

“What Am I?": Nineteenth-Century Medical Science, Intersexuality, and Freakification in the Life of Karl Hohmann

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The gender and sex binary have existed in Western culture for centuries. Western societies attempt to classify biological sex and gender as either male or female. However, this binary does not include any space for people who do not fit, such as a person who has external male genitalia but internal female genitalia. The modern medical term for this phenomenon is “intersex;” before the twentieth century, however, intersex was called “hermaphroditism.” Because the current medical term is “intersex,” we will use the term “intersex” instead of “hermaphrodite” where appropriate, unless directly quoting from a text.

During the nineteenth century, there was an intense medical examination of intersex individuals. Scientists were searching for a physical state they called a “true lateral hermaphrodite,” referring to a person who has intact male reproductive organs on one side of their body and female reproductive organs on the other (Munde 615, 629). For many, the fascination of this “true lateral hermaphrodite” was the idea that the intersex individual could maintain both sexes simultaneously, which supported the notions of the gender and sex binary.

Their search for the “true lateral hermaphrodite” eventually led doctors and scientists to Karl Hohmann, an intersex man whom doctors endlessly poked, prodded, and examined in an effort to determine whether

Abstract

This paper explores the life of Karl Hohmann, an intersex individual who lived in Germany in the mid-1800s. Hohmann was examined as a medical specimen throughout his adult life as doctors at the time believed he was a “true lateral hermaphrodite.” The authors examine the way that cultural beliefs about gender and sex intersected in the nineteenth century.

he had both a testicle and an ovary. Because his body was a site of so much medical attention, these scientists eventually turned Hohmann into a mere medical specimen and robbed him of his humanity.

This essay is divided into three sections. First, it presents the life of Karl Hohmann and his interactions with nineteenth-century doctors. Second, it situates that history within the context of ideas about gender and sex during the same time period. Finally, it provides five artifacts from the time period that address both Karl Hohmann and the cultural context. Together, this essay illuminates how Karl Hohmann's freakification reinforced the social creation of gender and sex as a binary system and supported the normalcy of heterosexual culture.

INTRODUCTION

“What am I? In my life an object of scientific experiment, and after my death an anatomical curiosity?”—Karl Hohmann

Before we discuss Karl Hohmann's life, we should clarify our references to his gender and the pronouns we use to refer to him. Many sources on Hohmann refer to him as “Kathrina/Karl Hohmann” and alternate between using masculine and feminine pronouns. In this paper, we will refer to Hohmann as Karl and use masculine pronouns. Although Hohmann was designated female at birth and lived most of his life identifying as a female, when he moved to the United States, he legally changed his name to Karl. Although we do not have much documentation on Hohmann's gender identity, we feel it is best to speak of him with the identity that he chose (to the best of our knowledge) throughout this essay.

Karl Hohmann was born in Mellrichstadt, Germany in 1824. When he was thirty-nine years old, he visited a doctor because he was experiencing pain from a hernia on his left side. His physician, Dr. Reder, wished to examine Hohmann more thoroughly because he believed that it was possible that Hohmann's hernia actually contained a testicle (Mak 65). At this time, Hohmann identified as woman, and the presence of a testicle would have placed him outside of the sexual binary. For some time, Hohmann resisted being subject to a thorough examination but eventually agreed. Hohmann was brought to a hospital where he was observed for two months. The doctors who examined him kept him almost completely isolated from other patients or visitors, and the examinations that Hohmann experienced

were very invasive. Measurements were taken of his genitalia, and his bodily fluids were collected and studied as well. In addition to inspecting his body, the physicians examining Hohmann asked him invasive questions about his personal life. Hohmann admitted to having sexual intercourse with a woman and consequently impregnating her. Hohmann's claim was met with incredulity by several doctors who then requested that Hohmann demonstrate how he was able to have intercourse with a woman while a group of physicians observed (Munde 624). This clearly shows the lack of privacy that those who were exhibited experienced. Not only would people on display lack personal privacy while being exhibited, but they were expected to allow others to observe their private moments.

After this initial examination, Hohmann was examined by doctors across Europe from the 1860s through the 1870s; when he moved to New York, he was inspected by two other physicians (Mak 66). Because there was so much shame and stigma surrounding intersex individuals, it was difficult for doctors to get people to agree to these medical examinations. Hohmann was one of the most famous "hermaphrodites on show" in the medical community (Mak 66).

