Prelude to the Plague: Public Health and Politics at America’s Pacific Gateway, 1899

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ABSTRACT. San Francisco played a crucial role in the formulation of American immigration policy vis-à-vis Asia in the late nineteenth and early twentieth centuries. During this period, it was often difficult to differentiate political struggles over the exclusion of Asians from other conflicts. This article examines one such arena: an acrimonious, well-documented argument in 1899 between Federal and various State and local authorities over the arrival of a Japanese passenger liner that may—or may not—have been carrying bubonic plague. Six months later, the plague unquestionably arrived, resulting in the well-known San Francisco plague epidemic of 1900 in which more than 110 people died. Reviewing the 1899 prelude, the public attitudes of the various health authorities, and the way the press reported health issues, collectively give some sense of that historical space where the regulation of public health, politics, and the immigration industry intersected and were fiercely contested. Keywords: immigration, Asia, bubonic plague, public health policy, nativism, San Francisco epidemic, quarantine.

UBONIC plague descended on San Francisco in the year 1900. Representing the first confirmed cases of bubonic plague in the United States, this epidemic took more than 100 lives. The San Francisco plague outbreak was widely reported at the time in the local and national newspapers and public health journals; over the years, historians and legal scholars have written extensively about this event.1 The present article seeks not to add to that already voluminous literature, but to focus on a related event in the preceding year—one that was, in retrospect, a harbinger of the public health and political battles to come.

On 27 June 1899, the Japanese passenger liner *Nippon Maru* arrived in San Francisco following her third crossing of the Pacific. The previous year’s maiden voyage had been received in the United States with much fanfare as a signal of a coming golden age of trade across the Pacific. This particular journey, however, would bring her only notoriety and controversy. The *Nippon Maru*, the loveliest ship ever to steam through the Golden Gate, was to become a carrier of death and, perhaps, the plague itself.

This description of the *Nippon Maru* incident incorporates not only the movements of the ship and its passengers and crew, but also a number of related contextual factors: the state of knowledge about the etiology of the plague; evolving federal control of immigration and public health matters vis-à-vis state and local authorities; local political factions and disputes; the roles of the popular and medical press; and the divergent attitudes of whites toward either Japanese or Chinese communities. The historical space under consideration is where the immigration industry and the regulators of public health intersected with fierce partisan political contests, where important intermediaries in this struggle were the daily newspapers and medical journals that provided the public with information—or, more than occasionally, misinformation—that helped form public opinion. Previous authors have asserted that this process was driven by anti-Chinese nativism and/or the desire of health authorities at various levels to increase the powers of their particular office by exercising greater control over the public’s health. Although agreeing that these motivations existed, I argue that local political battles, factional in-fighting, and medical uncertainty predominated, both in the *Nippon Maru* incident and in the more serious events that followed.

Just as the *Nippon Maru*’s maiden voyage betokened Japan’s expanding contacts with the world, so, too, was the United States increasing its presence in Asia. Troops moved back and forth to the Philippines and Hawaii; and American businessmen and missionaries went prospecting for wider contacts with China and Japan. Goods of all sorts were increasingly moving in both directions. Asian passengers, too, were crossing the ocean in ships of all descriptions. Among the new

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dangers that might accompany such intercourse was the heightened possibility of diseases reaching the American mainland via Asia.

To ward off such invaders, Americans depended on preemptive inspection abroad, and inspection at the U.S. port. The National Quarantine Act of 1893 granted the President the power (among other things) to post officers of the Marine Hospital Service to U.S. consulates in foreign ports. Every vessel leaving for the United States was to have its cargo and passengers inspected, and the “consular bill of health” presented to the Collector of Customs on arrival in the United States. The second bulwark was the inspection and, when deemed appropriate, disinfection and quarantine at the port of arrival. The Quarantine Station on Angel Island, operated by the U.S. Marine Hospital Service (the direct ancestor of the U.S. Public Health Service), came to play that role for San Francisco after opening in 1891.3

Conventional (white American) wisdom of the day was that Asia and its living conditions were perhaps even more conducive to cholera, smallpox, plague, yellow fever, and other diseases than was Europe. At the heart of the “Disease Early Warning System” in the Pacific were Sanitary Inspectors attached to U.S. consulates in Yokohama, Manila, and Honolulu. They reported regularly on local health conditions, especially those that might affect ships and people traveling to the U.S. mainland. Inspectors would also report on how well the local health establishment handled the predeparture inspection and disinfection of ships bound for the United States. Health authorities on the American mainland would pay special attention to any vessel arriving from a port where, say, plague had broken out or where the isolation and disinfection processes were known to be inadequate.

Dr. Stuart Eldridge, the American Sanitary Inspector in Yokohama, crisply stated the case in his report of October 1899:

The position of Yokohama renders it, in some sense, the sanitary gateway of the Far East. Through this port passes all the travel from China, that center of infection, where epidemics rage with little or no effort made for their control, where plague and cholera seem to have become endemic and small pox, ever present.... Through it or from it go, too, all the Japanese passengers for United States ports in numbers already large and steadily increasing.... Precautions of the most stringent character on the

part of the United States seem fully warranted. It was, undoubtedly, a knowledge of these facts that induced you in 1894 to appoint a representative of the Bureau at this point.4

Charged with minimizing the possibility of disease aboard any ship bound for the United States, the Sanitary Inspectors had little in the way of resources. Without disinfecting facilities or boarding vessels of their own, they had to cajole and bully local authorities into acting according to American standards when it came to inspecting and disinfecting ships bound for the United States. Passengers from the Japanese interior were inoculated and quarantined if coming from a known area of infection, then inspected, and their passport or ticket stamped before being allowed to board a ship headed directly for an American port. Ships originating in Yokohama were inspected by the resident American Sanitary Inspector and, if passed, given the consular bill of health needed for entry into the United States. Sanitary Inspector Eldridge noted that the same was true for ships originating in China or the Philippines. “Should any sickness of suspicious nature exist on board at arrival at Yokohama, (the Sanitary Inspector will) immediately visit the vessel, irrespective of the fact that she has successfully passed the Japanese inspector of quarantine [emphasis added], afterwards acting according to the circumstances.”5

The American government was not alone in this obsession with trans-Pacific hygiene. Well before annexation, the government of independent Hawaii also maintained “sanitary inspectors and stationed them in Hongkong, Amoy, Nagasaki, Kobe, and Yokohama.”6 They feared infection from Chinese and Japanese laborers coming to work on the plantations, and upon arrival all Asian laborers were subjected to “from fourteen to twenty-one days’ detention at the quarantine station on Mauliola Island, where their clothing and baggage is disinfected.”7

High on the list of dreaded invaders was bubonic plague—a product of the bacillus now generally called Yersenia pestis. This old enemy had resurfaced in China in the nineteenth century. In 1894, bubonic plague appeared in Canton and Hong Kong, spreading to India (1896),

5. Ibid., p. 560.
7. Ibid.
Egypt, and South Africa, and even to continental Europe. By 1907, the annual death toll in India alone would exceed one million people.8

In 1896, Surgeon General Wyman was so worried at reports of the bubonic plague outbreak in China that he sent his most brilliant young scientist, Dr. Milton J. Rosenau, to head the Quarantine Station on Angel Island. Two months later, the Surgeon General ordered quarantine stations on the Pacific Coast to disinfect the baggage of all Chinese entering the United States. Even “several hundred bags of mail from the Orient were opened, each letter punctured, spread out, and fumigated.”9

Up to 1899, the mainland United States had been spared, with no cases of bubonic plague having been documented with absolute certainty.10 But, in an age aware of the process of “globalization” (if not the word itself), the spread of bubonic plague in other parts of the world was ominous. For a city such as San Francisco, open as it was to international intercourse of all sorts, the threat was very, very real.

