



THE KILLER OF LITTLE SHEPHERDS

A TRUE CRIME STORY AND THE
BIRTH OF FORENSIC SCIENCE

DOUGLAS STARR

A K N O P F  B O O K

Blood:
An Epic History of Medicine and Commerce

The Killer of Little Shepherds

*A True Crime Story
and the Birth of Forensic Science*

DOUGLAS STARR



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The wild beast slumbers in us all. It is not always necessary to invoke insanity to explain its awakening.

—Dr. Edward Spitzka, 1901 postmortem report on Leon F. Czolgosz, assassin of President William McKinley

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Author's Note

This book is a work of nonfiction. I have taken no liberties with facts or the context in which the events related in the book occurred. All quotes and dialogue were taken from the participants' letters, books, affidavits, and court testimony, or from verifiable contemporary journalistic sources. In those instances where I attribute thoughts to someone, the thoughts appear in italic and are based on that person's writings or testimony. The serial killer Joseph Vacher's state of mind was reflected in a surviving collection of his letters, in affidavits of contemporaries who encountered him, in records of the asylums in which he was confined, and in the reports of investigators and alienists who interviewed him. Details of his crimes were gleaned from original crime-scene analyses, autopsy reports, newspaper accounts, and the oral histories of the modern-day inhabitants of the villages he terrorized. Dr. Alexandre Lacassagne's personality and state of mind were revealed by his voluminous writings and scientific reports, the writings of his many colleagues and friends, and the stories and artifacts shared by his descendants.

Most of the source material is in late-nineteenth-century French. Sometimes I shortened sentences and simplified the language in order to make the quoted material accessible to modern readers. Although numerous people helped with translations, any oversimplifications that may have resulted are my own.

Crime

*The werewolf of legends
Has now been surpassed ...*

—Popular verse about Joseph Vacher, 1898

The Beast

On a drizzly spring evening in 1893, in the French provincial city of Besançon, nineteen-year-old Louise Barant was walking along the riverside promenade when she crossed paths with a man wearing the dress uniform of the French army. His name was Joseph Vacher (pronounced *Vashay*). “Ugly weather, isn’t it?” he said, and automatically she responded, “For sure.”¹ Normally Barant, tall and wholesome-looking, with curly blond hair, would not have spoken to a stranger, especially one as brutish-looking as he; but Vacher projected a kind of disarming innocence, and the sergeant’s chevrons on his sleeve reassured her.

So they chatted and walked and shared dinner in a café. They learned that they both came from small towns: she from Baume-les-Dames, a pretty village near the Swiss border, and he from Beaufort, a nondescript hill town southeast of Lyon. As they lingered over shared stories about their pasts, he told her he had never felt this comfortable with anyone, and she, too, sensed she could speak freely and easily. Yet she felt a shiver of doubt when she looked up from her meal and saw his eyes burning into her. Later that evening, he ardently proposed marriage. When he vowed that he would kill her if she ever betrayed him, she realized she had made a terrible mistake.

In the weeks that followed, he pursued her relentlessly. Like other men who live easily with violence, Vacher knew how to interweave threat, regret, self-pity, and charm in an attempt to prolong the relationship. Louise, who was a stranger to the town and worked as a housemaid, tried desperately to avoid him, inventing endless excuses for not being available. Once, taking pity as victims sometimes do, she agreed to meet him at a dance. They were standing awkwardly among the merrymakers when a soldier approached to talk to Louise. Vacher lunged at the man with such fury that the soldier and Louise ran from the dance hall.

Now she knew that she would never be safe in the same town as Vacher. Too afraid to reject him directly, she made up a story that her mother had forbidden their marriage and had ordered her home. The distance did nothing to quell his obsession. He kept mailing her love letters. Finally, she responded in the clearest possible way: “It would be best if you stopped writing to me ... Everything is finished between us; I do not want to go against the wishes of my mother.”² Furthermore, I do not love you. Adieu, Louise.”

She hoped that would finally end things between them. Besides, she knew that if he left his unit to find her, he would face charges of desertion. But her departure and final letter had sent him into such a series of rages that the regimental doctor diagnosed him as having “nervous exhaustion” and gave him a four-month medical leave. He immediately headed back to Baume-les-Dames, stopping to buy a revolver along the way.

Any of the soldiers in Vacher’s barracks would have told Louise not to get involved with the twenty-three-year-old sergeant in the first place, for something wild and violent dwelled within him.³ They had witnessed his manias and explosive temper: How once, when a soldier lagged in formation, Vacher swiftly and without warning kicked him in the groin; or how

during alcohol-induced tantrums, he would hurl heavy wooden bureaus across the room, roar like an animal, and rip handfuls of hair out of his forearms. Another time, when he was passed over for promotion, he drank himself senseless, tore apart the barracks, and slashed with a razor at anyone who came near. He ended the episode by taking the blade to his own throat. After that incident, he was hospitalized and transferred to another company.

Yet at times, Vacher could appear deferential, and, when necessary, even charming. Undoubtedly, he behaved that way when he first met Louise, although under the stress of rejection the beast had reemerged.

Arriving in her village, he spent days trying to persuade her mother and family to accept him, only to succeed in frightening them as well. On the morning of June 25, 1893, he went to the house of Louise's employer for a final confrontation before taking the train back to Besançon. Louise opened the door, recoiling when she saw him.

"Why are you afraid, Louise?"

"I'm not afraid," she said unconvincingly.

"Look, I don't want to harm you. I've come here peacefully to demand the things that you owe me."

He had become obsessed with reclaiming the letters and trinkets he had given her, and the money he had spent taking her to dinner. She gave him all that he demanded, but still he kept talking about needing more. As he rattled on about his various resentments, she furtively backed her way up the marble stairway. The more he spoke, the more agitated he became.

"When I think that you don't want me, Louise ... We would have been so happy! Listen, you don't know what I am capable of doing. I have already told you and I repeat: I'm crazy about you! Come away with me."

She told him that if he did not leave immediately, she would wake her boss, who would eject him. Vacher slipped his right hand into his pocket.

"So you do not want to come with me, then?"

"No!"

He pulled out the revolver and began firing. The first bullet entered her mouth, shattering two teeth, ripped through her tongue, and exited her cheek. She screamed and collapsed. Two more shots grazed the top of her head as she fell and another smashed into the wall. Then Vacher turned the gun on himself, firing two bullets into his face.

The explosions echoed so loudly in the hallway that her employer's family rushed down from their bedrooms and passersby ran in from the street. They found Louise crumpled on the stairs, Vacher staggering blindly, his face covered with blood. He lurched four or five steps out the door before collapsing in the street.*

And so began the public life of Joseph Vacher, one of the most notorious serial killers of his century, who slaughtered more people than the infamous Jack the Ripper. Although the incident with Louise Barant was the first of Vacher's legal encounters, he had perplexed and discomfited the people around him for years. Neighbors in Beaufort remembered him as a child who was quick to pick an argument, and unusually violent in schoolyard scuffles.⁴ Once

when asked to guard the family's livestock, he took the animals to a meadow and broke some of their legs. He spent a couple of his teenage years in a monastery but was expelled for unspecified indiscretions. He was drafted and stationed with the Sixtieth Regiment in Besançon. Although he thrived under the army's strict discipline, he showed violent outbursts there, as well. All along, people found him strange, but as he himself had said to Louise, they had no idea of what he was capable.

Crimes of passion were notoriously common at the time, leniently punished, and often blamed on the victim. After he shot Louise, Vacher spent a couple of weeks in a hospital. He was then sent for observation to the public asylum in the nearby city of Dole, where doctors were to determine if he was sane enough to stand trial. The "Certificate of 24 Hours" documenting the patient's first day in the asylum, reported he was "calm, responds meekly to questions and regrets the act he has committed."⁵ It described in detail how the shooting had disfigured him: a scarlet furrow ran the length of his right jaw; yellowish pus oozed from the right ear—stigmata that would mark him for life. With each breath, his right cheek fluttered like an unfettered sail, for one of the bullets had severed a facial nerve. When he spoke, he could barely open his mouth, and the voice that emerged was nasal and slurred.

He seemed a defeated man, rather than a menacing one. Yet over the weeks, as Vacher healed and became stronger, a more paranoid and violent character emerged. Quietly at first and then more stridently, he accused the doctors at Dole of plotting against him. Day after day, he demanded to see a surgeon to remove the bullet from his ear. When medical personnel arrived for the procedure, Vacher accused them of trying to kill him and bolted from the operating room.

On July 20, according to hospital records, he experienced a "crisis of agitation."⁶ He screamed at doctors and fought with his roommates. Sometimes he sat rocking on the side of his bed. "At certain moments he raises his head and focuses his eyes as if listening to invisible voices," wrote Dr. Léon Guillemin, adjunct doctor at the facility. "During such times he has the facial expression of a madman."

Inwardly, Vacher seethed. He hated the institution and everyone in it. According to him, the doctors were heartless and the patients were swine. Later, in a long, embittered letter to the authorities (Vacher would prove to be a prolific letter writer), he would write that the asylum was "everything that is dirty and abominable," where he was forced to sleep "on a grubby flea-infested mattress."⁷ The food was barely edible, he said, and the guards often stole it. Unsupervised patients often abused one another and took special delight in tormenting the blind. "They pushed them and spit in their faces. Some even pushed them outside naked in the snow." At times, he thought of killing himself. "And I was not the only one ... some people could not take this treatment, and committed suicide."

Contrary to Vacher's accusations, the alienists at Dole considered themselves sympathetic and attentive. (*Alienist* was the era's term for a psychologist, as mental patients were seen to be "alienated" from themselves.) Printed materials from the asylum described the treatments as "gentle, tolerable, humane, and more in agreement with modern ideas. Unlike in the past, inmates were not shackled to the walls or beaten for offenses they unwittingly committed. "All the coercive methods that tortured the sick patients have been abandoned ... the fate of the sick [who come to the asylum] is nothing other than complete

humane.”

When Vacher was admitted, the asylum’s director was preparing to move the patients to a new facility, a cluster of pavilions in a pastoral setting just outside of town, a notable improvement on the present fortresslike edifice. Scores of such facilities were being built throughout Europe.