As a "true lateral hermaphrodite," Hohmann was especially interesting to the doctors at the time because they believed he had male and female reproductive organs in his body—one type on each side—which would confirm a binary notion of gender. The biggest reason that the doctors believed this was possible was that Hohmann appeared to have at least one testicle, but also experience a menstrual-like discharge about once every month (Munde 624). Because of this, several of the doctors that examined him speculated that Hohmann had at least one ovary. This was significant because the doctors felt unable to determine if Hohmann was a "true lateral hermaphrodite" without physical evidence of an ovary, which would require an autopsy.

The doctors who examined him seemed preoccupied with determining how to categorize Hohmann and wanted to find a "true" answer to what his identity was. One physician even noted that his identity could only be discovered "post-mortem" because they would need to do an autopsy in order to determine whether or not he had an ovary (Mundé). An autopsy does not allow intersex individuals to define themselves; rather, it only provides physical evidence for a doctor to examine.

These examinations of Karl Hohmann brought up many questions that challenged the idea of a gender or sexual binary; as a result, medical categorization and the search for “true lateral hermaphrodite” provided an answer to these challenges. In Western culture, the idea of a gender binary is still common today. At the time Hohmann was living, this model of sex and gender was even more prevalent than it is today. Nevertheless, people had a hard time imagining how someone outside of this rigid binary could exist, and therefore intersex individuals often lived in shame.

CULTURAL ANALYSIS

Intersex individuals have long held a strange place in the freakshow culture of the Western World. Even amongst the types of bodies considered aberrant by mainstream society, the accounts of these individuals are underreported. There is not a wealth of information made widely available about them, and many texts of the nineteenth century that speak of intersexuality are medical texts which examine the bodies of various individuals as specimens to be examined, drawn, photographed, and autopsied. What, then, do these medical reports and papers reveal about the lives of intersex individuals, and what can these individuals’ lives reveal about gender, sex, and sexuality in the nineteenth century?

To answer these questions, we must first begin by seeking to define the differences between sex and gender. Sex is held to be the biological fact of one’s body determined by several indicators such as chromosomes, internal reproductive organs, and external genitalia (American Psychological Association 11). Gender, however, describes categories of cultural expectations that are constructed around the labels of sex. The traditional labels of Western culture in both cases have been the male and the female. It seems like a fairly simple dualism—sex is a scientific and medical fact while gender is a social construction—but these widely held definitions do not address the socially constructed nature of science and therefore of sex.

It would be a mistake to say that sex is a purely objective measure of the human body. This is not to say that the human body cannot be measured or physical phenomena observed, but instead that these observations are interpreted through the lens of cultural and historical context. For example, we can safely say that some human bodies possess ovaries while some others possess testicles, but the actual labels of female

and male are constructed categories that we assign to these different types of individuals. This is why the sex binary we often put faith in— that there are male bodies and female bodies—fails to account for intersex individuals.

These labels of male and female are important in Western society though. Prior to the nineteenth century and its focus on medicine as a science, sex and sexuality were regulated by the prominent religious doctrines of the time. They held that sexual intercourse should only be practiced in an effort to produce children and that any other types of intercourse were sinful (Fausto-Sterling 11). This produced a need for labels that would reflect the ability to reproduce; the two involved would need to be a man, someone who could sire a child, and a woman, someone who could carry a child. This also explains the importance of heterosexuality as it appeared later; heterosexual intercourse was seen as the only kind which would produce a child, so it became the default and “natural” sexual orientation.

Then, as medical science developed in the nineteenth century, it sought to provide scientific justifications for these long held ideas of male and female. But this distinction is not so easily made, and through much of the nineteenth century—and even into the present—there is no one characteristic or set of characteristics that is universally held as an indicator of someone’s “real” sex (Dreger 16). Many point to the external genitalia as a good indicator of sex, the method which is still used to categorize newborn infants by doctors, but this does not account for any number of hormonal disorders or other differences which might occur in the development of the human body (Fausto-Sterling 45). The several different factors which can be indicators of sex — the number and type of sex chromosomes of an individual, their hormonal profile — do not even have to agree with each other. As a result, the individual in question might never know that their body is intersex, as modern medical practices require the infant to be assigned to a sex category within twenty-four hours of birth.