This particular outbreak in Asia came when conventional wisdom about the plague and other diseases, and how to fight them, was in a state of flux. New theories were being developed, leading to deep differences within the medical profession. Just when the Nippon Maru was arriving with its controversial—and perhaps deadly—cargo, San Francisco’s newspapers carried news of startling “discoveries” and miraculous new “cures.” Such scientific advances promised to be the “silver bullets” that would fight diseases that were mass killers: smallpox, cholera, yellow fever, anthrax, diphtheria, and bubonic plague.

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10. A possible case of plague in late 1898 so perplexed the Bacteriologist of the San Francisco Board of Health that he rendered a verdict of “not proven.” See Biennial Report of the Board of Health of the City and County of San Francisco for the Fiscal Years 1898–1899 and 1899–1900, pp. 145–47.
That some of the “advances” were given substantial credence, even within the medical community, indicates how precarious knowledge was of diseases such as bubonic plague and how to combat them.

On 7 July, The Examiner ran a story that “London Doctor Discovers the Germ of Cancer” and that a “Serum Which Will Cure the Disease Expected Soon.” Dr. Lambert Lack “discovered that the disease invariably began with an injury of a particular character to what is known as the basement membrane of the mucous membrane and its allied structures. . . . Having arrived at this important truth, he set to work to produce cancer in the lower animals, and succeeded. To produce a disease at will is the first step toward finding a cure for it. . . . Hence it is reasonable to expect that in a short time Dr. Lack will be in a position to give to the world a serum for the cure of cancer.”

The London Pathological Society endorsed Dr. Lack’s conclusions, as did a few physicians in San Francisco. The San Francisco Examiner quoted Dr. Winslow Anderson, editor and owner of the Pacific Medical Journal, who thought that “as we now have serum for small pox, for diphtheria, for pneumonia, for typhoid fever . . . it does not seem improbable to me that a serum or anti-toxine should be discovered [for] cancerous growths.” Some within the San Francisco medical community were more skeptical. Dr. R. Beverly Cole was “not prepared to believe that the cancer germ has been found. Honest physicians, stimulated by inducements to research, rush into print before the facts justify the act. . . . Even Pasteur’s discovery has not yet proven of utility. It is not practical. Not one cure of rabies is on record.”

Some, like Dr. W. P. Burke, eschewed mere skepticism. Dr. Burke told the Examiner that he did “not believe in the germ theory of disease of any kind, cancer included. . . . It is needless to say that I do not believe that any ‘serum’ of any kind will be found to destroy the ‘germs’ after they have entered the body. The cure is to raise up the standard of tissue to a degree of health to prevent the further inroad of the so-called germ.”

With so much dubious information being given the public about the causes and cures of diseases in general, it would be surprising if public debate about bubonic plague was not similarly racked by ignorance and disagreement.

This was a decade during which a new set of theories was being developed in Europe and Asia, based on the work of disciples of Louis Pasteur and Robert Koch. In 1894, Alexandre Yersin and Shibasuburo Kitasato independently identified the plague bacillus. Four years later, Paul Simond published work hypothesizing that the rat flea was the key mechanism for transmitting the plague to humans. Time, and the work of other scientists, bore out Simond’s explanation, but in the short run it was hotly disputed—in the popular press and in such California-based medical journals as the *Occidental Medical Times* and the *Pacific Medical Journal*. Only in 1908 did the Commission for the Investigation of Plague in India firmly and finally establish that bubonic plague is a flea-borne disease carried by the rat flea and transmitted by its bite.

Until then, the most that public health authorities had to go on was a vague belief that plague and rats were somehow connected. An editorial in the *Pacific Medical Journal* early in 1900 summed up the existing thinking:

Bubonic plague [has] always been closely identified with filth and pollution. The plague is a contagious disease [and] is probably not infectious, that is, it cannot be carried by the air and gain entrance into the human economy through breath. Rats and mice . . . may spread the disease to an alarming extent by contaminating food, etc. More dangerous that these, however, are probably mosquitos, flies, fleas, and pediculi, as they not only come in actual contact with the human body, but also puncture the skin, or make abrasions on their new host, inoculating the individual with the plague poison. Infected cargoes, clothing, food, etc, may of course inoculate whole communities in the manner indicated. Four years later, W. J. Simpson—perhaps the world’s most experienced public health officer when it came to plague—wrote that “The agency by which plague is transmitted from the rat to man is unfortunately still a matter of conjecture. . . . The theory of Simonds [that

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13. See also Simpson, *A Treatise on Plague*. William Simpson was the Health Officer of Calcutta in the 1890s and editor of the *Indian Lancet*. M. P. Surphen writes (not altogether favorably) on his role in developing the response to the plague outbreak in India in “Not What, but Where: Bubonic Plague and the Reception of Germ Theories in Hong Kong and Calcutta, 1894–1897,” *J. Hist. Med. Allied. Sci.*, 1997, 52,103–13. Writing in 1905, with his extensive experience with the plague, even Simpson was unable to identify with assurance the mechanism that linked rats, humans, and the plague.

transmission is through the bite of the rat flea] is a fascinating theory, but it still requires much more evidence in its support than exists at present.”

A general presumption among non-Asians was that the plague was very much an Asian—and, especially, a Chinese—affliction. According to the Examiner, “The plague, black death, or bubonic fever seems to develop in long-accumulated filth in the densely populated Chinese districts. The Mongolians [i.e., the Chinese] die of it by thousands.”

Such views were a blend of anti-Chinese racial hostility and medical theories that relied on a slavish devotion to the relatively recent discovery that pathogenic organisms—“germs”—were responsible for a great many diseases.

“Medical scapegoating” of resident Chinese had a long, inglorious history on the West Coast. Blame for just about any public health failure, from smallpox to cholera to syphilis, was laid to that “degraded race”—a process that on the East Coast saw such labels successively pinned on the Irish, then the Italians and, later, the East European Jews.

Writing thirty years before the great 1906 catastrophe, one of San Francisco’s physicians observed: “The Chinese were the focus of Caucasian animosities, and they were made responsible for mishaps in general. A destructive earthquake would probably be charged to their account.” The major bacteriological discoveries of the 1880s, identifying the organisms that caused typhoid fever, tuberculosis, cholera, diphtheria, and tetanus changed only the language of the scapegoating, not the target.

The discovery of the plague bacillus made it seem all the more likely that bubonic plague was a contagious disease, transmitted like cholera or yellow fever. If the plague “germs” got into dust or into the excretions or exhalations of people infected with the disease, a

16. San Francisco Examiner, 28 June 1899, p. 3. Similar views were expressed in San Francisco’s other dailies, none of which were noticeably sympathetic to the Chinese.
popular perception was that a healthy person could get the plague “by inhaling the dust from infected houses, or by drinking infected liquids or eating infected foods.”¹⁹

Such was the setting for the Nippon Maru’s fateful third trip to San Francisco. According to Sanitary Inspector Eldridge, “this voyage of the Nippon Maru appears to have been a particularly unfortunate one.” The Nippon Maru had set out from Hong Kong on 20 May, scheduled to call in Nagasaki, Yokohama, and Honolulu, but by the time the ship arrived in San Francisco, she was more than two weeks late.

Trouble surfaced on 26 May, when a teenage Chinese passenger (a “coolie,” according to the Examiner) died less than an hour after the ship’s surgeon had seen him in apparent good health. According to friends, the victim had a history of heart problems, and according to the ship’s surgeon, all the glands appeared normal. But the Japanese medical officers in Nagasaki performed their own examination of the glands under a microscope. Their conclusion: bubonic plague.

Perhaps the Japanese were a bit hasty. Perhaps they should have been alert to the difficulties of identifying the plague bacillus; visual identification, even under a microscope, was not foolproof. The best method of making sure that something that looked like a plague bacillus really was a plague bacillus was to inject it into several laboratory animals. If the animals developed plague symptoms and died, that would have been conclusive proof. But such inoculations took about a week to play out, and few travelers or ship owners were willing to wait that long.

