



*Medical leadership and
the strange case of
“Dr. H. Anonymous”*

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A prevailing notion in medical practice is that all physicians are considered leaders, or at least they have the potential to become leaders. Their predominant leadership style is “leading by example,” as reflected in the adage “see one, do one, teach one,” a method for learning technical procedures which is ingrained in medical students and continuing throughout their residency. Non-technical physicians can also demonstrate the art of leading by example through their actions and words, and by their willingness to tackle problems and controversies in medicine and society.

Physicians who lead by example possess many characteristics seen in transformation leaders.¹ According to Richard L. Byyny, MD, FACP (ΑΩΑ, University of Southern California, 1964), servant leaders “lead by example with humility, authenticity, interpersonal acceptance, stewardship, and by providing vision, direction, and inspiration.”² Characteristics of servant leaders include empathy, awareness, persuasion, conceptualization, foresight, and mentoring. Physician leaders are mentors who educate, empower and develop trainees. Mentors cannot be overlooked lest core professional beliefs and values fail to root and propagate.

John Ercel Fryer, MD (1937–2003) was a special mentor. A wunderkind, Fryer was born in Winchester, Kentucky, attended Transylvania University at age 15, and matriculated to medical school at Vanderbilt at age 19. An openly gay man of epic proportion, his seismic status was outweighed only by his leadership efforts to eliminate homosexuality as a pathologic condition in the *Diagnostic and Statistical Manual of Mental Disorders*, (DSM).

Fryer battled the American Psychiatric Association

(APA), and his bold actions figured prominently in the struggle for gay liberation. He influenced the APA to respond in appropriate ways valuable for organizational outcomes that benefit society—the quintessential definition of leadership by example. His story is one of the most remarkable accounts of civility in modern medicine, and although it has been chronicled in professional association newsletters, a textbook,³ and even Wikipedia, it remains largely “closeted” among the psychiatric LGBT community.

Overlapping careers

I first met Fryer during medical school orientation. He greeted me with an impish smile and a forceful handshake and said, “Hi, I’m John Fryer. Nice to meet you.” He seemed genuine. He was engaging. He put me at ease. My anxiety melted on the spot, as did that of many other students who had a bad case of the jitters during orientation.

Fryer invited everyone to call him John. One of my co-residents who came to know Fryer very well painted him



Dr. Fryer studies organ music prior to Temple medical school commencement ceremony, May 29, 1980. Author’s yearbook photograph

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as “a man who can be witty and charming or petulant and biting; a man with a quick, intuitive sense of what others are feeling and, at other times, self-absorbed and entitled; a man as comfortable behind the ranks of the organ as he is an orator about those matters for which he has a passion.”³

Fryer’s real love was the pipe organ, which he played at medical school graduations at Temple. He was the organist and choirmaster at St. Peter’s Episcopal Church in the Germantown section of Philadelphia, his adopted hometown. Fryer was also the official organist of the APA, playing at opening sessions of the association’s annual meetings.

Fryer taught primary care medicine to medical school freshman. He encouraged my research project—a psychological study of women undergoing elective abortion—and edited my paper, commenting, “Get this published!”—and I did.⁵ Despite any moral objections he may have had, he realized the importance of scientific inquiry in psychiatry, and the need to conduct research on abortion in the immediate post *Roe v. Wade* era.

Fryer was a go-to mentor for the “ABCs” of psychiatry—addiction, bereavement, and crisis management. Pragmatism was his by-word. At one of his infamous holiday parties, I vividly recall him telling his Doberman pincher, “go be a dog.”

The “Dr. H. Anonymous” case

By the time Fryer was in his mid-30s, his leadership qualities were quite evident. Words like outspoken, colorful, emotional, and most important of all, involved, were used to describe him, which is why he was tapped by gay activists to confront the APA about their hostile stance toward homosexuals. But because Fryer was subjected to discrimination and forced to conceal his sexual orientation for many years, he felt it was necessary to undertake extreme measures before addressing the APA.

On May 2, 1972, at the 125th annual meeting of the APA in Dallas, Texas, Fryer disguised himself in a full-face rubber mask, replete with a wig and oversized tuxedo. Posing as “Dr. H. Anonymous,” Fryer delivered a stirring gay rights speech⁶ to psychiatrists attending the panel presentation “Friend or Foe to Homosexuals—A Dialogue.” Fearing reprisal from the psychiatric establishment, Fryer disguised his voice through a special microphone. He felt it was important to assume anonymity because he was not yet tenured at Temple, and he feared being fired if his true identity became known.