Instead, scientists of the nineteenth century worked to understand the human body through the preexisting idea of a gender and sex binary. They confirmed in many cases that women possess a uterus, ovaries, and other physical characteristics, while men have testicles and a penis. But there is a range of difference between individuals in these categories, and there is a range of difference that exists outside them as well—a continuum of human

difference that does not fit into two separate boxes. Those who exist outside the limits of the gender/sex binary are intersex individuals; their bodies cannot be classified as male or female, either because they possess markers of both sexes or because they possess neither. But, when viewed through the idea of a gender/sex binary, the intersex individual becomes inherently abnormal.

The idea of the abnormal intersexual is very important at this time period. Because human bodies can vary so widely and because medical science cannot neatly divide between male and female, the debate then becomes one of normal versus abnormal. Alice Dreger notes in her work on nineteenth-century “hermaphrodites” that “we assume that the normal (in this case the ‘normal’ sexual anatomy) existed before we encountered the abnormal, but it is really only when we are faced with something that we think is ‘abnormal’ that we find ourselves struggling to articulate what ‘normal’ is” (6). The existence of individuals outside the gender/sex binary—outside the “normal”—forced medical practitioners and scientists of the mid-nineteenth century to question what really defined male and female bodies.

But they could not escape the idea of a gender/sex binary, even in their examination of intersex individuals; medical scientists began to look for a “real” lateral hermaphrodite, or an intersex individual who is male on one side of their body and female on the other, such as Josephine Joseph of the film *Freaks*. This was often labelled a “true” type of hermaphroditism as the individual possessed both male and female reproductive organs (Dreger 143). However, the medical finds of the time more often showed a mixed or “false” type of hermaphrodite—an individual who possessed only male or female reproductive organs, even if their outward appearance might be otherwise misleading. For example, notes on Guiseppe Marzo’s autopsy in 1865 indicate that his feet and hands were feminine while his head and body hair were distinctly masculine in appearance (Delle Piane 1211). Even here, the gender/sex binary is influencing medical practice and observation, though it falls short of actually describing the realities of human variation.

There must be significance, then, to the gender/sex binary if scientists continued to cling to it despite its inaccuracy. This ties back to the pre-Victorian religious views on sex — ones that encourage only heterosexual intercourse. The gender/sex binary is necessary to defining heterosexual

relations versus homosexual relations. Sex must exist in order to define these categories of sexuality, and therefore to define the acceptable types of sexual intercourse. The intersex individual is a threat to this system and to heterosexuality itself. In fact, many medical scientists of this time emphasized the need for a clear sex indicator in order to prevent accidental homosexuality and homosexual marriage (Dreger 76).

It became a noted practice that someone suspected of homosexuality should be examined to ensure that their biological sex was not misdiagnosed (Dreger 111). In the middle of the nineteenth century, when the word “homosexual” was first coined (Fausto-Sterling 13), the most reasonable explanation for this deviant behavior was that it was merely a type of heterosexual intercourse. Unfortunately, this works to not only reinforce the gender/sex binary but to also erase the experiences of homosexual individuals of the time. Looking at the accounts of many individual cases, there appears to be no actual correlation between biological sex and sexuality, or between the intersexual body and homosexual experience (Dreger 126). But, even so, the fear of homosexual intercourse—or any manner of non-heterosexual intercourse—led many people of the nineteenth and early-twentieth century to cling to the gender/sex binary.

Karl Hohmann’s own case falls squarely into the center of this scientific confusion and controversy. His story was especially noted because of the claim that he had impregnated a woman while living as a woman himself—a blurring of not only the biological sex binary but also of heterosexual and homosexual intercourse as well. In this tempestuous cultural climate, Hohmann became an item to study and display, subject to aggressive and invasive medical examination, because he defied easy classification by means of biological sex, gender, and sexuality. His life experiences and anatomy fell outside of the defined “normal,” and this condemned him to be an object of speculation before the burgeoning medical community that sought to force the world into matching their own beliefs.

Today, this need to categorize the sexes into pre-existing categories and to justify those categories with scientific research, has led to a false belief in the absolute “reality” of the male and female bodies as distinct entities. This belief appears in the current discussions on sex and sexuality that pertain to transgender individuals and their rights to use public

restrooms. Many opponents to transgender rights argue that allowing transgender men into women's restrooms would endanger the women who use them. However, this argument relies on the notion that gender is split between male and female and that biological sex determines a person's sex at birth and cannot be changed.

As the fight over transgender rights demonstrates, there is no more clear distinction between the sexes now than there was during Karl Hohmann's lifetime. Research into chromosomal sex and hormonal sex has only complicated the factors which medical professionals must observe, while common medical practice still relies upon the visual examination of genitalia to determine an infant's sex. This belief is misleading and has the potential to distort any situation where the labels of male and female are used, such as scientific studies, the division of male and female sports and public restrooms, or even the laws regarding marriage and identity. The distinction between sexes is a socially organized and constructed line that holds itself up as scientific fact, and the root of this un-truth lies amongst the medical field of the nineteenth century.

ARTIFACTS

Artifact 1

This excerpt comes from a scientific encyclopedia, published in 1901, called the *Anomalies and Curiosities of Medicine*; this encyclopedia discusses a large number of medical "abnormalities." In this excerpt, the authors, George M. Gould and Walter L. Pyle, discuss the ways in which the sexual attraction experienced

There is an account of a person in Germany who, for the first thirty years of life, was regarded as feminine, and being of loose morals became a mother. At a certain period she began to feel a change in her sexual inclinations; she married and became the father of a family. This is doubtless a distortion of the facts of the case of Catherine or Charles Hoffman, born in 1824, and who was considered a female until the age of forty. At puberty she had the instincts of a woman, and cohabited with a male lover for twenty years. Her breasts were well formed and she menstruated at nineteen. At the age of forty-six her sexual desires changed, and she attempted coitus as a man, with such evident satisfaction that she married a woman soon afterward. (207)

by Catherine/Charles Hoffman (or Karl Hohmann) changed over time. At first, he is described as being female and having “sexual inclinations” toward men early in life. When he is older, they describe his sexual desires as “changing,” which also correlates with a change in his gender and classification from a “mother” to a “father.” Because his gender and sexuality change simultaneously, his gender always aligns with his sexuality so as to make him heterosexual and not homosexual. In framing the description of Hohmann in this manner, Gould and Walter reinforce the aversion toward homosexuality and non-heterosexual intercourse at the time.

Artifact 2

The following excerpt is from a short article published by A. Flint in the *Boston Medical and Surgical Journal* in 1840. In Flint’s article, he describes a patient who is admitted to an almshouse who had the appearance of an intersex person, but whom he calls a “hermaphrodite.” In this excerpt, Flint describes the physical appearance of the supposed hermaphrodite. One significant aspect of the man’s appearance is that, at first sight, his physical characteristics are conflicting enough to hinder the doctors from deciding in which ward (male or female) to place the individual. Also, the blend of feminine and masculine physical traits (such as his feminine complexion and hairstyle coupled with masculine feet and a beard on his chin and

The following curious case of imposture came under my observation in the month of March, 1840.

An individual was received into the Erie County Almshouse, who was represented as being a hermaphrodite. I was requested to examine him, the superintendent being at a loss whether to place him in the male or female department of the institution. His external appearance was as follows. Hair, black and long, arranged after the feminine mode. Face, having a masculine coarseness, but with a fair, feminine complexion. Some beard on the chin and upper lip, which had evidently never been shaven. Ear-rings in the ears. Hands, delicate but large. Feet, large and masculine. He was dressed in pantaloons and a frock coat. His voice and manner of walking resembled those of a female. The former in tone was not peculiarly feminine, but the air and manner of speaking strikingly so. The gait, in walking, was so peculiar, that no one could avoid the suspicion that the individual was a woman in male attire. (145-146)

lips) demonstrates the existence of traits of both genders in the individual’s

appearance. Altogether, this description of this patient's physical appearance sheds light on the importance of physical characteristics and appearance to the construction of a gender and sex binary in the nineteenth century.

Artifact 3

This excerpt was published in an article in 1876 in *The American Journal of Obstetrics and Diseases of Women and Children*. Paul

F. Mundé, the author of “A Case of Presumptive True Lateral Hermaphroditism,” was one of the physicians who examined Karl Hohmann. In this brief excerpt, Mundé claims that Hohmann could indeed be a true lateral hermaphrodite. This excerpt demonstrates how ideas of a concrete gender binary were imposed upon the scientific understanding of

At the meeting of the New York Obstetrical Society, held October 5th, 1875, I exhibited before the Society an individual in male attire, who claims to possess – with what right it is partly the object of this paper to show – the characteristics of both the male and the female sex united in her person, and to be a unique instance of that anomaly known as *hermaphrodisia vera lateralis*, true lateral hermaphroditism (one lateral half of the body containing the germinal gland of the female, the ovary, and presenting female peculiarities; the other half containing the germinal gland of the male, the testicle, and showing male attributes). (615)

human bodies. Scientists conceived that the *hermaphrodisia vera lateralis* would have a testical on one side of the body and an ovary on the other side, both separate yet simultaneously existing in the same body. This shows the constricted ways in which the gender and sex binary affected the ways in which scientists viewed the human body. It also explains how scientists resolved the ambiguity of intersex individuals by focusing instead on a “true” form of intersex that fit inside their notions of gender.

Artifact 4

The following artifact is a brief newspaper article titled “Case of Hermaphroditism” published in the *Medical and Surgical Reporter* on December 12, 1868. The subject of the article is Catharina Hohmann (Karl Hohmann). The newspaper article demonstrates the extent to which Karl and other intersex people sought after medical examinations of their bodies and how they advertised for medical doctors. Also, the latter half of the

article represents cultural fears instilled in nineteenth-century society. The tale of loving both sexes but belonging to neither is evidence of the cultural fears of blending genders and sexes. Finally, Hohmann's last statement is indicative of the predicament of intersex individuals at the time: their lives were full of scientific inquiry and probing while their deaths were slated for postmortem dissection.

Catharina Hohmann, who presents in her (his?) own person a remarkable case of hermaphrodisia vera lateralis, which has been described by Prof. Rokitansky and others, is on her travels in Germany exhibiting her unique malformation. She complains, however, that in Vienna the authorities put a stop to her turning an honest penny in this way, 'aus sittlichkeits-rucksichten.' So she advertises in the *Wiener Medicinische Wochenschrift* that she can be examined at her own rooms by those interested in her case.

A journalist who saw her writes to *Vienna Presse*: 'I pitied the poor creature. Although in good health, and of robust, and even beautifully shaped form, she sat before me in deep distress and wept. And she has wept already a great deal in her joyless life. She loves a man for twelve years; he loved her, too, and even proposed to her to go with him to America, where nobody would know of her misfortune; he would live with her there and be happy with her. But she refused to accept his generous offer, saying she would not make him unhappy. And then she loved, dreadful to say, for seven months – a young girl. Both of them were greatly attached to each other until the young girl finally turned from her and married. 'Form this time for ward,' says the poor hermaphrodite, 'I could no longer look at the girl; I hated her.' The most conflicting feelings always surge in her breast and torment her heart. She feels love for both sexes, and does not belong to either. 'What shall I do here on earth!' she exclaimed. 'What am I? In my life an object of scientific experiment, and after my death, an anatomical curiosity!' (487)

Artifact 5

The following excerpt is taken from a collection of lectures written by George Washington Burnap in 1854 concerning the duties and sphere of women. In this excerpt, Burnap explains how God's creation of man and woman as separate entities correlates with the existence of separate spheres for the two sexes. Also, the excerpt discusses the existence of a necessity of

two distinct identities in society: “perfect humanity is made up of both the sexes.” This idea demonstrates the nineteenth-century belief that two sexes were integral to the functioning of society. They believed that the mixing and blurring of gender lines would not only go against God’s creation but would also have negative consequences on society. Thus, this shows why people in the nineteenth century struggled with conceiving of an intersex identity that was not defined by the male/female binary.

But whatever may be the original equality of the sexes in intellect and capacity, it is evident that it was intended by God that that they should move in different spheres, and of course that their powers should be developed in different directions. They are created not to be alike but to be different. The Bible with a noble simplicity expresses in few words all that can be said upon this subject. “God created man in his own image, in the image of God he created him, male and female created he them.” As much as if the lawgiver of the Jews had said; “Perfect humanity is made up of both the sexes. One is not complete without the other. They are therefore counterparts of each other.” They must be different, and in many respects the opposites of each other, to fill their different spheres. This difference runs through the whole of their physical, moral, and intellectual constitution. This radical and universal difference points out distinctly a different sphere of action and duty. The God who made them knew the sphere in which each of them was designed to act, and he fitted them for it by their physical frames, by their intellectual susceptibilities, by their tastes and affections. (45-46)

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