Still, conditions at Dole were not what they should have been.⁹ A late-nineteenth-century visitor to the asylum noted that many patients still lived behind bars in dank cells and received inadequate personal care. In truth, this asylum, like many others, had far too many inmates. The population of insane people had exploded in France (and throughout Europe and in the Americas, as well) due to the epidemics of alcoholism and syphilis, and to the increasingly common diagnosis of mental disease.¹⁰ In time, insanity became a catchall diagnosis for all sorts of deficiencies, including dementia, homelessness, and criminal behavior. As a result, asylums became dumping grounds for the overflow from prisons, almshouses, workhouses, and the streets. By the time Vacher entered the asylum, the state-run system was housing more than twice the capacity it was designed for. Dole, built for five hundred patients, was bursting with more than nine hundred—at least 15 percent of whom were criminals. (Faced with such impossible conditions, even the most dedicated alienist could lose heart. When the director of the Villejuif asylum in Paris was asked what he found most effective for patients, he replied, “We wait for them to die.”¹¹)

Doctors had put Vacher in a special high-security wing, but, as in many asylums at the time, oversight was lax. On the night of August 25, 1893, Vacher sneaked out of his room, found a long wooden beam, leaned it against the wall, and shimmied over it to freedom.¹² He was heading to Baume-les-Dames to find Louise. An all-points bulletin went out over the telegraph, with a special notification to the police in Louise’s village. It would not be hard to identify the fugitive: He wore the asylum’s standard-issue gray cotton shirt and trousers, and there was no mistaking his disfigured face.

A couple of weeks later, some soldiers in Besançon caught sight of him. Local policemen jailed him. A few days later, he was put on a train, headed back to the asylum. His guards had instructions to handcuff him and to keep him in view at all times. As the train rumbled on, Vacher asked the guards if he could get off at the next stop to go to the bathroom. “You have to wait,” they said.¹³ They had no intention of letting him off the train, even manacled, for a minute. He persisted. Finally he offered to stand right in front of the guards and urinate out the door. They paused; the train was flying along at top speed, and it seemed there was no way he could even think of making that leap and surviving. He shuffled to the door, opened his pants, and, before they could react, heaved himself out. He hit the talus and then rolled and scampered off like a jackrabbit as the train roared away.

Two days later, police, alerted by some village children, found him eating dinner at a farmer’s house. They took him to the Dole asylum in chains. His condition grew worse. Increasingly “in the grip of melancholic ideas,” he tried to commit suicide by slamming his head against the corner of a wall.¹⁴ “We frequently have to take energetic measures to prevent him from harming himself,” wrote the doctors in a “situation report” of October 2, 1893.

Meanwhile, Dr. Guillemin had arrived to make an official assessment of the inmate

sanity. He interviewed Vacher, physically examined him, spoke to his minders, and pore over his records. Guillemin diagnosed Vacher as “a deliriant with a persecution complex of the first order.”¹⁵ He had suffered this condition for most of his life. The symptoms, not always evident, would occasionally and dramatically appear. The rejection by Louis aggravated the condition as never before, the doctor said, and triggered the homicidal behavior. At the asylum, Vacher continued to suffer severe paranoia, aggravated by auditory hallucinations. He imagined the “entire world is in league against him,” wrote Guillemin. “From the moment he arrived at Dole, [Vacher felt] his doctors neglected him, ignored him, did not want to care for him, and wanted him to die. We have done our best for him, but he accuses us of trying to kill him, and shows no signs of being cured.”

In conclusion, Guillemin wrote: “(1) Vacher suffers from mental alienation characterized by a persecution complex, and (2) He is not responsible for his actions.”

The local court issued a finding of not guilty by reason of insanity, transforming Vacher's legal status from that of an accused criminal to that of a mentally damaged ward of the state—more specifically, a ward of his home district, or *département*, Isère, in the east of France. He would be taken to the state-run asylum there, outside of Grenoble, and stay until his doctors decided he was cured.

They put him on a train for Saint-Robert, the new asylum, along with two guards. In a note to accompany the transfer, Guillemin described Vacher as “currently really quiet.”¹⁷ He only wishes to return to his region [and to] be back with his family soon.” Guillemin expressed confidence that Vacher would behave during the transfer. “However, because of a history of suicide attempts and escapes, I recommend serious supervision. Two reliable guards should suffice.” Inexplicably, he made no mention of the attempted homicide, the voices, or Vacher's murderous impulses and dangerous paranoia. As far as the people at Saint-Robert were concerned, they were preparing to receive a depressed and suicidal man, but not one who was dangerous to others. Vacher later recalled that as the train pulled away from the station at Dole, all he wanted was “to see blood running everywhere.”¹⁸

Vacher had promised to behave during the transfer. In an effort to appeal to his reason and dignity, the doctors allowed him to wear his regimental uniform instead of the asylum gray. But the uniform only awakened his sense of outrage, and he resolved to escape and tell the world about Dole. On the platform, he tried his “urination” escape; the guards quickly grabbed him and shackled his hands and feet.¹⁹ Once on the train, he tried to create the maximum amount of disturbance. Seated between the guards in a third-class carriage, he lurched his body this way and that, trying to break free. When that failed, he shrieked anarchist slogans and screamed about his treatment at Dole—especially at stations, where lines of people were shuffling through the car. His ravings made women on the train cower and weep.

