

Why Are More Than a Dozen Girls in Upstate New York Twitching?

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Mass Hysteria in Upstate New York

Why more than a dozen teenage girls are exhibiting Tourette's-like symptoms.



Screengrab from the Today show about illness at LeRoy High School © MSNBC Today show

Last August, 16-year-old Lori Brownell passed out while head-banging at a concert. A month later, she lost consciousness again at her school's homecoming dance in upstate Corinth, N.Y. Brownell says her doctors put her on Celexa, but she only developed more symptoms, including involuntary twitching and clapping. In videos she posted to YouTube, Brownell flutters her fingers, touches her hair, snorts through her nose and throat, and shouts "Hey, hey, hey," seemingly without control. On Christmas Eve, doctors diagnosed her with Tourette's Syndrome. Now, however, her symptoms have another name: conversion disorder, or mass hysteria.

Since Brownell first passed out last summer, 14 other upstate New York students—13 girls and a boy, most of them students at LeRoy Junior-Senior High School—have come down with similar symptoms. The young people and their parents seem baffled. The state department of health and a separate report commissioned by the school have found no problematic substances in the building. Environmental activist Erin Brockovich is launching her own investigation into the outbreak; she told USA Today that her prime suspect is a train derailment that dumped cyanide and an industrial solvent in LeRoy in 1970. On Saturday, Brockovich's team was turned away by the school while trying to collect soil samples on the property.

However, a doctor treating many of the students is confident that they are suffering not from poisoning, but from mass hysteria, also called mass psychogenic illness and other variants. Typically, symptoms—which can include Brownell's Tourette's-like movements, along with nausea, dizziness, cramping, and more—start with one or two victims and spread when others see or hear about them. Victims are often accused of faking it, but more often they are suffering real physical symptoms that are psychological in origin. The phenomenon has been observed for centuries, with the blame shifting to whatever specific anxieties are culturally pervasive at the time. But one theme has remained consistent: The victims are overwhelmingly female.

The most famous American incident of mass hysteria remains the events surrounding the witch trials in Salem, Mass., which began when several girls began suffering mysterious fits and outbursts. In non-Western countries, demons and witchcraft are still sometimes blamed for outbreaks of fainting and fits [PDF]. Pollution, poisoning, chemical weapons, and other environmental concerns are dominant in the West (a fact that makes Brockovich something of a mass hysteria machine). Some bloggers are now claiming that the upstate New York girls fell ill because of the HPV vaccine or fracking.

As archetypes go, the Salem events hold up quite well, even from a distance of 320 years. Victims of mass hysteria are so often female that gender imbalance is one clue doctors use to differentiate hysteria from poisoning.

Symptoms often start with older girls or women and spread to younger or lower-status girls. As *girlhood guardian* Caitlin Flanagan put it in the *New York Times* this weekend, "It is the cheerleaders and not the linebackers who come down with tics and stuttering." But, as research has shown, it is also the cheerleaders and not the math-club girls who are likely to spread hysteria.

In a typical case in 1998, a teacher at a Tennessee high school noticed a gas-like odor in her classroom. The school was quickly evacuated, but the teacher's symptoms spread to more than 180 teachers and students, who exhibited symptoms including headaches, nausea, and vomiting. By the end of the ordeal, the school had to be closed for two weeks and almost \$100,000 was spent on emergency medical care. No toxins were ever found. A later study of the incident in the *New England Journal of Medicine*—one of surprisingly few on the phenomenon of mass hysteria—found that symptoms were "significantly associated with female sex, seeing another ill person, knowing that a classmate was ill, and reporting an unusual odor at the school."

There's no consensus about why women and girls are more vulnerable to episodes of mass hysteria. One professor speculated last year that "Stress, boredom, concern about their children and other factors among young females" could have triggered a recent fainting epidemic among female factory workers in Cambodia. Sociologist Robert Bartholomew noted in a 2001 book on mass hysteria that girls are trained to turn their anxieties inward, while anxious boys are likelier to act out. Women are also likelier to seek medical treatment than men.

Some scholars have also argued that hysterical episodes allow women to take a break from daily drudgeries, or to rage against patriarchal cultures within the safe bounds of demon possession or poisoning. If girls can find no outlet for reckless abandon, in other words, they'll create one. Barbara Ehrenreich, Elizabeth Hess, and Gloria Jacobs put it this way in a 1992 essay: "To abandon control—to scream, faint, dash about in mobs—was, in form if not in conscious intent, to protest the sexual repressiveness, the rigid double standard of female teen culture." They were writing about Beatlemania, as it turns out, but the description of the wildness that overcomes girls in adolescence is almost identical to much scholarly musing about mass hysteria.

There is also, it must be noted, a long history of medical professionals dismissing women's health concerns as mere hysteria. This makes treatment thorny. Sufferers naturally want to be taken seriously, and are often offended by suggestions that their symptoms are "all in their heads." Several of the upstate New York victims and their families told the *Today* show that they're not satisfied with the new diagnosis. "Obviously all of us are not accepting that this is just a stress thing, and our kids didn't all get sick by coincidence," one father said. A few cases diagnosed as mass hysteria at the time have later proved to be poisoning after all; a 1990 outbreak of nausea at a British school that affected girls at almost twice the rate of boys turned out to be largely explained by pesticides used on cucumbers served at lunch. But almost always, symptoms disappear on their own over time and no physical causes are discovered.

Until more is known about mass hysteria, the treatment of a 1789 case in Northern England might point the way to a cure both effective and enjoyable. The outbreak at a textile factory started when one woman teased another by putting a mouse in her dress; the skittish prank victim fell into convulsions. Soon, however, a rumor spread that an open bag of imported cotton had somehow caused the reaction, and others quickly began falling ill. The factory had to temporarily shut down when 24 people (21 women, two young girls, and one man) experienced violent convulsions so severe they had to be restrained. The plague ended when authorities convinced the patients that symptoms were "merely nervous." To further tamp down anxieties, sufferers were encouraged to "take a cheerful glass and join in a dance." The day after the dance, almost all the victims went back to work, their convulsions having disappeared for good.

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