Dr. A: I saw you talking to people visiting Mr. C. What’s up?

Dr. B: Problems! It seems that his relatives are blaming Mr. C for his cholera. They say he acquired cholera because he didn’t go to church. But he says that he got it because he was “bewitched”.

Dr. A: I know the patient. We explained to Mr. C that the probable cause of his cholera was drinking water contaminated by V. Cholerae. But no matter how much time passes it seems that the old tendency to blame something or someone or some supernatural force for any disease is still a strong desire. Medical explanations of disease causation, when identifiable, almost seem like secondary and redundant explanations.

Dr. B: You’re right. Disease connotes a disorder that has been widely fantasised or we could say that disease or illness as categories bear a close similarity to the category of deviance. We could say that disease is a deviance from the normative yardstick of health.

Dr. A: Yes, that is how it seems to work. The classifications of people as ‘Vermin’ or ‘Vermin’ are repeated themes in the history of epidemics particularly in ideological manipulation. Remember the history of the Great Plague?

Dr. B: Europe’s Plague of 1348 brought horror and fear to medieval people as they were confronted with bizarre and almost totally unknown symptoms. To those who believed in spirits and devils (that was most of the people of the time), this infestation realised their nightmares, ones in which they and the medical establishment of the time were completely unable to effect relief, no less cure.

Dr. B: With limited worldviews, options in the face of catastrophe are even more limited. It thus becomes easy for any explanation to become credible. For example, while the Pope declared that the Plague was not divine punishment for the sins of the world, the local clergy gave it as the only reason for such horrors, a construction suited to benefit their positions.

Dr. A: But a very interesting ‘blaming others’ scenario comes from the history of syphilis. As if to repeat both history and human frailty, syphilis in its early spread took on different names, shifting the blame for its occurrence on others. One of the best examples I ever came across was this:

... the English called the disease the French Pox, the French called it the Neapolitan or Italian disease, the Italians and the Dutch called it the Spanish disease, Portuguese called it the Castilian disease, Russians called it the Polish disease, Polish called it the Russian...
A glimpse at the old history of infectious diseases can easily be extrapolated to conform to any actual, potential, or politically perceived disease in contemporary times from HIV/AIDS to Ebola to Anthrax.

Dr. B: That's right. There has been an invariant link established between biological and moral defects even if the diseases themselves have changed. More recently, the case of AIDS has shown the way in which those who are ill are viewed as dangerous untouchables, a view enhanced by association with deviant, excessive and abnormal sexuality. The reification of the concept of disease appears particularly inappropriate for AIDS.

Dr. B: As a social concept, 'disease' has always meant what any given society has chosen it to mean. Scientists, based on the Henle-Koch model of germ theory, during the last two decades of the nineteenth century, discovered numerous agents responsible for many infectious diseases, i.e. tuberculosis, plague, syphilis, and cholera. But before the advent of the germ theory, disease was generally blamed on either a 'sin' on the part of a patient, a 'miasma'-atmospheric components made up of malodorous and poisonous particles generated by the decomposition of organic matter or an illness of deliberate intent caused by those outside a patient's particular cultural circle. However, it must be said that although perceptions have generally changed, this is hardly universalisable-just look at Mr. C!

Dr. B: Diseases display various personas just as living creatures and social institutions do. The various ambiances, which they exhibit under different circumstances and times, reflect the dominant aspect of the relation between the disease, the disease process, and any society's perceptions of it at any given time and disease can be manipulated by any given society's ideology.

Dr. A: Right! Importantly, diseases and the diagnostic expressions accompanying them ultimately find their meaning in what we do with them more than what may be said about them. As Temkin (1997: 77) puts it, Disease...is thought of as the situation requires. The circumstances are represented by the patient, the physician, the public health, the medical scientist, the pharmaceutical industry, and last but not least, the disease itself...our thinking about disease is not only influenced by internal and external factors, it is also determined by the disease situation in which we find ourselves.

Dr. B: Food for thought.

Dr. A: That's the idea!□

Bibliography: