

BOOK REVIEWS

Samuel K. Cohn, Jr., *Epidemics: Hate and Compassion from the Plague of Athens to AIDS* (Oxford: Oxford University Press, 2018), pp. x + 656, £22.99, hardback, ISBN: 9780198819660.

A remarkable feature of the COVID-19 pandemic has been the outpouring of voluntary action, community support and mutual aid across the world. People from all walks of life and living in all conditions have taken to social distancing and isolation, with little protest. As doctors, nurses, health care providers and other essential workers have risked their lives to tend to the sick and dying, neighbours and communities, friends and strangers have joined together to support the most vulnerable.

This is not to downplay the darker sides of the pandemic – the harrowing increase in domestic abuse or the structural violence of socio-economic inequalities, which has meant that (Black, Asian and Minority Ethnic), the poor, old and marginal have suffered disproportionately. The pandemic has highlighted and exacerbated failures to address these deeply entrenched inequalities.

But while some have sought to vilify and blame certain countries or groups, COVID-19 has been largely borne peacefully with few collective acts of hatred or violence. As Samuel Cohn argues in this exhaustive global history, epidemics can give rise to social solidarity as much as they can give rise to social divisions and conflicts. This paradox should come as no surprise to historians. Yet, Cohn contends that the historiography of epidemics has relied too heavily on categories of blame and ‘othering’, and too little on altruism and care, with the consequence that a consensus has formed that assumes that epidemic diseases increase or foster social, ethnic and political tensions.

Epidemics is meant to be a challenge and corrective to this consensus. Working comparatively across more than 2500 years, it re-examines how different diseases, from the Plague of Athens to AIDS, sparked different ‘socio-psychological’ reactions. The temporal and geographical scope is vast. The approach is equally ambitious. Rather than synthesise existing historical work, it surveys a massive collection of digitised archives and, for the nineteenth century onwards, the growing number of digital newspaper collections available to historians. The result is a densely empirical analysis that shows that while some epidemics sparked collective hatred and violence towards specific social groups, a large number did not follow this pattern.

Divided into five parts, twenty-five chapters move chronologically from antiquity and the middle ages (Part I), to early modernity (Part II) and then to modernity (Parts III and V), with an epilogue devoted to HIV/AIDS. The sample of diseases analysed is relatively small, with focus primarily on plague, syphilis, yellow fever, cholera and influenza. The rationale for this choice, very briefly outlined in the introduction, is that these gave rise to the most sustained and dramatic collective reactions and allow for comparative analysis across time and place. Few would doubt this claim, but some explanation was needed for why other diseases, which have had an equally global impact on human history, such as tuberculosis and malaria, fail to meet these criteria and have been excluded from this study.

Despite the chronological breadth of *Epidemics*, emphasis is placed unevenly on the modern world, with more than two-thirds of the book focused on the nineteenth and early twentieth centuries. There is a logic to this focus, as one of Cohn’s aims is to test whether epidemic-induced hatred, violence and blaming ‘others’ declined in the context of modernity, which he associates with the rise of scientific medicine and, especially, the ‘laboratory revolution’ and the predominance from the 1860s of bacteriological approaches to infectious disease. His conclusion, based on analysis of great epidemics of the nineteenth century – cholera, smallpox and plague – is that ‘modernity, instead of decoupling the disease-hate nexus, intensified its lethality’ (p. 163). Scientific modernity did not give rise to more rational or humane approaches to epidemic disease.

Yet, even as these modern epidemics were marked by heightened fears of foreigners, sharpened social divisions, and racialised policies of border control and quarantine, they could also be sources of solidarity, bringing together working classes, ethnic minorities, colonial subjects and others against state, medical or colonial authorities. While cholera, smallpox and plague are used to exemplify how epidemics could bond one group against another *within* society, other epidemics are shown to bond together society as a whole. In a chapter on American reactions to yellow fever, Cohn argues that the 1853 epidemic bred new forms of tolerance across class and racial lines, particularly in the American south. However, the outstanding example of unity-in-the-face-of-adversity emerges from the 1918–19 influenza pandemic. Cohn dedicates five chapters to the pandemic, tracing reactions in the United States, Canada, Britain, continental Europe and India. While epidemiologically catastrophic, Cohn's extensive newspaper analysis shows that, above all else, in every country surveyed, collective responses were characterised by 'compassion, volunteerism, and martyrdom' (p. 413), rather than blame or violence.

This book exemplifies the great potential of new digital resources for disease history, but also some of the pitfalls. The sheer volume of reactions catalogued and compared is impressive and clearly demonstrates Cohn's central claim that responses within and between epidemics varied extensively. But there is comparatively less in the way of explanation for why such variation existed. A mixture of biological and cultural factors is identified. On the one hand, it is suggested that reactions could stem from the particular etiological, clinical or epidemiological characteristics of a disease; on the other hand, they could stem from particular meanings signified by a disease, the types of people associated with it, the preventive measures employed or the authorities tasked with their implementation. The conclusion that there are 'no easy answers' (p. 539) rings true, but this is not altogether satisfying.

Historians of medicine and disease have developed fine-grained contextual analyses of why epidemics became culturally, ideologically and politically charged when and where they did. At turns, *Epidemics* delivers such analysis, but it is overshadowed by an approach that seeks to broadly delineate epidemics according to those that did or did not spark blame (or compassion). While this approach makes it possible to sift through and organise a vast array of material, the reader is left searching for why, as Cohn suggests, the diseased were generally not attacked in the ancient world, why they were in medieval (plague) and early modern (syphilis) worlds, and why some were (cholera) and were not (influenza) in the modern world.

The tension within *Epidemics* between its breath-taking synthesis of digital sources and its narrow analytical framework makes it difficult to judge what its overall impact will be on the historiography of epidemics. It is, without question, an immensely valuable resource. I have found it especially helpful for teaching students about how online newspapers can be used to systematically reconstruct the multiple perceptions, responses and lived experiences of modern infectious diseases. But by far its most important contribution is to challenge historians to look more closely at the complex ways in which epidemics past have brought people together. This is a critical message for the moment in which we are now living and, if not already, it should be a critical part of our teaching, research and policy agendas.

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doi:10.1017/mdh.2020.32

Emily Kesling, *Medical Texts in Anglo-Saxon Literary Culture* (Cambridge: D. S. Brewer, 2020), pp. xii + 233, £60, hardback, ISBN: 9781843845492.

The subject of this book is a collection of medical texts in Old English, known since the nineteenth century as Bald's *Leechbook*, *Leechbook III*, the *Lacnunga* and the Old English *Herbal* and *Medicina de quadrupedibus* (medicines from four-footed creatures). Dr Kesling gives us the first book length treatment of these texts to be published in over 25 years, greatly advancing the scholarship in an often neglected field of study. She briefly notes the scope of the texts and their sources in the introduction