“I am a homosexual. I am a psychiatrist,” Fryer began. Speaking on behalf of “fellow gay members of the APA,” he implored the audience to “cease attempting to figure



John E. Fryer, MD, gay rights trailblazer and Philadelphia psychiatrist, circa 1998. © Association of Gay and Lesbian Psychiatrists

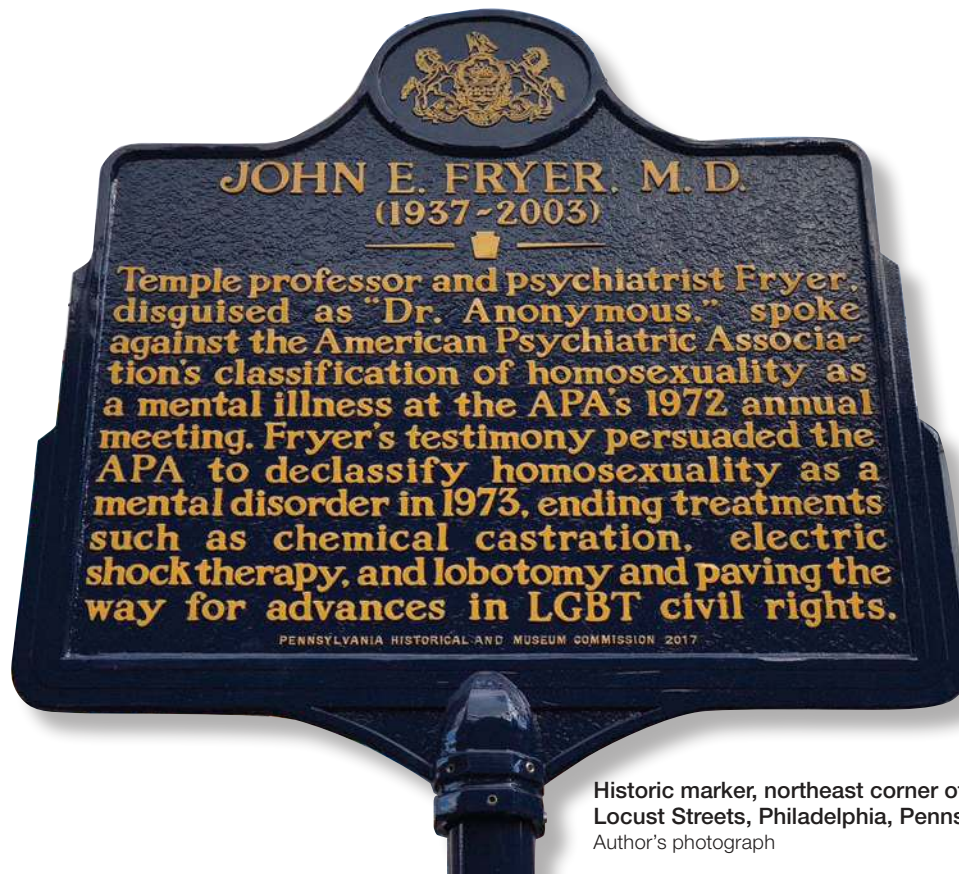
out who I am and listen to what I say.” Fryer’s speech was one of the most powerful and inspiring messages any psychiatrist had delivered. Only Dr. Paul Fink’s 1982 “enigma of stigma” talk⁷—an eye-opening account of the pervasive and deleterious effects of societal stigmatization on the mentally ill may be as influential a call to action.

Fryer derided the psychiatric profession for labeling homosexuality a mental illness without scientific proof. He compared homosexuality to bigotry faced by African-Americans:

Much like the Black man with the light skin who chooses to live as a white man, we cannot be seen with our real friends, our real homosexual family, lest our secret be known and our dooms sealed.

He spoke frankly about the “Gay-P-A,” in recognition of a loose underground network of closeted gay APA psychiatrists, whose attendance at the convention he estimated to be at least 100. Observing that most gay psychiatrists are married to their respective institutions, Fryer concluded, “Many of us work 20 hours daily to protect institutions that would literally chew us up and spit us out if they knew or chose to acknowledge the ‘truth.’”⁶

Fryer had been dismissed from a residency program



Historic marker, northeast corner of 13th and Locust Streets, Philadelphia, Pennsylvania.
Author's photograph

and hospital staff position when they learned he was gay. The hospital administrator remarked, "If you were gay and not flamboyant we would keep you. If you were flamboyant and not gay we would keep you. But since you are both gay and flamboyant, we cannot keep you."⁴

The APA response

Immediately following the APA meeting, Fryer wrote in his diary:

The day has passed—it has come and gone and I am still alive. For the first time, I have identified with a force which is akin to my selfhood. I am homosexual, and I am the only American psychiatrist who has stood up on a podium to let real flesh and blood tell this nation it is so.⁸

The reaction of the APA was positive, but not swift. Although the diagnosis of "homosexuality" was removed from the DSM the following year (1973), providing an "instant cure"⁹ for millions of gay and lesbian Americans, it took 14 more years for the term "homosexuality" to be eliminated from the DSM. The diagnosis of "ego-dystonic homosexuality" was removed from the revision of DSM-III in 1987.

In 1998, 26 years after "Dr. H. Anonymous" concluded,

"we must, therefore, use our skills and wisdom to...grow to be comfortable with that little piece of humanity called homosexuality," the APA issued a position statement opposing reparative and conversion therapies aimed at changing homosexual orientations, thus putting to rest any notion that homosexuality was a mental illness. However, Fryer felt betrayed by Dr. Robert Spitzer, an expert in psychiatric nosology and a major architect of the DSM, when Dr. Spitzer later stated that in his opinion gays could become straight.⁴

The APA's most recent position statement on homosexuality was published in 2013.¹⁰ It combines 12 previous position statements, written between 1973 and 2011, into one document. The statement reads, in part,

No credible evidence exists that any mental health intervention can reliably and safely change sexual orientation; nor, from a mental health perspective does sexual orientation need to be changed.

Fryer's insistence on using scientific evidence as a foundation for clinical and policy decisions was embodied in the 2013 APA position statement. His pursuit of scientific truth commenced long before the term "evidenced-based medicine" was coined.

An important chapter and legacy

Another important chapter in the declassification of homosexuality as a mental disorder occurred in 1985, when Fryer revealed himself as “Dr. H. Anonymous” at the awards luncheon of the Association of Gay and Lesbian Psychiatrists (AGLP), May 23, 1985, at the annual APA meeting, again in Dallas.¹¹ Fryer remarked, “That event [the 1972 “Dr. H. Anonymous” episode] represented a transition point for me,” observing that now the Gay-P-A no longer had to meet clandestinely. He was deeply disturbed about individuals distancing themselves from the AIDS crisis— “as if it had never happened”— and reminded AGLP members “our cause has no meaning unless we align ourselves with those people whom society oppresses in other ways: the homeless, blacks, women, I could go on and on.”¹¹

And Fryer did go on. He fought tirelessly for inclusion and equality and was recognized in 2002 by Vanderbilt University Medical School with a distinguished alumnus award. The AGLP also honored him with a distinguished service award.

Following his death in 2003 from aspiration pneumonia due to complications of diabetes and sarcoidosis, *The Advocate*, the nation’s oldest and largest LGBT publication, declared Fryer’s speech “one of the most influential events in gay and lesbian history.”¹² Barbara Gittings, a close friend who was instrumental in persuading Fryer to speak at the 1972 APA meeting, remembered him as “incomparable,” noting that the gay community’s mental health improved dramatically following his talk because “we spoke up for ourselves and took charge of our own destiny.”¹³

Temple University School of Medicine created the John Fryer Memorial Endowed Prize “for demonstrating a commitment to psychiatry and behavioral health and a sensitive concern for the human aspect of patient care.” In addition, Transylvania University established the John Fryer Fund for Diversity and Inclusion to support and protect the rights and well-being of students who come from groups that have historically been marginalized. In addition, the APA created the John Fryer Award in 2005 to honor an individual who has contributed to improving the mental health of sexual minorities.

The heart of the Philadelphia LGBT community

Many never knew the identity of “Dr. H. Anonymous” until the City of Brotherly Love (Philadelphia) commemorated him with a historic marker on October 3, 2017, recognizing Fryer for “paving the way for advances in LGBT civil rights.” The marker is located in the heart of the Philadelphia LGBT community, across the street from

the Historic Society of Pennsylvania, which has archived career-spanning documents, correspondence, and photographs of Fryer.

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