Vacher's destination, the Saint-Robert asylum, was “one of the best institutions in France” according to a British survey of hospitals and asylums at the time.²⁰ Constructed on the grounds of an ancient priory, it commanded a majestic view of the surrounding Alps, where its inmates could savor the brisk mountain air. The facility had been designed according to the latest psychological theories, which emphasized bringing normalcy to patients' lives rather than simply confining them. The institution was built as a campus, with separate men

and women's residences and a common building in the center, all in a neoclassical style. Beyond the main edifices stood buildings and streets reminiscent of those in a quaint rural village, along with acres of trees and cultivated fields. The totality of the setting, from the scenery to the architecture to the attitude of the staff, was intended to lighten the spirits of the inmates who lived there.

The staff's attitude reflected gentleness, as well. Unlike their colleagues at other asylums, doctors at Saint-Robert used straitjackets only two or three times a year, and only "in temporary and exceptional cases, when it is clear that a patient will injure himself," as the asylum's director, Dr. Edmond Dufour, explained to a group of visiting alienists. Saint-Robert's employees never resorted to the common practice of using freezing showers to discipline their patients, or the "Scottish showers" of alternating hot and cold water. They never shackled the patients, even the violent ones.²¹ They busied their inmates with esteem-building employment such as cobbling and sewing, and with theatrical and musical productions. They always spoke respectfully and with kindness. It was all part of an effort to restore dignity to patients, and to appeal to the better part of their intelligence.

So it was with tenderness and humanity that the orderlies greeted the man who arrived late on the night of December 21, 1893, whose face portrayed a history of violence. Knowing that he posed a suicide risk, they assigned Vacher to the high-security section, placing him in a room with a calming view of the mountains. He had been there barely twenty-four hours when he began to show improvement. Apparently responding to the benevolent atmosphere, he stood up and offered a communal grace before dinner: "Dear Friends, let us praise God that we have been born in a region where our caretakers are so loyal and humane.²² Thank God we were born under such a benign and benevolent sun."

The words seemed to arise from an inner gentleness, and augured well for the patient's recovery. No one who heard those words of benediction could ever imagine how misleading they would be.

Joseph Vacher walked into history at a time of expectation and dread. The period at the end of the nineteenth century and the beginning of the twentieth, known as the Belle Époque, was an era of peace and prosperity, of advances in science and the arts. It was a time when Sarah Bernhardt lit up the stage and Toulouse-Lautrec and Degas illuminated the art world; when Gustave Eiffel was building his tower and Louis Pasteur was developing his germ theory of infection.

Everything seemed bigger, faster, newer, more efficient. The new train networks sped passengers across continents, and steamships bore them rapidly across the seas. Telegraph wires carried messages at the speed of light across the countryside and under the Atlantic. The Olympics were revived. The cinema was born. Modern burlesque halls opened in Paris, where they featured a lively new dance called the cancan.

People could truly aspire to *enjoy* life, not just endure it. They shopped in the new department stores, bought the new ready-to-wear clothing, and pedaled their new bicycles, which had taken the middle class by storm. Women especially flocked to the bicycle as an independent means of transportation. Posters and full-color newspaper ads—themselves

innovations of the era—portrayed new customers as liberated goddesses, flying naked across the heavens on their bikes.

Yet amid all the optimism ran an undercurrent of anxiety. For every happy, well-off family, many more lived in poverty and destitution. Everyone could sense the instability, the rumblings from below. Anarchism, an international terrorist movement, was growing: Bombs were exploding at markets, government offices, and train stations. The authorities responded with brutal repression, and the cycle of reprisals continued. By the end of the century, anarchists would bomb targets throughout Europe and assassinate the presidents of France and the United States. Some intellectuals saw modern society, with its vulgar amusements and avant-garde lifestyles, as evidence of a species gone soft, of a reverse evolution, of social degeneracy.

Crime rates were rising, and fear among the populace was inflamed by the new tabloids in the press. It was not simply crime that alarmed people but also the emergence of a criminal *class*. Londoners learned to fear the “residuum,” New Yorkers saw the rise of ethnic street gangs, and Parisians knew to avoid the “apaches”—roaming bands of youths who swarmed over the gentry who might wander from the beaten path. Legions of the dispossessed—vagabonds from the countryside, street gangs from towns, the criminally insane who escaped from the asylums—all seemed bent on victimizing good citizens.

In this climate of hope and anxiety, an international group of experts emerged that took a scientific approach to crime. Like the other great logicians of the era, they viewed the problem not as sin or the workings of the devil, but as a scientific challenge. (This, after all, was a scientific age.) Trained in medicine, law, psychology, and anthropology, they established new institutes for criminal research, published their work in scholarly journals, and debated their theories at international conferences.

Theirs was the first generation of modern criminologists, and they developed the techniques that characterize forensic science to this day. They learned to read meaning in the chaos of a crime scene by measuring and mapping; by recording scuff marks, prints, and fibers; and by performing methodical autopsies and collecting biological samples. They employed the new science of psychology to create profiles of suspects and to interview them calmly and effectively upon capture (in contrast to the brutal techniques of their predecessors). To understand larger patterns of crime, they created databases of maps and statistics. To explore the roots of deviant behavior, they dissected the brains of executed criminals. Their studies opened realms of discussion formerly reserved for priests and philosophers: What impulses for good and evil naturally existed within human beings? What modified those impulses along the way? What were the limits of free will and sanity? Could the impulse to do evil be understood, predicted, redirected, or cured?

If the doctors at Saint-Robert looked kindly on their new patient, he seemed to feel the same about them. “When I arrived here I thought I had entered Paradise,” he wrote in a letter to the director, Dr. Dufour. Later, in a long letter to Louise (to the end of his days, he never stopped writing her), he wrote of his delight at arriving at the new asylum:²³

Imagine my surprise....²⁴ I arrived by train through a little valley surrounded by snow-crowned mountains, and there it

was, glowing by the light of the moon ... this clean and rich establishment lit by electricity (for I arrived at night). The main door opened and there in front of me were two friends who I had thought would be executioners. We crossed gardens as beautiful as any in Grenoble.

They put me in a building that was frequented by rabble, but they were nothing like the walking dead [at Dole]. Whereas in Dole we were surrounded by guards who might as well have been executioners, here there are guards who embody Vigilance and Humanity.

That is not to say that Saint-Robert was a summer camp. Like their colleagues elsewhere the alienists had a fear of free time that bordered on paranoia and left not a moment for idleness or deviant thoughts. Wake-up call came at 5:00 a.m. (6:00 a.m. in the winter) followed by a half hour of room cleaning and then breakfast.²⁵ Patients spent the morning cultivating the fields or laboring in one of the asylum's workshops. Lunch was served exactly at noon, followed by a half hour of recreation and then the afternoon work shift. Dinner was at 6:00 p.m. (5:00 p.m. in the winter), followed by quiet activity, such as dominoes or card reading or strolling the grounds, and then bedtime at 8:00 p.m.

Days moved forward in lockstep progression: Friday was for haircuts, beard trimmings, and hair washing; on Saturday, new sheets were given out; and on Sunday, patients received clean clothes before mass. Sunday was also concert day, and the patients would stage a variety of shows, plays, and musical performances for the other residents and people from the community. Patients could write one letter every two weeks to someone in the outside world, and censors would review it. The concept was simple: The order and discipline of the daily routine would help alleviate the disorder and chaos of the patients' minds.

Amid all this "normalizing" activity, doctors administered physical and psychological therapies. In part, they relied on the era's pharmacopeia: leeches to calm excitability; purgatives to cleanse the system by provoking vomiting and diarrhea; and light doses of opium, belladonna, or chloroform, depending on the symptoms they were trying to relieve. They often used hydrotherapy—long, hot baths to calm patients with mania and cold baths for depressed patients who needed stimulation. Sometimes they applied mild electrical shocks to calm a manic or hallucinating patient—a procedure known as "the touch of a brass paintbrush."²⁶ Doctors would also engage the patients in talking about their problems and their hopes for a better life.

Vacher spent three months in Saint-Robert. The alienists who treated him knew he was manic and sometimes suicidal, so they likely administered calming hydrotherapy. They may have given him electroshock treatments—in a letter to the asylum director in January 1890 Vacher asked him not to "electrify part of my head."²⁷ Certainly they employed talk therapy; the doctors recorded in their notes that they listened to and accepted his version of the incident with Louise. He spent most of his time alone, reading.

Saint-Robert's status reports portray a very different man from the one who behaved so wildly at Dole. He *responded* to treatment, or at least appeared to. Within two weeks of his arrival at Saint-Robert, doctors could report that he no longer heard voices, that he was becoming "docile and polite."²⁸ He wrote fawning letters to and about Dr. Dufour. ("I should be governing all of France rather than administering this establishment full of rabble."²⁹) On January 29, 1894, Vacher wrote that he understood the crime he had committed, deserved the punishment he had received, and felt that he had been able to cure

himself despite the previous six months in Dole. Soon he described a plan to put his life back in order after his release.

The letters, together with his “inoffensive” behavior, persuaded Dufour that his patient was recovering. As he explained, they demonstrated two critical elements: that Vacher accepted responsibility for his crime and that he showed an ability to plan for the future. “He also made it clear to me and insisted on this point that we don’t have the right to hold those insane people who are completely cured,” Dufour later told a newspaper reporter.³⁰ “And it is my obligation to set them free.” Meanwhile, the local government of Isère, chafing at the expense of running a world-class asylum, had been pressuring Dufour to release patients as soon as their symptoms abated.³¹

In early March of 1894, Dufour wrote to the prefect of Isère that Vacher, having suffered a fairly ordinary nervous breakdown triggered by his broken engagement, was now cured. The prefect issued a release order. On April 1, 1894, less than ten months after Vacher tried to murder Louise, guards opened the wrought-iron gate. Vacher hugged his doctors and fellow inmates. Then he walked free.