The Nippon Maru’s passengers went into the Nagasaki quarantine station, there to have their bodies bathed; their clothing, bedding, and baggage disinfected by steam; and the ship itself given a thorough washing with strong carbolic acid. “The Japanese sent us up for fumigation,” reported passenger J. A. Welch, a veterinary surgeon. “The women put on old kimonos and the men attired themselves in their oldest clothes. After fumigation, we threw the old things away.”²⁰ A week later, the ship was allowed to continue on to Hawaii. Although news of the quarantining had been sent ahead to San Francisco, where it was received and publicized on 18 June, Sanitary Inspector Eldridge

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²⁰. San Francisco Examiner, 11 July 1899, p. 3.
thought the need for quarantine was a trifle overblown and unnecessary.

His views were contradicted by what happened next. Three days short of Honolulu, death again visited the *Nippon Maru* when one of the Chinese steerage passengers died in twenty-two hours, accompanied by “convulsions, suppression of urine, and symptoms of pulmonic congestion.” Dr. Deas, the ship’s surgeon, decided not to have the body buried at sea, but kept it for examination in port. The microscopic examination by Dr. Alvarez, the bacteriologist of the Hawaiian government, showed “considerable numbers of a short bacillus, rounded at both ends, and like the bacillus of bubonic plague.” That was enough for Dr. D. A. Carmichael, Sanitary Inspector and Surgeon at Honolulu’s Marine Hospital Service.\(^{21}\) He dashed off a letter to his colleague at the Quarantine Station on Angel Island and to the Surgeon General, alerting them to the strong possibility of plague aboard the *Nippon Maru*. Absent any telegraphic connection to the mainland, his warning had to be carried by the *Rio de Janeiro*, leaving for the coast that very afternoon.\(^{22}\)

In Honolulu, the local agent of the Japanese Toyo Kisen Kaisha (TKK) line, which owned the *Nippon Maru*, pleaded with the Honolulu Board of Health to let the ship’s passengers and freight land. Sanitary Inspector Carmichael recommended that the vessel be held and disinfected. Repeatedly, the Honolulu Board rejected both proposals. None of the passengers bound for the mainland were permitted to debark; nor was any of the freight destined for Honolulu allowed in. TKK managed to charter the recently refitted *City of Columbia* at $350 per day as a quarantine ship. The seven Honolulu-bound cabin class passengers were transferred to the *City of Columbia*, while the 244 Asians in steerage were taken to the Mauliola Island quarantine station; all would be held the seven days required by Hawaiian law. Only at 1:30 pm on 22 June, after four days of strict quarantine and after transferring those Honolulu cabin passengers to their shipboard quarantine, did the *Nippon Maru*, still with all of her 2,500 tons of freight, continue her sad journey to San Francisco.

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21. Duncan Carmichael, originally from Canada, had a long and distinguished career with the Marine Hospital Service/U.S. Public Health Service, 1881–1915. He was Superintendent of the Marine Hospital Service in the Hawaiian Islands from 1898 to 1901, when he was transferred to San Francisco as that port’s quarantine officer. Source: Mamiya Medical Heritage Center, http://hml.org/mmhc/mdindex/carmicha/html, 7 February 2002.

Still aboard in the “Asiatic steerage” was a 29-year-old Japanese woman, originally bound for Honolulu. She had been ill—suspiciously so—and the Honolulu port physician had refused to let her land, on “account of the precarious condition the removal would only hasten the fatal termination.”23 During the onward voyage to San Francisco, her condition worsened, “and the signs of the plague became more manifest day by day. She died on 25 June, and her body was at once thrown over the side.”24

It was later reported that conditions on board the Nippon Maru were deteriorating, to the point “that almost all the cabin passengers were in a state of panic.” Apparently, the captain was able to enlist three physicians among the cabin passengers to aid the ship’s surgeon in disinfecting the steerage compartments, a recommendation of the Honolulu port physician. It is unclear whether the steerage passengers themselves assisted in this, or whether anyone questioned why the first- and second-class cabins were not also disinfected.25

While the Nippon Maru was en route to San Francisco, inspections by culture and by inoculation were performed in Honolulu on the body of the dead Chinese passenger. Confirming earlier suspicions, Dr. Alvarez denounced the culprit as being the bacillus of bubonic plague. On 26 June, the Examiner printed the news, based on “special correspondence” from Honolulu dated 18 June. Word that the plague might be coming had reached the mainland, where it joined a highly combustible mix of local politics, a fractured medical community, and a condescending suspicion of just about anything arriving from Asia.

San Francisco’s popular press was fiercely partisan, something to bear in mind when reading excerpts from the local newspapers. William Randolph Hearst’s Examiner supported Mayor Phelan and the Democrats (at least for the moment).26 The Chronicle and Call, however, were staunchly Republican, although frequently siding with reformers against Republican bosses. The local medical press was no less prone to taking a priori positions based on political affiliation.

Under Winslow Anderson, the *Pacific Medical Journal* would steadfastly support pronouncements on the public’s health made by Republican governors to whom he owed his position on the State Board of Health. Both the state medical society and its official organ, the *Occidental Medical Times*, were bitter rivals of Anderson’s enterprises and not directly beholden to any political party.\(^27\)

The daily newspapers threw down the gauntlet early: no sooner had the *Examiner* printed its warning of the *Nippon Maru*’s deadly cargo than its rivals belittled any possibility of the plague coming through the Golden Gate. “No Danger Here From the Plague; It Cannot Possibly Enter” said the *Call* on the 27 June, quoting Health Officer William Lawlor:

> The disease will not get a foothold here, it cannot. . . . To make the disease epidemic there must be the same conditions existing as obtain in Asiatic countries. The people here do not live together like pigs, and they know how to take care of themselves. In the countries where the plague flourishes the domestic animals occupy the house with the people. There is no idea of ever cleaning the floor, and when an appearance of cleanliness is desired all the people do is to put a new layer of matting on the floor. They have no idea of sanitary precautions and they foster the plague by the very way in which they live. If the quarantine regulations are properly enforced at this port there can be no danger of any case of the plague getting in here. With the quarantine at Honolulu in addition to the local precautions, the entrance of the plague is impossible.”\(^28\)

San Franciscans may have been psychologically unprepared to confront the possible arrival of plague. There was a presumption that the climate was favorable to good health in general and an obstacle to plague in particular. The new City Bacteriologist, Barbat, expressed a widespread sentiment that “This is a good, bracing, healthful climate, and plague germs would have here a comparatively hard time of it.”\(^29\)

Statistics quoted in the *Pacific Medical Journal* showed San Francisco to have a mortality rate comparable to large cities such as New York, Washington, Baltimore, and Boston, and predicted that street and...

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sewer improvements would soon lower San Francisco’s rate by a third.\textsuperscript{30} For the year preceding the \textit{Nippon Maru’s} arrival, the annual report by the City’s Board of Health made no mention of plague; tuberculosis, heart disease, and pneumonia were listed as the principal causes of death.\textsuperscript{31}

Health Officer Lawlor was but one of several claimants to the mantle of health protector of the city, and they fought fiercely to protect their domains. When the \textit{Nippon Maru} arrived on 27 June, representatives of the major aspirants to the throne were either new or inexpert in the politics of health. The prospect of plague coming to the city’s very doorstep soon thrust them into a maelstrom of public controversy.

On one hand was the new San Francisco Board of Health. By California law, “the Board of Health of the City and County of San Francisco consists of the Mayor of the city and county and four physicians in good standing, residing in the City and County of San Francisco, \textit{appointed by the Governor} [emphasis added].”\textsuperscript{32} State elections had just enabled Republicans to gain control of the city’s Board of Health when Henry Gage, a conservative Republican, was elected Governor. On 13 June, the new Board—Democratic mayor James Phelan, plus Gage’s Republican appointees—took office and set about replacing its officers and employees, all of whom served “at its pleasure” and all of whom had been allies of Mayor Phelan.\textsuperscript{33}

Phelan had first run in 1896 on a “reform” platform, part of a “good government” campaign to bring accountability to San Francisco politics and to curb the power of political bosses in the City. The cornerstone of Phelan’s strategic plan was a new Charter for the

\textsuperscript{30} Pacific Med. J., 1900, 43, p. 125. This notion of San Francisco as a “healthy” city was not particularly well-founded. Census data from 1900 show San Francisco having a crude mortality rate of 21 deaths per thousand inhabitants; this compares unfavorably with other large cities, such as Seattle (11.8), Chicago (14.6), Cleveland (16.1), New York (19.6), and Philadelphia (18.8). Only large southern cities, such as Atlanta (22.3) and New Orleans (23.1), had higher death rates. Significantly, Oakland, with a climate virtually identical to San Francisco’s, had a 20 percent lower mortality rate (15.9). See Bureau of the Census special report, \textit{Mortality Statistics, 1900 to 1904} (Government Printing Office, 1906), pp. lxv–lxvi.

\textsuperscript{31} Annual Report of the Board of Health of the City and County of San Francisco for the Fiscal Year Ending June 30, 1898. Chart No. 1.

\textsuperscript{32} Article III, Section 3005, of the California Political Code, quoted in the Sixteenth Biennial Report of the State Board of Health of California, for the Fiscal Years from 30 June 1898 to 30 June 1900, p. 89.

\textsuperscript{33} Ibid., p. 90.
city of San Francisco. Two key provisions would give the mayor power to appoint municipal officials in policy-making positions, while expanding the number of positions covered by the civil service provisions, thus placing such positions beyond the bosses’ reach. Fiercely opposed by the antireform elements in both parties, the Charter had been approved by voters in 1898 but would not go into effect until 1900.34 Thus, when the new State-appointed Board of Health took office, the party patronage and blatant nepotism driving the appointments stood in marked contrast to the new processes that had been approved by the city for its own government. Control of the Board of Health’s 240-odd positions was not a trivial matter for local politicians, nor was several thousand dollars in “inspection fees” that the Quarantine Office could be expected to generate.35 Dr. O’Brien was out as Health Officer (“the executive officer of the Health Department,” at the then princely salary of $3,000 per year), and Dr. W. M. Lawlor was in; Lawlor’s place as physician at San Quentin prison was taken by Dr. Casey, a nephew of Prison Director Hayes. The new Bacteriologist to the Board would be Dr. W. F. Barbat, brother to new Board member Dr. J. H. Barbat.36 The Examiner, undoubtedly hoping to embarrass the Republicans, prominently listed every position and person affected by the patronage turnover, from Assistant City Physician to Assistant Police Surgeon on down to Messenger and Janitor, attributing each and every appointment to the machinations of “Colonel” Dan Burns, the Republican political boss.

The Board also appointed its own Quarantine Officer, “who shall be a physician in good standing.” Governor Gage, via his new Board of Health, had seen to it that Dr. J. E. Cohn was appointed as the State Quarantine Officer in San Francisco, to replace Dr. William P. Chalmers effective 1 July. Sections 3013–3021 of the State’s Health Code specified how the San Francisco quarantine officer should go about preserving the Golden State from foreign infection; Chalmers reported having inspected 568 vessels in 1898, generating $3,700 in “fees” (another resource that made the office attractive.) Although

34. See Swanstrom, pp. 43 ff.
35. The most recent Annual Report of the Board of Health of the City and County of San Francisco, for the Fiscal Year Ending June 30, 1898 had listed 248 positions, everything from Health Officer to nurse intern to janitor. Presumably not all of these positions were political appointments.
36. Appointments noted in the Examiner on 14 June and 22 June 1899.
Chalmers’ relations with the local Board of Health had been amicable and more or less collegial, his dealings with the Federal health authorities were not. Over the coming weeks, both Chalmers and Cohn would frequently complain that the Federals ignored them to the point of disrespect and that their position carried so little power relative to the Federal quarantine doctors on Angel Island.

The State of California thought it should have some say in matters of public health. In its Report for that year, the State Board of Health bemoaned its lack of control over health threats to its foremost city:

It would appear that the State of California has no jurisdiction over her seaports so far as quarantine regulations are concerned. The United States Marine Hospital Service has assumed exclusive control, and neither the State nor any local health authorities are considered in dealing with vital questions which arise concerning the public health. In our judgment, this state of affairs should not be allowed to continue. . . . Should an infectious or contagious disease enter this State through its waterways, some one acting for the State could be held responsible, which cannot now be justly done. 37

The key Federal player on the scene was no ordinary bureaucrat or physician. Dr. Joseph J. Kinyoun was Director of the Quarantine Station on Angel Island, and his qualifications far outstripped those of the medical men on the Board of Health: medical studies at St. Louis Medical College, M.D. from Bellevue Hospital Medical College (1882), further studies at Johns Hopkins, and Ph.D. (1896) from Georgetown University. The Examiner touted him (correctly) as having studied with Yersin and with Roux at the Pasteur Institute, with Koch in Berlin, and with other plague experts across Europe. He had joined the Marine Hospital Service in 1886 and the following year established a one-room laboratory on Staten Island, N.Y., that performed pioneering work on cholera. The “Kinyoun-Francis” sterilizer was a disinfecting apparatus widely used among quarantine stations. His Hygienic Laboratory later evolved into the National Institutes of Health, and Kinyoun served as its director until early 1899.

On 30 April 1899, less than two months before the Nippon Maru arrived, he was ordered to take command of the San Francisco Quar-

For the Director of the Hygienic Laboratory, this was not necessarily a promotion. It seems that the methodical, but plodding, Kinyoun had fallen from the Surgeon General’s favor, to be replaced by the rising star, Rosenau. On the mechanisms that spread bubonic plague, Kinyoun was more knowledgeable than most members of the medical profession of his day—but his knowledge was limited. Unfortunately, his knowledge of the political side of public health was even more limited and lacked the deft, diplomatic touch that Rosenau had shown. Future events would also show that Kinyoun despised the Chinese as “crafty, deceitful, and hopelessly contemptuous of science.”

He arrived on 11 June, greeted by “fogs and cold wind [and] . . . a severe earthquake shock which occurred the night after we arrived in ‘Frisco.” His “impressions of San Francisco were not the pleasantest, because everything seemed so much at variance with that which we left in Washington,” impressions perhaps reinforced by being obliged to spend nearly a week in San Francisco before being allowed into his quarters on Angel Island. The Island’s remoteness produced in Kinyoun a social, as well as physical, estrangement from San Francisco that would color his entire tour of duty there.

Kinyoun inherited a rather ungainly situation. His predecessor (at one remove) at Angel Island, Rosenau, had had his share of troubles with Cohn’s predecessor as State Quarantine Officer, Dr. W. P. Chalmers. Rosenau’s reports of his travails with Chalmers are a veritable opéra bouffe. Chalmers formally complained that the proper discharge of his responsibilities had been prevented by Rosenau, who replied charging malfeasance, negligence, corruption, and obstruction, from matters as serious as allowing suspect ships to enter uninspected to quarrels over whether or not incoming mail would be fumigated. Rosenau had summed up the situation in 1897: “Our relations to the local board of health has been one of opposition on their part

41. See Annual Report of the Supervising Surgeon-General for 1896, pp. 937 ff. Rosenau had the last word on the mail.
to the establishment of the bay inspection service. . . . The local quarantine officer insists that the superior authority in all matters relative to the quarantine of this port was vested in his office.”

An 1878 Quarantine Act provided for Federal public health authorities to take over the quarantine process if and when state authorities failed to do so. This resolved none of the questions of overlapping jurisdictions. The National Quarantine Act of 15 February 1893 also came up short. The 1893 Act followed the New York epidemics of 1892 and was, in effect, a compromise between those who wanted to use “diseased immigrants” as a pretext for restricting all immigration and those who favored separating public health issues from the debate over restricting immigration. The Act did call for a set of national quarantine regulations and a uniform way of inspecting incoming people and goods for diseases, but these were to be administered by the Marine Hospital Service in cooperation with local and state boards of health. How such cooperation was to be achieved was never spelled out and was rarely achieved without much initial friction.

