

To be confined because of a diagnosis of leprosy, then freed after examination by specialists, only to be imprisoned again when other authorities reached contrary conclusions and all the while to see himself, his young wife, and children disgraced and find that men fled from him when they learned his identity—this was the thirty year fate of John Ruskin Early. Behind the multitude of news dispatches telling of his sensational escapes and wanderings is the tragedy of a man who felt the full force of a stigmatized status in our society, and as a result, lost his wife, his family, and peace of mind.

SUMMARY

This study of the case of John Early

presents the problems of a patient with leprosy in a relatively advanced society, the United States, having relatively few patients but never-the-less possessed of a strong opprobrium towards this disease. Though the incidents here recorded essentially took place during the first three decades of this century, and though the treatment of patients with leprosy is today far different from that prevailing during the time of John Early, one may even today find reactional remnants to leprosy in this society similar to those which John Early experienced.

RESUMEN

El estudio del caso de John Early presenta el problema de un paciente con lepra en una sociedad relativamente avanzada, los Estados Unidos, que tiene relativamente pocos pacientes, pero, sin embargo, posee un fuerte oprobio hacia esta enfermedad. Aunque los incidentes que se registran aquí tuvieron lugar esencialmente durante las tres primeras décadas de este siglo y aunque el tratamiento de los pacientes con lepra es hoy muy diferente del que prevalecía durante el tiempo de John Early, todavía uno puede encontrar en esta sociedad reacciones a la lepra similares a aquellas que experimentó John Early.

RÉSUMÉ

L'étude du cas de John Early permet de présenter les problèmes qui se posent à un malade atteint de lèpre, dans une société relativement avancée, celle des Etats-Unis, ayant relativement peu de malades, mais témoignant cependant d'un opprobre très prononcé envers cette maladie. Encore que les incidents rapportés dans cette étude aient eu lieu essentiellement au cours des trois premières décennies de ce siècle, et quoique traitement des malades de la lèpre soit aujourd'hui fort différent de celui auquel on avait recours au temps de John Early, on peut encore actuellement déceler dans cette société des réactions envers la lèpre tout à fait semblables à celles dont John Early a souffert.

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[**Editorial Note:** The following photograph of John Early, dated 1916, is a reproduction of an old print brought to our attention by Dr. Chapman Binford, Geographic Pathology Division, Armed Forces Institute of Pathology, Washington, D.C. Though not well-lighted for diagnostic purposes the lesions are apparent, especially on the neck, suggests that John Early may have had what would now be diagnosed as borderline or intermediate type leprosy. This

diagnosis would fit with some of the confusion in the diagnosis detailed in the paper by Kalisch. It might well explain why some physicians did not find bacilli and others, perhaps with greater patience and experience, or good fortune, did. It might also explain why he was at times regarded as cured despite the absence of effective specific therapy. This historical presentation does remind us that, despite ongoing misconceptions and unwarranted fears, the situation with respect to the treatment of leprosy has changed very strikingly since the time of John Early. The U.S. Public Health Service Hospital at Carville is today a dramatic witness to this fact.]