A newspaper would later describe that moment as “opening the door to the cage of a wild beast.”³²

* Both survived, because the dealer who had sold Vacher the revolver loaded the cartridges only with half charges—just enough powder to stop an aggressor but not necessarily to kill him.

The Professor

In mid-November 1889, Dr. Alexandre Lacassagne, head of the department of legal medicine at the University of Lyon, got a request from the city prosecutor to help with a particularly nasty case. Four months earlier, a body had been found in a sack by the Rhône River, about a dozen miles south of the city. The corpse had been autopsied by another doctor, who could not arrive at an identification. Now, because of new developments in the case, the body was being exhumed. Granted, there would not be much left of the cadaver, but could Dr. Lacassagne perform a new autopsy? Perhaps he could find something the previous doctor had missed.

It was not unusual for Lacassagne (*Lackasanya*) to be called in where others had stumbled for he had established a reputation as a skilled criminologist. As the author of textbooks, the developer of many new forensic techniques, and the investigator of several celebrated cases, he was first among equals in an international cadre of experts in the new field of legal medicine.

The subject of this autopsy was presumed to be a missing Parisian named Toussaint Augustin Gouffé.¹ A bailiff by profession, and a widower with two daughters, Gouffé was a prosperous man and had a reputation for being a sexual adventurer. On July 27, Gouffé's brother-in-law, whose name was Landry, reported to police that Gouffé had gone missing. Police paid little notice at first—this was, after all, the summer of the Paris World Exposition with many unscheduled comings and goings. But when three days passed without Gouffé's reappearance, they took the case seriously, and referred it to Marie-François Goron, the renowned chief of the Paris Sûreté, the city's investigative unit.

Three weeks later, a body turned up about three hundred miles southeast of Paris, near the village of Millery, south of Lyon. A few days after that, some snail gatherers in the woods found a broken wooden trunk, which reeked of death and bore a shipping label from Paris.

Could the body and the trunk be connected to the missing man? Goron telegraphed a description of Gouffé to the medical examiner's office in Lyon. At the time of the discovery, Lacassagne was away, so a colleague and former student, Dr. Paul Bernard, conducted the autopsy. He found little that matched the corpse to the missing person. True, the cadaver, like Gouffé, had large and strong teeth and was missing the first right upper molar, but that was about all. The corpse measured about five feet seven inches, while the missing man stood about five eight. The corpse had black hair; Gouffé's hair was chestnut-colored. The cadaver was between thirty-five and forty-five years old, according to Bernard's estimate; Gouffé had been forty-nine. Just to be sure, Goron sent Landry to Lyon, along with a deputy. Landry took a brief, gasping look at the bloated, greenish body and saw not the slightest trace of his relative. Case closed. The men returned to Paris and the body went into an anonymous pauper's grave.

That might have been the end of the affair, but in the fall Goron received an anonymous

tip. Just before Gouffé disappeared from Paris, he had been seen at the Brasserie Gutenberg in the company of a con man named Michel Eyraud and his consort, Gabrielle Bompard. The couple left Paris the day after Gouffé went missing. Meanwhile, Goron had taken the shipping label from the trunk and showed it to the clerk at the Gare de Lyon in Paris. Records showed that the trunk had been shipped to Lyon the day after Gouffé's disappearance. Its weight was registered at 105 kilograms—just about the combined weight of a fully grown man and a stout wooden trunk.

Everything tied the victim to Gouffé—except for the autopsy. Goron felt there must have been a mistake. He contacted the authorities in Lyon and asked them to exhume the body and reexamine it. They resisted: By now the victim had been dead for four months; no one could possibly identify the remains. But Goron, legendary for his persistence, remained adamant. And so the hideous job of conducting an autopsy on a body that had previously been dissected and had lain rotting underground fell to the one man in Lyon—perhaps in all Europe—who stood the slightest chance of solving the mystery.

Dr. Jean-Alexandre-Eugène Lacassagne already was well respected in his field when he encountered the case that would make him world-famous.² As one of the early scholars and innovators of legal medicine, he had helped devise many new techniques in crime-scene analysis, such as determining how long a body had been putrefying and how to match a bullet to a gun. He showed investigators how to determine whether a dead body had been moved by examining the pattern of blood splashes on the skin. He developed procedures by which even simple country doctors could perform professional autopsies if called to a crime scene.