Nor were Californians of one mind on this issue. In the three years preceding the Nippon Maru's arrival, Washington received conflicting demands for action on quarantine procedures in San Francisco. In January 1897, the mayor and the Board of Health of San Francisco signed a joint letter supporting Chalmers’ complaints and protesting “against the Federal quarantine officer in boarding vessels [and] granting free pratique in absence of and without cooperation of State quarantine officer.” This, after having requested that “the pratique of the national quarantine officer shall be necessary . . . in addition to any requirements of the laws of the State of California.” What seems to have been at issue was not whether ships getting clearance (the granting of ‘pratique’) from the Federal quarantine officers was necessary, but whether or not it was sufficient. Commercial interests in California were of the opinion that sufficient it was, and the Chamber of Commerce, the State legislature, and Senator Perkins and Representatives Hilborn and Loud wrote letters to the Secretary of the Treasury demanding that the quarantine function be placed exclusively in the hands of the national quarantine authorities.” The Cham-

42. Annual Report of the Supervising Surgeon-General, Fiscal Year 1897, p. 503.
43. See Markel, Quarantine!, pp. 153–82, for an excellent treatment of the quarantine/immigration restriction nexus.
ber of Commerce went so far as to promise help in defending shipowners who refused to pay the State quarantine duties (there was no charge for Federal services) as a way of “contesting this vexatious and unjust annoyance.”

In mid-1899, it was still unclear which laws—state or Federal—would be obeyed and who would enforce them. Hawaii, for example, called for a quarantine of seven days, because scientists were beginning to believe that bubonic plague would show up within seven days in laboratory animals into which suspect bacilli had been deliberately inserted. However, the standard American (Federal) quarantine period for bubonic plague was the same as for cholera—fourteen days. Such seeds of potential discord were planted in almost every state, especially in California.

When the *Nippon Maru* finally entered San Francisco early on the morning of Tuesday, 27 June, she carried 61 cabin class passengers, plus 32 Japanese and 106 Chinese passengers in steerage. There was another, most unwelcome passenger, indicated by the bright yellow flag flying ominously from her mast, one recognized everywhere as “the dread symbol of violent disease.”

Chauncey St. John, the Deputy Surveyor of the Port, took no chances. His Customs men would normally have been among the first to board a ship, usually as soon as she reached Meiggs Wharf. With the yellow flag flying over the *Nippon Maru*, however, he thought it best not to risk putting his inspectors aboard. His superior, the Collector of Customs, accepted St. John’s proposal to have a launch keep a tight patrol of the suspect ship day and night.

Kinyoun did visit the ship—several times, in fact. He questioned Ship’s Surgeon Deas and Captain Allen to verify the recent medical events on board. Kinyoun quickly decided what would be the fate of the *Nippon Maru* and her cargo, directing the ship to Angel Island, where all passengers and crew were to be transferred to the Quarantine Station and held “in antiseptic imprisonment” (as the Chronicle put it) for the required fourteen days. The ship and her cargo would then be taken “to the fumigating hulk [the Omaha] off San Quentin, where

44. All quotes are from the *Annual Report of the Supervising Surgeon-General of the Marine Hospital Service of the United States for the Fiscal Year 1897*, pp. 541–59.
45. Figures quoted in the press differ slightly from those of the Immigration Service and those given by Kinyoun in the 18 August 1899 *Public Health Reports*. I have used the latter.
46. San Francisco *Examiner*, 26 June 1899, p. 5.
47. San Francisco *Call*, 28 June 1899, p. 23.
disinfectants will be forced into every nook and cranny.”

After the ship had been cleansed of possible contaminants, Kinyoun allowed that she could be taken by a temporary crew to her berth at the Pacific Mail's docks and unloaded.

In accordance with Kinyoun's orders, the *Nippon Maru* continued not to the docks of San Francisco, but to a spot about a mile and a half to the leeward side of the Quarantine Station on Angel Island, there to drop anchor. That evening, all of the cabin class passengers were transferred to the Quarantine Station. The following morning, the steerage passengers and most of the crew landed at the Station. Kinyoun then ordered a thorough search of the ship, one that turned up nine stowaways. All were Japanese who had boarded at Yokohama and “had been hidden and provided with food by the Japanese firemen of the steamer. They had found sleeping quarters in the coal bunkers, and until the ship was searched by Dr. Kinyoun’s order their presence was unknown to the Maru’s officers.”

No sooner had Kinyoun made his decisions known than a very fierce, very public controversy erupted. A coterie of cabin passengers, certain that there was no plague aboard their ship, sent telegrams to the Secretary of the Treasury and to the San Francisco Chamber of Commerce, denying the existence of plague and protesting that the stay in quarantine would delay their travels. Front-page exposure was given these protests by the *Bulletin*, especially as the signers included some rather socially prominent personalities. Added to the inconvenience and delay suffered by all passengers, the quarantine-disinfection process ruined a good many personal possessions:

The passengers, cabin and steerage alike, will be compelled to submit their belongings to the same heroic course of treatment as did the sailors and soldiers on the [troop] transports *Grant* and *Sheridan*. The appearance of the fumigated clothes of these unfortunates is still fresh in the memory of San Franciscans. Their garments were shrunken and shriveled, their shoes in most cases completely ruined and all the silks and other Japanese souvenirs brought home for friends in this country, spoiled beyond reparation. Among the Maru’s passengers are a number of British tourists to whom the destruction of their English made garments will be quite a serious matter.

49. “San Francisco *Chronicle*, 1 July 1899, p.3.
Before Kinyoun made his decisions public, the local authorities seemed to think that they would have some say in safeguarding their city. Dr. J. H. Barbat (the Board of Health member, not W. F. Barbat, his bacteriologist brother) was prominently quoted in the Chronicle, staking out the locals’ administrative turf:

We shall not permit the Nippon Maru to dock until we are thoroughly convinced that there is no danger of the plague being introduced into this city. This is a grave matter and we shall exercise every precaution. Dr. Cohn, (State) Quarantine Officer, has already been aboard the vessel and made an examination. There will be no conflict between this Board and the Federal authorities regarding this matter.51

However, Kinyoun’s decision to treat the ship’s passengers differently from the ship itself met with howls of protest from the San Francisco Board of Health. Never mind that just days before they had dismissed as impossible the prospect of plague coming to the city by the bay. If there were some—any—possibility of the plague gaining a foothold, then every conceivable precaution must be taken. Why was the physical vessel not subject to the same extended quarantine as its passengers? How could local health authorities be certain that the Federals had done a thorough job of fumigation and disinfection?

The debate changed on Wednesday afternoon, when two fishermen caught something rather unexpected off Fort Point (what would today be the south end of the Golden Gate Bridge): two lifeless Asian bodies, held upright in life preservers marked with the words Nippon Maru.

The bodies were those of Japanese stowaways. Fearful that if discovered they would be sent back to Japan, they conspired with the crew to be lowered over the side in the wee hours of Wednesday morning. Even though the lights of Tiburon seemed close, the Nippon Maru was still several miles from the Marin mainland. The stowaways never made it, drowning in the rough waters of Raccoon Strait.

The bodies were brought to the landing at the foot of Baker Street, and

... the Coroner was notified by telephone and the wagon from the Morgue was hurried to the scene... Coroner Hill decided that an inquest was not only unnecessary but incompatible with public safety... and the bodies

51. San Francisco Examiner, 28 June 1899, p. 3.
with their effects were cremated last evening. Prior to the cremation of the bodies Dr. Zabala [the autopsy surgeon] and Coroner Hill extracted the glands of the two men to have a bacteriological examination made for bubonic bacilli, and those of one man were found greatly enlarged—a symptom of plague. The glands were delivered to the bacteriological expert of the City Health Department, and on his report Dr. Lawlor will formulate his plan of action after the steamer, crew and passengers are released from the Federal quarantine.\textsuperscript{52}

Coroner Hill was certain that, although the Japanese had died by drowning, they had also been afflicted with plague. For his part, the city’s Health Officer was sorely vexed that the two Japanese had evaded the (Federal!) quarantine. Dr. Lawlor vented his ire to the Examiner:

I anticipated difficulty with the Federal quarantine officials from the beginning. The same trouble has been experienced in New Orleans, New York and other seaports, where all kinds of diseases were permitted to spread from infected ships through the laxity or inefficiency of the Federal quarantine authorities. . . . Goodness knows how many Japs have succeeded in getting ashore alive.\textsuperscript{53}

An escalating war of words between Kinyoun and the local health authorities was amplified by headlines in the Examiner. At the top of its front page on Friday, 30 June, the Examiner shrieked that “San Francisco Is Endangered By The Federal Quarantine Officer” (Fig. 1). W. F. Barbat, the bacteriologist of the Board of Health, revealed that the drowned men had swollen glands and that his microscopic examination showed the presence of bacilli that looked like those of bubonic plague. However, his office was not set up for inoculating laboratory animals, and the only facility that belonged to the PHS was on Angel Island. Barbat claimed that conducting such a definitive test or transporting his slides was simply too great a danger to the public’s health. Kinyoun openly scoffed at such provincial incompetence. “I think,” he said to the Chronicle, “that there are must be two kinds of bubonic plague: the real thing, and State Quarantine bubonic plague.”\textsuperscript{54}

\textsuperscript{52} San Francisco Examiner, 29 June 1899, p. 8.
\textsuperscript{53} Ibid.
\textsuperscript{54} San Francisco Chronicle, 1 July 1899, p. 3.
Fig. 1. Headline from the San Francisco Examiner, 30 June 1899. Text following caption: “Under a magnifying power of 1,200 diameters, the bacilli found in the glands taken from the dead bodies of the Japanese who escaped from the Nippon Maru closely resembled the bacilli of bubonic plague, but the final tests were not completed yesterday.”
In another action that roused the ire of the locals, Kinyoun refused to let the State Quarantine officer (Dr. Chalmers) come aboard the *Nippon Maru* for an inspection. Chalmers had been the object of Rosenau’s contempt, and now Rosenau’s successor was telling him that he, the State Quarantine Officer, could not board a plague ship unless he, too, went into quarantine. Such Federal arrogance! The Board will hear of this!

But what most incited local criticism was Kinyoun’s decision to release the *Nippon Maru*—just the ship, not the passengers—from its quarantine off Angel Island. As promised, Kinyoun had seen to it that the ship was thoroughly fumigated and disinfected. Although he continued to hold the passengers on Angel Island for the promised fourteen days, on 29 June he “granted the vessel pratique . . . as it had complied with all the regulations prescribed by the Secretary of the Treasury relative to the disinfection of vessels. . . . I have done my duty, and have nothing to do with what the San Francisco Board of Health may then consider necessary.”

At this, the Board of Health decided to assert its authority. At a public meeting, the Board voted to invoke Section 31114 of the Political Code of California, making it an offense punishable by a fine of $100 to $1,000 and arrest, should anyone land passengers from any vessel without the permission of the State Quarantine Officer. The Board also refused a request from Surgeon Gassaway at the Marine Hospital for Kinyoun to have access to the cultures from the glands of the dead Japanese. Only an opportunity to inspect the photographic slides was offered him.

Just after daybreak, a temporary crew took the *Nippon Maru* to her berth at the Pacific Mail’s docks (Fig. 2). No one from the *Nippon Maru* was allowed to go ashore. Captain Spillaine of the San Francisco police vowed that to enforce the order “if necessary, the police will be armed with rifles.” The police allowed neither freight nor persons to be unloaded. Only on food for the crew would the police relent: provisions were placed halfway up the gangplank, with one crewman allowed to come halfway down to fetch them.

Eight hours later, State Quarantine Officer Chalmers appeared. He sent a note to Captain Roberts, ordering him to move the *Nippon*

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55. Letter from Kinyoun to Health Officer Lawlor, quoted in the * Examiner*, 1 July 1899, p. 1.
“Maru “into the stream”—that is, to take her out into the Bay. Roberts declined, saying that he had no authority to move the ship. Very well, said Chalmers, if you cannot or will not move the ship, we will remove the gangplank and you will stay on the ship! “I go out of office at midnight, and my duty ceases then. Of course, the Japanese company is the loser for its obstinacy. . . . If it chooses to keep up its present form the Board can prevent the landing of any freight or of the crew until the company comes to terms.”\textsuperscript{57} June 30 was his last day in office; perhaps he meant to go out in triumph.

That same day a report from bacteriologist Barbat convinced the public—or, at least, the \textit{Examiner}—that the plague had arrived in the person of the two drowned Japanese, and that more of it could come ashore from the \textit{Nippon Maru}. By now the \textit{Examiner} was fully on the

\textsuperscript{57} Ibid., p. 9.
side of the local health authorities, and its front-page headlines on 1 July were unequivocal: “Dr. Barbat Positive That Bacilli Are Those of the Bubonic Plague.” Furthermore, thundered the Examiner, “the ship will be moved if every policeman in the city has to haul on the tow line.”

Over the next few days, the Examiner included in its coverage numerous suggestions that “the quarantine was not as strict under Federal methods as it might be.” People were in contact with those in quarantine who should not have been, and were later reported walking the streets of San Francisco or Belvedere (on the Marin side of the Golden Gate). It was alleged that even Kinyoun and his colleagues at the Quarantine Station were not personally complying with strict quarantine. Hearst’s Examiner had changed its attitude to one of hostility toward Kinyoun and the prerogatives of the Federal quarantine station—perhaps as just another opportunity to make money from making the news, but more likely because Kinyoun’s views coincided with those of the Examiner’s competitor. The Chronicle, meanwhile, more perceptively saw this brouhaha as a “Renewal of the Old Fight Over Who Shall Quarantine the City.”

Agent W. B. Curtis, acting for the Nippon Maru’s owners, was in a quandary as to which quarantine authorities his company should obey. “This has been a fight between two branches of government, and we have had to stand the brunt of it. This [TKK’s San Francisco route] is a new enterprise, and it seems as though, not satisfied with big port charges, everything else must conspire to crush it. . . . It is merely political claptrap, an effort to make political capital, and we are the sufferers.”

Although certain that with time he could win some sort of judicial reprieve, any further delay would have been risky—perhaps another week of losses of $400 per day plus dock charges, not to mention all the negative publicity focused on the fledgling passenger line.

On 1 July, the TKK agreed to having the ship towed to the south quarantine grounds near Mission Rock and fumigated a second time. Captain Anderson of the Pacific Mail arranged for the tug Sea King to tow the Nippon Maru stern first into the Bay. As the Nippon Maru was being towed from her berth, the chief steward for the Pacific

38. San Francisco Examiner, 2 July 1899, p. 1
Mail is reported to have said, “Now I hope ‘The Examiner’ is satisfied. ‘The Examiner’ had more to do with this than anyone else.”

The new quarantine officer, Dr. Cohn—on his first official day of duty—promptly took a launch out to the Nippon Maru, accompanied by Health Officer Lawlor and four health inspectors. Cohn and Lawlor oversaw the preparation of chemical solutions which destroy every form of infectious bacilli, and the sprays and gases were soon forced into every crevice where a germ might be lodged. The disinfectants used were formaldehyde, formaline, corrosive sublimate, black oxide of manganese, and sulphuric acid. The cabins were sealed up and the gas was injected through the keyholes until the rooms were filled. To disinfect the cargo covers of the hatches were raised sufficiently to permit the insertion of the nozzles through which the gas is pumped . . . Other men were engaged in washing every inch of exposed surface with a strong solution of corrosive sublimate. Forty chlorine lamps were lighted and the fumes soon permeated the whole ship.

Cohn and Lawlor were less successful in asserting their authority vis-à-vis the passengers. They went over to Angel Island, intending to inspect the passengers in detention there, but this was Kinyoun’s domain and he allowed neither Cohn nor Lawlor ashore. Kinyoun reported merely that everyone was in good health, that there had been no signs of plague, and that he would continue to share the passengers’ confinement for the full fourteen days.

The following day, 2 July, the Nippon Maru was released from her quarantine by the State. At noon, Dr. Cohn officially raised the quarantine and the anchor was hoisted.

On 11 July, Kinyoun lowered the yellow flag and raised the federal quarantine. Two hours and $200 in duties later, the cabin passengers were cleared by Customs, then cleared by Immigration and told that they would leave the following day. The steerage passengers were informed that their effects would take another two days to go through. The sternwheeler Caroline left the Jackson Street wharf at 6 o’clock the next morning, 12 July, to bring the cabin passengers back from Angel Island. All were in a festive mood. Even Kinyoun, who handed each person a Certificate of Health, was praised for his handling

60. Ibid.
61. San Francisco Chronicle, 3 July 1899, p. 10.
of the situation and absolved of responsibility for the cramped conditions.

A cloud briefly darkened the proceedings: State Quarantine Officer Cohn, aboard his tug the Governor Perkins, "shot out from the wharves with the yellow flag flying. Her whistle signaled the Caroline to stop, and Dr. Cohn was seen making preparations to go aboard. The passengers began to shiver." But Cohn did not propose subjecting the Nippon Maru’s passengers to double jeopardy. “He merely wanted to see the bill of health. He saw it and stamped his approval on it,” sending the Caroline on her way.

**AFTERWARD**

The travail of the Nippon Maru’s passengers was over, but the conditions creating such a tempest would fester for months to come, until a true crisis forced a resolution of sorts. The disagreements over jurisdiction and the suspicions of political motives continued to smolder, not always in the background. The embers were fanned by the press acting as surrogates for either the Federals and the locally out-of-power elite (Chronicle/Call) or the currently in-power San Francisco authorities (Examiner).

Health Officer Lawlor continued to flail the Federals for laxity in maintaining a cordon sanitaire around Angel Island. He claimed that, owing to a discrepancy between Immigration’s head count of the Nippon Maru passengers and that of the State quarantine officer, five or six people remained unaccounted for. On 21 July, he told the Examiner (in a story not reported in the rival Chronicle) that he was investigating whether more than two of the Japanese stowaways had escaped from the Nippon Maru. “If there has been a bunch of these Japanese stowaways turned loose in the city I want to know about it.” Lawlor continued his war against the Federals by other means. On 29 July, “official notice was given . . . by the Board of Health to a large number of owners and agents of property occupied by Chinese to take steps immediately to place their buildings in a proper sanitary condition, or suffer the penalty of arrest and prosecution.” Although surely an aftereffect of the plague scare, this particular order seemed to focus on inappropriate indoor plumbing—mandating cast iron

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62. San Francisco Examiner, 11 July 1899, p. 3.
63. Ibid.
sanitary pipes rather than ones of sheet iron and proper connections to the sewer system. The Examiner observed that, “for some reason that has not yet been fathomed, the Chinese have an aversion to metal sinks. . . . Oriental tenants have frequently torn out the [metal] kind approved by law and substituted wooden sinks at their own expense.” 64

It is curious that local attention centered exclusively on the Chinese community. After all, it was a Japanese ship that (possibly) brought the plague, and Japanese stowaways who were widely presumed to have been infected with the disease. Less than a year later, Chinatown and its inhabitants would be vilified as the center of infection and quarantined. Why did the Nippon Maru incident engender no such “medical scapegoating” of the Japanese?

In large part, this can be explained by the small number of Japanese living in California compared with Chinese, and their living overwhelmingly in rural areas, rather than concentrated in San Francisco. There were but 1,147 Japanese in California in 1890, and only 10,151 a decade later. In 1900, San Francisco’s Chinese population stood at about 14,000, and Japanese at only 1,800. Less threatening to white Americans in their numbers, the Japanese and their representatives in the United States also “were willing to do almost anything . . . to get differential treatment” for their overseas subjects. 65 This meant going to great lengths to separate themselves from the Chinese in the American public’s estimation. In 1900, Californians’ anti-Asian energy was focused on extending the Chinese Exclusion Act, and the Japanese successfully avoided having the Act applied to them. Only later would Phelan and others successfully exploit fear of Japan’s growing military successes (especially after the Russo-Japanese War) and the increasing number of Japanese arrivals in California to rouse popular support for excluding the Japanese.

One of the more important outcomes of the Nippon Maru incident was the credence it would give to future business claims that admitting the presence of plague would result in great losses to those who depended on the movement of people and goods. Exhibit A, of course,

64. San Francisco Chronicle, 30 July 1899, p. 25.
was the TKK, which certainly sustained a blow to its corporate bottom line. First, there was the condition of the ship itself:

At present the steamer is not a fit place in which to live, for the stench of the disinfectant is so intense that in some of the cabins it is stifling. What of the bedding and blankets was left aboard I soaked with the liquid and cannot be used before passing through the laundry. The upholstering is impregnated with the stuff, and on the return trip will furnish a constant reminder of the bubonic plague scare, which not only startled San Francisco, but caused a fight between the State and Federal authorities that has not ended yet.66

Then there was the matter of the Nippon Maru’s cargo. Seventy tons of cargo destined for Honolulu was still in the hold and would have to be delivered on the return journey. Chinese merchants in San Francisco had a big consignment of fireworks on board, and it was unlikely that they would be delivered in time for the Fourth of July. All the overland freight would be more than two weeks late. With the ship’s return sailing to Asia also delayed, much of what would have been her return cargo was diverted to other lines. Each of these items clanked into the TKK’s loss column.

The current passengers were being handsomely fed while on Angel Island—at TKK’s expense. Further, the Nippon Maru would have few passengers on her return journey. Many people who had intended taking passage had cancelled their trips or changed to another vessel. And no wonder—who would travel on the “plague ship”? Of further concern was the Nippon Maru’s crew. The ship was scheduled to leave on 8 July, and with some luck the repairs and reloading could be accomplished in time. But would there be a crew to sail her? If Cohn insisted on requarantining the passengers and crew, just as he had refumigated the ship, it would be a rather long while before the crew was back aboard. As it happened, Cohn did not insist and Kinyoun let the crew out on 9 July, after only twelve days in quarantine and two days before the passengers. Captain Allen was also given charge of the remaining stowaways for transport back to Japan.

More consequential was the disruption of the port of San Francisco. It became a chaotic place indeed, as the Nippon Maru had monopolized

66. San Francisco Chronicle, 3 July 1899, p. 10.
the Pacific Mail’s docking facilities, leaving other ships waiting in the stream until the affair was settled.

Most seriously inconvenienced, of course, were the passengers themselves. As they were held more or less incommunicado during their confinement, little of their predicament or conditions was reported in the press. What we do know is limited almost exclusively to the cabin class passengers. The quarantine facilities were themselves a faithful mirror of the social divisions found aboard ship. Men were housed separately from women, and of course the steerage passengers (nearly all of whom were Asians) were housed in barracks of their own, separate from the cabin class passengers. The cabin class men found the conditions “unfit for any human being.”67 No mention is found of how the Asian steerage passengers suffered their accommodations.

Other ships arrived shortly after the Nippon Maru, each coming from plague zones, each having had its share of suspicious deaths on board. The America Maru (the Nippon Maru’s sister ship) arrived on 16 July, along with the City of Peking, and it looked as though a replay of the Nippon Maru episode was in the offing. Cohn made plans to be the first aboard the America Maru when she entered the Bay, the better to assert his authority, but a dense fog concealed the ship until she reached Meiggs Wharf, where the Federal quarantine launch lay anchored. Cohn’s “little Governor Perkins steamed out of the Union Street wharf with all her might, only to find herself beaten to the ship. . . . He was ignored alike by the Federal doctors and the ship’s officers.”68

For his part, Kinyoun made no effort to pacify his local antagonists. “I have no official acquaintance with that gentleman [Cohn]. He certainly did not interfere with me [aboard the America Maru] in the least, and I might say that he was as meek as a lamb. It could not make the slightest difference to me whether he approved of the steps I took. I am not answerable to him. When I get through with the ship and her passengers he can do with them whatever he likes.”69 Kinyoun released the America Maru and her cabin class passengers after a mini-quarantine of four days, whereas the Japanese, Chinese,

67. San Francisco Examiner, 11 July 1899, p. 3.
69. Ibid.
and Korean steerage passengers were sent to Angel Island for disinfection and detention.

Such a relatively speedy release of the ship and its cargo did not allay the anxieties of the city’s commercial interests. “G.W. Bramhall of Yokohama, one of the largest exporters in Japan, who landed from the America Maru” told the Chronicle that uncertainty over the quarantine system was “playing havoc” and was costing the port of San Francisco an immense amount of traffic with the Orient. “The proof is that I myself, with many others, shipped all our exports previously billed for the America Maru on the Canadian Pacific’s steamer Athenian [via Vancouver]. Our action was provoked purely by self interest. I did not know what might happen to my exports when they reached San Francisco, and as it turned out, I did a very wise thing.” He then offered some advice to the City by the Bay: “If the people of San Francisco are interested in seeing the commerce of the port built up instead of stifled they should without delay . . . have the unfortunate conflict of authority between the rival quarantine officers settled in the courts once and for all.”

Where the Examiner had been instrumental in goading the local Board of Health into asserting its prerogatives against the Federal authorities, the Board of Harbor Commissioners cautioned the Board of Health against asserting them any further. Agent Curtis of the TKK hinted rather strongly at legal action against the State and the City to recover some of its losses. The attorney for the Harbor Commissioners, former governor Budd, advised them that owners of a ship could sue them if they enforced a local quarantine after the Federal quarantine authorities had granted pratique. He reminded them that the city was already protected from disease by “the State Board of Health, the city’s Board of Health, the Pilot Commissioners and a quarantine fund of $50,000.” He had a last, persuasive argument against the Commissioners refusing a request from the San Francisco Board of Health that no ship be allowed to dock without having a certificate of health from the local Board—whether or not it had one from the Federals: the Commissioners might be individually liable in any lawsuit.

The Chronicle foresaw a continuation of the political dispute be-

70. All quotes from the San Francisco Chronicle, 21 July 1899, p. 10.
71. San Francisco Chronicle, 12 July 1899, p. 10.
tween the local health authorities and the Federal government. On 27 July, it predicted that “Quarantine Wars By No Means At An End; A Question of Jurisdiction Which Washington Authorities Will Be Called Upon to Settle Shortly.” Reporting on a visit to Angel Island by the State Board of Health, the Chronicle inferred that “an official protest will soon be forwarded to Washington, asking the withdrawal of the Federal quarantine officer from this port on the score of lack of jurisdiction.”

In addition to disputes over turf, there was still the question of whether or not there actually had been a case of bubonic plague. Cohn, Lawlor, Barbat et al. were in no doubt: at least one of the two Japanese stowaways had the plague. But Kinyoun’s public reports downplayed the Nippon Maru controversy. He blithely stated that the two “Japanese stowaways, in attempting to evade the immigration laws and the customs patrol which had been established around the vessel, jumped overboard and drowned, but their bodies were recovered. These men were perfectly healthy.” Later reports by the Public Health Service, however, gave more credence to the possibility that plague might have come to San Francisco aboard the Nippon Maru. The Occidental Medical Times and the Pacific Medical Journal continued to espouse opposing views: the former quite willing to admit the possibility of plague, the latter holding the opposite. As no laboratory inoculations were ever performed, and as Kinyoun found Barbat’s slides unsatisfactory for examination under a microscope, the verdict must remain “not proven.”

Paralleling the division of opinion within the medical kingdom, the popular press offered its own contradictory post-facto interpretations. Hearst’s Examiner never wavered in its support of the San Francisco health authorities and their contention that the plague had, indeed, come to San Francisco’s doorstep. Both the Republican San Francisco Chronicle, and its sister paper, the Call, told the public that there had been no plague, not even a possibility of it. The Chronicle’s highly biased—but plausible—editorial of 11 July, the day the quarantine on the Nippon Maru’s passengers was officially raised, argued that the presence of plague had been concocted solely for the benefit of

73. Public Health Reports, 14 July 1899, XIV, No. 28, p. 1079.
the Southern Pacific Railroad (owner of the Pacific Mail Steamship Company, the principal competitor of the Nippon Maru’s owners) and political bosses hoping to enlarge their patronage powers by expanding the budget of the Board of Health. The editorial concluded:

(T)he story of the bubonic plague in this city has been widely published . . . and exaggerated. Many a tourist who might have come to San Francisco has been turned away by the false rumor started for the purpose of making business for the Pacific Mail and doing politics for [Republican political boss] Dan Burns. . . . Hereafter, the public will be wary. It will take something more than a report from the bacteriologist Barbat to start a scare.

The following year, plague irrefutably made its way across the Pacific. In January, responding to a plague outbreak, health authorities in Honolulu set out to burn several “infected” houses in Chinatown. The fire escaped their control and burned much of Chinatown. In March, deaths in San Francisco’s Chinatown were attributed to the plague. Chinatown and the Chinese would be the locus of death and of blame, and the focus of competing, contradictory interpretations and courses of remedial action. Again there would be arguments over how the plague was transmitted, and even whether or not those dying actually had the plague. Most of the key figures—the state and local political forces, the popular press, and California medical journals—would hold similar positions. Only Kinyoun took a different stand, performing his own laboratory inoculations and diagnosis that confirmed the presence of plague.

Disputes would again erupt between the State and local authorities (spurred on by the city’s commercial interests) and the Federal Quarantine Station on Angel Island, this time on a grander scale. Kinyoun’s fight with California officials and with the Chinese community would, that time, cost him his career. San Francisco’s fight against the plague—

75. Gunter Risse finds some credibility in the latter claim, noting that “the Board of Spervisors in 1899 cut the budget of the Health Department from $80,000 to $31,000.” See “The Politics of Fear: Bubonic Plague in San Francisco, California, 1900,” in Linda Bryder and Derek A. Dow, eds., New Countries and Old Medicine (Auckland, NZ: Auckland University Press, 1995). Undoubtedly, the budget cut had less to do with perceived diminution in public health needs and more to do with Democrats in San Francisco punishing the new majority on the Board of Health, which had been appointed by Republicans in Sacramento.

76. Editorial in the San Francisco Call, 11 July 1899, p. 6.
and, it would often seem, against its Chinese inhabitants—would cost the lives of 112 people.\textsuperscript{77}

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\textsuperscript{77} Excellent accounts of this are in McClain, \textit{In Search of Equality}, Chapter 10, “Medicine, Race, and the Law: The Bubonic Plague Outbreak of 1900” and Shah, \textit{Contagious Divides}, Chapter 5, “Plague and Managing the Commercial City.” Kinyoun was relieved of his duties at Angel Island on 6 April 1901 and transferred to Detroit. Subsequently, he was assigned as a Sanitary Inspector in Yokohama and Hong Kong, then sent to investigate smallpox in British Columbia. He resigned from the Service on 19 April 1902. After serving for a short time as research director for the H. K. Mulford Co. of Glenolden, Pa., he returned to Washington where he took up a private practice and directed the bacteriological laboratory for the District of Columbia. At the time of his death on 15 February 1919, he was serving as Director of the Army Medical Museum. Biographical material on Kinyoun is from the web site of the National Library of Medicine, http://www.nlm.nih.gov/hmd/manuscripts/ead/kinyoun.html.