Colleagues admired him not only for his contribution to science but as a scholar, teacher, and friend. As people often did in those days, they saw his character revealed in his appearance—and a noble physiognomy it was, with a high forehead, handlebar mustache, burgomaster's girth, and a "strong, rhythmic step and ever-cheerful eye."³ With his energy and talent, he could have done anything, but he had chosen the nascent field of criminology. To his mind, it encompassed the scale of the human experience, from the workings of a single brain to the forces that shape civilization. But even that occupied only part of his intellect. He immersed himself in poetry, philosophy, literature, and art. He could recite from memory pages of Dante in the original Italian and entire acts from the work of his favorite French playwrights. He sponsored young artists. He was never without a book—either reading or writing one. His friends thought him a Renaissance man, except for one flaw: He lacked the ability to appreciate music.⁴

He was born in 1843 to innkeepers in Cahors, a quiet town in southwest France. A gifted student but too poor to afford a private education, he attended the military's medical school in Strasbourg, where he wrote his first thesis, on the side effects of chloroform. He studied military medicine in Paris for a year and then returned to Strasbourg. He arrived during the Franco-Prussian War, and for thirty-nine days the Germans bombarded the city before its ultimate surrender. As one building after another collapsed, Lacassagne and his fellow medical residents set up a clinic in the hospital basement, piling mattresses against the windows as explosions blew fiery debris all around them. In September, a Swiss delegation evacuated the wounded and doctors to a hospital in Lyon. It was Lacassagne's first view of the city that would become his home and a world capital for the investigation of crime.

With the Strasbourg medical school destroyed, Lacassagne continued his studies in Montpellier. He wrote a thesis on putrefaction, manifesting an early interest in biological phenomena that affect both the living and the dead. To fulfill his military obligation, he traveled to Algeria, where he was assigned to be the doctor for a disciplinary brigade. Normally, it would have been a dreary assignment, but not to a man with an intellect as lively as Lacassagne's. He became fascinated by the miscreants in his care. Many bore tattoos with strange and exotic images: Joan of Arc, the scales of justice, hearts pierced by knives, two hands clasped with a flower rising between them, and naked women with sexual features exaggerated to cartoonlike proportions. The inscriptions were equally fascinating: "No luck," "Death to unfaithful women"; "Vengeance or death"; "Born under an unlucky star." Convinced that the tattoos revealed insights into criminal subculture, he developed techniques to transfer the patterns to paper and then categorized them according to imagery and body location. By the end of his service, Lacassagne had categorized some two thousand tattoos from hundreds of soldiers. When he presented his research to an international meeting of anthropologists, the American journal *Science* described it as "one of the most entertaining and instructive anthropological papers which have appeared in a long time."⁶

From that point, his career path rose steeply. In 1876, he published a book entitled *Précis d'hygiène privée et sociale* (Synopsis of Private and Public Hygiene), a more than six-hundred-page volume about personal, public, and occupational health. Two years later, he wrote an equally weighty tome, entitled *Précis de médecine judiciaire* (Synopsis of Judicial Medicine), which summarized the nascent field of legal medicine. It was hailed as a small masterpiece. In 1880, he was named to the recently established chair of legal medicine at the University of Lyon. In this hardworking, bourgeois, insular city, he became popular among the students not only for his knowledge but for his refreshing enthusiasm and warmth.

Beyond solving individual crimes, Lacassagne became fascinated by the criminals themselves—their thought processes, subculture, and way of life. Why did they feel compelled to behave in a manner that was contrary to the rules of society? Why did they take such a difficult path? He made it his life's work to find out, and studied them as assiduously as a zoologist would scrutinize a favorite species. He visited them in prison, collected their writings, and dissected the brains of those who had been guillotined.

His findings, and those of his colleagues from Europe, Russia, and the New World, appeared in a journal he founded, *Archives de l'anthropologie criminelle* (Archives of Criminal Anthropology). For twenty-nine years, it served as the preeminent forum in the field. In its pages scholars would discuss the key developments of their day—crime-scene analysis, criminal psychology, capital punishment, the definition of insanity. There were also many practical reports, in which Lacassagne and his colleagues would describe how they used the latest forensic techniques, as in "the Thodore Affair" (pieces of an old man's body found around a village), "the Father Bérard Affair" (a priest accused of sexual perversion)⁸, and "the Montmerle Affair" (a woman found hanged and stabbed in the throat).⁹⁷ There were articles on celebrity cases, such as that of Oscar Wilde, in which a French expert on homosexuality wrote about the writer's trial and imprisonment. Jack the Ripper appeared in its pages, as did Jesse Pomeroy, the boy killer of Boston. On two occasions the journal reviewed the newly published stories about Sherlock Holmes. (The verdict: fascinating procedures, but why did Holmes never conduct an autopsy? Also, real medical experts recruited teams of specialists

while Holmes worked alone, with Watson as a mere sounding board.) The journal was populated by the castoffs of society: thieves, murderers, child molesters—the human face of the degenerate instinct.

To assist in an autopsy with Dr. Lacassagne was to participate in a memorable educational experience. Medical students would have seen hospital autopsies before, but forensic dissections were something quite different. Here they saw tableaux of violent death displayed in a medium of shredded tissue and broken bone. Death leaves a signature, and they would learn to read the meaning: a peaceful death versus a violent one; a death by accident, suicide, or criminal intent. By removing an infant's lungs and seeing if they floated they would learn to determine whether the baby had been stillborn or had lived long enough to take its first breath. They would learn that a frothy liquid in the airways indicated drowning; that a furrow around the neck pointed to a rope hanging; that break points on opposite sides of the larynx showed that the victim had been strangled with two hands. They would use the angle of a stab wound to determine the trajectory of the arm that had held the knife, and the pathway of a bullet to deduce the location of the gun. They would employ chemical reagents to identify stains from blood, semen, fecal matter, and rust (often mistaken for blood). "The students all flocked to him," recalled Dr. Edmond Locard, a student who himself became a prominent criminologist.¹⁰ And so, several times a month for the thirty-three years that Dr. Lacassagne taught at the medical faculty of Lyon, students would cluster around their beloved professor, who, with no mask on his face and no gloves on his hands, would slice into a cadaver to reveal the mysteries of the last moments of the deceased.

No crowd of students surrounded Lacassagne as he prepared for an autopsy on the morning of November 13, 1889—only a small number of medical assistants and police officials were in attendance. On the table lay the remains of someone who had died almost four months before. Was it Gouffé? Following the autopsy in August, after the body had been buried in an anonymous pauper's grave, a clever lab assistant named Julien Calmail had a hunch that the body would be needed again, so he scratched his initials on the outside of the coffin and put an old hat on the cadaver's head, creating a means of identification.

By Lacassagne's side stood Dr. Paul Bernard, who had conducted the first autopsy, and an assistant, Dr. Saint-Cyr. There was also Dr. Étienne Rollet, Lacassagne's student and brother-in-law, whose recently completed thesis would prove invaluable to the case. The state prosecutor from Lyon stood close by, as did Goron, determined to get to the bottom of the mystery. Up in the far reaches of the amphitheater, with a handkerchief pressed against his face, stood one of Goron's colleagues, Brigadier Jaume.

One could forgive Jaume for keeping his distance, as the sight must have been appalling. A four-month-old cadaver retains little of the appearance that once identified it as human. Having been ravaged by insects and having passed through several stages of putrefaction, the body is little more than shapeless clumps of organs and flesh and odd tufts of hair clinging to a bone structure. The stench is even worse than the appearance. It is a mixture of every repulsive odor in the world—excrement, rotted meat, swamp water, urine—and invades the sinuses by full frontal assault, as though penetrating through the bones of the face.¹¹ One reacts with a deep-seated revulsion. The neck hairs jump to a state of alarm, and the nervous system sends out a message to flee. It is an olfactory memory not easily forgotten.

Lacassagne had stopped noticing those sensations, having performed hundreds of autopsies often in hot, unventilated conditions. The only complaint he and his colleagues sometimes voiced was that the smell on their fingers would linger for days.

Lacassagne liked to use aphorisms in teaching. A favorite was: “A bungled autopsy cannot be redone,” emphasizing the need for care and precision.¹² Bernard must have dozed through that lesson, judging by the state of the cadaver. He had examined the brain, as recommended, but in order to reach it, he’d smashed off the top of the head with a hammer—not with a saw, as his mentor had taught—eliminating any chance of detecting head trauma. He had opened the chest with a chisel, as prescribed, but completely destroyed the sternum, making it impossible to see if there had been a traumatic chest injury. The organs had been removed and placed in a basket. Many bones were out of place.

No matter—the master would work with whatever materials he had. First he needed to determine the victim’s age. There were several places he would normally have looked to make an estimate. The junctions of the skull bones would have been one, if they had not been rendered useless by the hammer blows. Instead, he directed his attention to the pelvis. He examined the junctions between the sacrum—the triangular structure that contains the base of the spine—and the hip bones on either side of it. Those junctions are obvious in a child and progressively become fused as a person reaches adulthood. He also examined the fibrocartilage junctions among the last few vertebrae in the coccyx, which also become fused over the years. Lacassagne examined the victim’s jaws and teeth. The teeth were in good shape, but years of gingivitis had caused a loss of bone around the tooth sockets. The bone of the tooth sockets, normally well defined and sharp at the edges, had resorbed into itself and presented a ratty appearance. The state of all those age-related changes characterized a person between forty-five and fifty years old—not thirty-five to forty-five, as Bernard had stated.¹³

The next step was to determine the victim’s height. Standard practice at the time was to stretch out the cadaver and add four centimeters (one and a half inches) to roughly account for the loss of connective tissue. But that was too inaccurate for Lacassagne. Instead, he made use of the newly developing field of anthropometrics—the statistical study of bodily dimensions. Researchers had been experimenting with methods of deducing the size of a body from individual bones, but no one had done the kind of comprehensive studies that would make their correlations precise and authoritative. Lacassagne knew about this shortcoming, so he assigned Étienne Rollet to write a thesis on the relationship between certain bones of the skeleton and the length of the body. Over the years, Rollet obtained the cadavers of fifty men and fifty women and measured more than fifteen hundred bones, down to the millimeter.¹⁴ He focused on the six largest bones, including the three bones of the upper and lower leg (the femur, tibia, and fibula) and the three of the upper and lower arm (the humerus, radial, and ulna). He carefully charted the bone lengths of men and women—right-handed and left-handed people of various ages.

As he recorded and charted hundreds of measurements, Rollet began to see certain regularities. Within a given gender and race and general age cohort, the length of individual long bones of the skeleton bore a constant correlation to the overall body length. For example, a man’s thighbone measuring 43.7 centimeters (1 foot, 5 inches) corresponded to a body height of 1.6 meters (5 feet, 3 inches). If his upper arm measured 35.2 centimeters (

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