Epidemics have always been pictured as hot-houses of emotions, sparking the sudden rise of compassion, fear, hate, and violence. Over the past sixty years or more, historians have seized on the last of these three traits, seeing pandemics across time and space as giving rise to the stigmatization and blame of the ‘Other’. As René Baehrel held in his classic article of Les Annales, 1952, big epidemics have always sparked hate and class enmity, such reactions are part of our “structures mentales […] constantes psychologiques”. With the eruption of HIV-AIDS in the 1980s, these conclusions gained force from a wide variety of well-known scholars across disciplines. According to Carlo Ginzburg, “the prodigious trauma of great pestilences intensified the search for a scapegoat on which fears, hatreds and tension of all kind could be discharged”. By the reckoning of Dorothy Nelkin and Sander Gilman, “Blaming has always been a means to make mysterious and devastating diseases comprehensible and therefore possibly controllable”. Roy Porter concurred with Susan Sontag: “deadly diseases” especially when ‘there is no cure to hand’ and the “aetiology […] is obscure […] spawn sinister connotations”. And most recently, from earthquake wrecked, cholera-hit Haiti, Paul Farmer has proclaimed: “Blame was, after all, a calling card of all transnational epidemics”. Scholars post-AIDS have, moreover, introduced at least implicitly a new historical dynamic to this supposed universal ‘fact’ of collective psychology: when the causes and cures of epidemic disease are unknown, hatred of the other becomes more likely, more pronounced. By this logic, the ‘decline of magic’ in the sixteenth, the scientific revolution in the seventeenth, Enlightenment in the eighteenth and the laboratory revolution of the late nineteenth century, would have made diseases progressively more comprehensible. Consequently, the search for scapegoats to pin the blame of a disease ought to have been on the wane from early modernity on. The AIDS experience adds another ingredient to this cultural-psychological frame: sexual transmission of diseases has been postulated as especially explosive in propelling hate and suspicion. These three elements - the newness, mysteriousness, and sexual character of a disease - came together with syphilis’s appearance at the end of the fifteenth century. In the 1980s it became the perfect cultural antecedent of AIDS. Historians have rallied to it, reading from the various names contemporaries gave it, clear evidence of the

5 P. Farmer with J. S. Mukherjee, Haiti after the Earthquake, New York 2011, p. 191.
6 From the general literature, similar remarks can easily be found; for instance, Julia Irwin, Scapegoats and Epidemic Disease” pp. 618-620, in Encyclopedia of Pestilence, Pandemics, and Plagues, ed. by J. P. Byrne, 2 vols., Westport, Ct., 2008: “Throughout history, societies have created scapegoats […] innocent […] to rationalize and explain the origins and course of disease outbreaks” (II, p. 618).
7 For instance, Niall Johnson, Britain and the 1918-19 Influenza Pandemic: A dark epilogue, London 2006, pp. 152-3, cites approvingly Susan Sontag and others on the supposed universal and timeless tendency to name diseases after other peoples and nations and that the naming means blaming. Yet when he turns to the influenza pandemic of 1918-19 called in Britain, “the Spanish Flu”, he must admit that he can find no evidence of blaming or abuse of Spaniards for the disease. He then concludes that such blaming becomes “especially true with sexually transmitted diseases” (p. 153). On the supposed significance of sexually transmitted diseases as the ones more prone to stir hate, see W. Eamon, “Cannibalism and contagion: Framing syphilis in Counter-Reformation Italy”, Early Science and Medicine, 3 (1998), pp. 1-31; and the interesting parallels between syphilis and AIDS in Laura J. McGough, Gender, Sexuality, and Syphilis in Early Modern Venice: The Disease that Came to Stay, Basingstoke 2010, pp. 150-151.
8 Throughout this essay, I use various names interchangeably for venereal disease, lues vernera, despite the fact that we cannot be certain what the pathogen or causative agent may have been for the venereal outbreaks of the sixteenth century.
search for scapegoats. This essay challenges this chorus of consensus and in so doing seeks to explore aspects of the history of emotions that do not easily square with present-day assumptions about the relationship between disease and hatred. Certainly, Europe’s most deadly and devastating disease, the Black Death of 1347-51, unleashed mass violence: the murder of Catalans in Sicily, clerics and beggars at Narbonne, and especially pogroms against Jews with over a thousand communities annihilated down the Rhineland, into Austria, Spain and France. Yet subsequent strikes of plague in late medieval and Renaissance Europe failed to spark waves of hatred against Jews or any other minorities (a trend historians have yet to reflect upon).

Even when plague in the sixteenth and seventeenth centuries once again aroused collective violence against supposed plague spreaders, Jews rarely then appeared as the targets. Instead, a
wide variety of individuals were singled out, accused of perpetuating the disease. These were not only the poor - plague cleaners and gravediggers - or geographical outsiders as with Spanish soldiers in Milan as has been claimed. In the most studied case - that of Milan during its last plague of 1630-1631, featured in Manzoni’s Promessi sposi, the targets of the city’s tribunals and its populace ranged across a wide spectrum. Native Milanese barber-surgeons, scissors makers, tailors and dyers were brought to trial, tortured, and mostly executed along with indigenous and wealthy bankers, members of the clergy and even the aristocrat don Giovanni de Padilla, son of one of Milan’s highest-ranking officials. Both the artisans and the rich and powerful, moreover, were in the main ‘insiders’, not outsiders, either geographically or in terms of economic and political entitlement. Milanese plague tracts bring to light other cases not preserved in the judicial archives, such as a respectable eighty-year-old Milanese man who went to church to pray, and when he dusted off a bench to sit, women screamed, attacked him as a plague-spreader, and with a swelling mob mauled him to death. Another incident concerned young French students interested in Milanese art. In admiring the bas-reliefs on the Duomo’s facade, they felt the figures that drew a suspicious crowd who would have lynched them and had not the police carted them off to prison.

The one group missing from the accusations were in fact the utterly impoverished - old widows, foreign beggars, the crippled and blind - or those most often pictured as the prime suspects, the lowest of the plague cleaners and carters (i monatti). The only accused plague worker was the infamous Guglielmo da Piazza, but he was a plague commissioner (commissario della sanità) and head of the carters in his neighbourhood. Nor were the accused mainly marginal characters from the city’s criminal underworld, despite the name of the local tavern where many of them met - l’hosteria dei Sei Ladri. The ‘mestatore’ or trickster, Stefano Baruello, born outside Milan’s walls, who earlier had suffered from ‘mal francese’, had been in and out of jail, had been

circoncisi)”, in other words, converses, had been arrested in Milan under the suspicion that they had been sent by the Turks to inflict plague against the Christians. However, none of the plague chroniclers in Milan or Mantua refer to their arrest, and there is no evidence that any action was taken against these converted Jews. I thank Marie-Louise Leonard for this reference.

13 Given the means of transmitting plague through items of clothing (as understood by contemporaries), Jews who specialized in second-hand clothing could have easily been the accused and persecuted. But they were not. For this reoccurrence of terror, suspicion, and persecution associated with plague, see Naphy, Plagues, Poisons and potions, who finds that the first signs of scapegoating during plague at Geneva were sparked only in 1545 (p. 57). For Italy, see P. Preto, Le grandi pesti dell’età moderna 1575-1777 e 1630-1631, in Venezia e la peste 1348-1797, Venice 1979, pp. 125-126; Idem, Peste e società a Venezia, ch. 2; Idem, Epidemia, paura e politica nell’Italia moderna, Bari 1987; A. Pastore, Crimine e giustizia in tempo di Peste nell’Europa moderna, Bari 1991; and Processo agli untori, ed. by G. Farinelli and E. Paccagnini, Milan 1988. According to Preto, Epidemia, paura e politica, “the obsession with finding the causes and spread of plague by poisoning or other diabolic and artificial means was wholly absent from the fifteenth and most of the sixteenth century, not only in Italy but across Europe” (p. 10). Also, see P. Slack, The Impact of Plague in Tutor and Stuart England, 2nd ed., Oxford 1990, pp. 293-294; and Idem, Responses to Plague in Early Modern Europe: The Implications of Public Health, pp. 111-131, in Time of Plague. The History and Social Consequences of Lethal Epidemic Disease, ed. by A. Mack, New York 1991, esp. p. 117, who finds such scapegoating rare in England. For Italy, moreover, the plagues of late Cinquecento amounted to only anticipations of what would become much more widespread during Italy’s last early modern plagues of the 1630s and 1656-1657. On these late sixteenth-century anticipations, see Cohn, Cultures of Plague, pp. 3, 101, 119, 271-272, and 277.
14 See the example of the Servite friar Giacinto condemned to death perhaps by an ecclesiastical tribunal; F. Nicolini, Parte III: La Peste 1629-1632, in Storia di Milano, diretta di G. Treccani degli Alfieri, X (Milan, 1957), pp. 497-557, p. 527.
15 Processo agli untori, pp. 76, 150, 480.
16 In the judicial records (other than the aristocrat Padilla), only one of the accused was identified as born outside the city of Milan: Carlo Vedano from the contado of Milan (Ossona).
17 G. Ripamonti, La Peste di Milano del 1630, Milan, 1841, pp. 80-82.
18 Ibidem, pp. 94-95.
accused of fratricide and even witchcraft before the Holy Office, perhaps could be considered part of Milan’s criminal underworld.\textsuperscript{20} The same might be said of his co-defendant, Gerolamo Migliavacca.\textsuperscript{21} But even they were property owners and skilled craftsmen: Baruello was a practising barber as well as a master knife-maker, employing his son and cousins. He owned his own home and shop, had at least one apprentice and a domestic servant. Migliavacca was also a master knife and scissor maker, also owned his own shop and employed at least one worker.\textsuperscript{22} Both were of the upper echelons of the artisan classes, regulars at their local tavern and well-known figures of the neighbourhood. Another candidate for Milan’s marginal low-life may have been Carlo Vedano, from Ossona in the Milanese territory.\textsuperscript{23} Before being accused of plague-spreading, he had been charged for assaulting his parents. But the court transcripts reveal that he was also a master teacher of fencing and owned his own school, hardly a riff-raff.\textsuperscript{24}

Perhaps most surprising is the absence of any women accused of spreading the plague in the surviving trial transcripts, and in the chronicles only one woman appears accused as a plague spreader, the infamous Caterina Rossana, who outrageously confessed to having killed 14,000.\textsuperscript{25} It is especially surprising given charges of demonic activity and association in the literature with witchcraft.\textsuperscript{26} In the late sixteenth- and seventeenth-century Venice (as with most of early modern Europe), 70 percent of those accused of witchcraft were women.\textsuperscript{27} Instead, women stood on the other side of the fence as the prime accusers, testifying against the victims. These women, moreover, appear to have been among the poor: widows, launderers, or others identified only by their neighbourhood parish. Perhaps the Milanese blame spreaders anticipated the poor in nineteenth-century cholera riots, who attacked doctors and high-ranking state officials, thought to have instigated the epidemic to cut costs by killing them off. Indeed, the longest and most detailed account of the Milanese plague - that of Giuseppe Ripamonti - begins with the plebes attacking Milan’s most prominent doctor and protomedico of the Health Board - Lodovico Settala, while he visited his plague patients.\textsuperscript{28} Later, crowds also attacked another leading physician of the health board, Alessandro Tadino.\textsuperscript{29} Further popular insurrections erupted against Milanese health board officials in the countryside at Lecco,\textsuperscript{30} and on 23 April 1630 a riot spread through several city neighbourhoods. With sticks and stones the populace attacked the city’s infamous plague cleaners and grave-carters (\textit{i monatti}), as well as higher-ranking health authorities.\textsuperscript{31}

In Milan, however, no straightforward class cleavage or conflict emerges; instead the plague craze curiously seems to have allied the indigenous poor with the city’s highest officials against others difficult to characterize by origin, profession, or social status. Certainly, it is difficult to classify these as the marginal ‘other’. The medical chroniclers, however, suggest other

\begin{footnotes}
\footnotetext{\textsuperscript{20} Ibidem, pp. 255, 257, 259; and Nicolini, Parte III: La Peste 1629-1632, p. 551.}
\footnotetext{\textsuperscript{21} Preto, \\textit{Epidemia, paura e politica}, p. 47; and F. Codero, \\textit{La Fabbrica della peste}, Bari, 1984, p. 82.}
\footnotetext{\textsuperscript{22} Processo agli untori, pp. 80, 159, 168, 350, 358.}
\footnotetext{\textsuperscript{23} Ossona, 25 km west of Milan.}
\footnotetext{\textsuperscript{24} Preto, \\textit{Epidemia, paura e politica}, p. 50, lists Vedano as unemployed, but I find nothing in the transcripts to specify that he was unemployed or impoverished. Instead, he is described as having held a school of fencing (“facevo scola da scrimia”); Processo agli untori, p. 386. For other places that described Vedano character and profession, see pp. 168, 169, 173, 174-5, 441.}
\footnotetext{\textsuperscript{25} Nicolini, Parte III: La Peste 1629-1632, p. 529; Preto, \\textit{Epidemia, paura e politica}, p. 39.}
\footnotetext{\textsuperscript{28} Ripamonti, La Peste, pp. 44-45.}
\footnotetext{\textsuperscript{29} A. Tadino, Raguaglio dell’origine et giornali successi della Gran Peste: Contagiosa, Venefica & Malefica seguita nella cittadi Milano & suo Ducato dall’anno 1629 sino all’anno 1632 [...], Milan 1653, pp. 73 and 83. Preto, \\textit{Epidemia, paura e politica}, p. 67, has found other places in seventeenth-century Italy as at Pinerolo in Piemonte, where the population accused French doctors of the occupying French army of trying to exterminate the local population.}
\footnotetext{\textsuperscript{30} Nicolini, Parte III: La Peste 1629-1632, p. 504.}
\footnotetext{\textsuperscript{31} Ibidem, p. 518.}
\end{footnotes}
fears and antimonies that operated in Milan during its last disastrous plague. At first, peasants from the surrounding countryside who came to town to hawk their goods were the prime suspects. Later, during a popular revolt for which the chroniclers could not understand the motives, cries against the French rang out within the city. But no class or intellectual divide separated those who believed or disbelieved the stories of manufactured plague spreading. Individuals from Milan’s power and intellectual elite such as Tadino, head of the city’s Health Board Tribunal, Federigo Borromeo, archbishop of Milan, members of the health board, judges and lawyers, and Milan’s titular head, Philip IV, king of Spain, were convinced that only demonic forces implemented by human plague spreaders could explain Milan’s soaring mortalities in 1630.

For the earlier plague in Sicily of 1624, Corrado Dollo has shown convincingly, from published medical tracts that those at the forefront of medical science in the early seventeenth century argued that the plague was demonically and intentionally ‘manufactured’. Instead of primitive fantasies and folkloric magic of isolated Alpine hamlets that swept down the slopes to the nearby cities as Yves-Marie Bercé has conjectured — intellectuals at the cutting edge of science and medicine (Fortunato Fedeli, Alessio Giarrusso, M.A. Alaymo, Jean Bodin, Paracelsus, Athanasius Kircher) were the ones articulating clearly and forcefully these notions of “Peste demoniaca e peste ministanti”. And these intellectuals were also the ones imbued with the latest notions of contagion theory taken from Girolamo Fracastoro, Girolamo Mercurale, and others.

Since the AIDS pandemic of the 1980s, historians have concentrated on syphilis more than plague as the early modern disease to have sparked blame and persecution. William Eamon, for instance, focused on sixteenth-century syphilis to claim that “new diseases bring out a culture’s deepest phobias […]” But, despite doctors’ ‘bewilderment’, syphilis’s gruesome signs, stench, tortures of the joints compounded by the near-suicidal mercury cures, screams, sleepless nights, crippling, loss of noses, lips, hair, eyes, and penises, Eamon can point to nothing worse than the various names given to the disease as evidence of hate and blame: the Neapolitan disease outside Naples, the French disease outside France, the Polish disease in Germany, and so on. Neither Eamon nor others, however, have found pogroms against Jews or against any other
minorities accused of this disease’s spread and scapegoated for it. Further, the disease failed to spur indigenous populations to persecute foreign communities in their midst or the soldiers and prostitutes correctly identified as among the ones who initially spread this disease. Even the naming itself did not necessarily imply blame as has been assumed across time, space, and diseases. Chroniclers and medical writers record a wide repertory of terms for it. Among commoners and those outside the medical profession these appear not to have been the names of nations supposedly blamed for carrying it; rather the commoners’ terms described the disease’s signs: “die bösen Blattern” by German speakers, “de las Buas” by Spaniards, “lo male de le Tavelle”, or the stripes, in Genoa, “lo male de le Bulle”, in Tuscany, “lo male de le Brosulae”, in Lombardy, the Grandgor at Edinburgh, and so on. Morbus gallicus and variations on Mal Francese seem, instead, to have become standard in medical circles, but physicians and surgeons also resisted this nomenclature early on as with the pope’s physician Gaspar Torrella, who in four medical treatises at the beginning of the sixteenth century referred to it as “De pudendagra”, the disease of genitals. Moreover, by the middle of the sixteenth century, physicians had invented other terms - *lues venera* or *la maladie vénérienne* - to avoid any overtones of national blaming. By the seventeenth century, “morbus gallicus” had almost completely disappeared from medical discourse.

But even in the early sixteenth century, others apologised for using the term Morbus Gallicus and made clear they intended no blame. In the opening chapter to his *De Morbo Gallico* of 1519 - one of the most widely circulated medical tracts of the sixteenth century, Ulrich von Hütten called it the French disease so others would know what he was discussing, but “most definitely not because I bear any grudge against a most renowned nation which is, perhaps, the most civilized and hospitable now in existence”. In the *Storia d’Italia*, the Florentine Francesco Guicciardini ended his short chapter on the “male detto da’ francesi” by explaining why it is

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40 C. Quétel, *History of Syphilis*, trad. J. Braddock and B. Pike, Cambridge 1990, p. 66. Early on, physicians and the laity recognized that the disease appeared first in the genitals and derived from sexual intercourse, see Proksch, *Die Geschichte der venerischen Krankheiten* (the chronicle by the Venetian doge, Johannes Baptista Fulgosi, I, p. 318; the physician Antonio Benivieni II, 31; the Spanish physician, practising in Bologna, Juan Almenar, II, p. 33; the Paduan professor and physician, Alessandro Benedetti, II, pp. 41-42; the canon and chronicler of Orvieto, Tommasi di Silvestro, II, p. 154, all of whom were writing at the end of the fifteenth or the beginning of the sixteenth century).


42 This conclusion derives from a survey of 211 titles on syphilis and venereal disease dating from the earliest incurabili to 1820, compiled by Robert McLean and myself and held in Glasgow’s Special Collection. As early as 1527, the French physician Bethencourt had christened the disease “Morbus veneraeus” or “Lues venera”; Proksch, *Die Geschichte der venerischen Krankheiten*, II, p. 151; others such as Ambroise Paré used *lues venera* by mid century; L. Qualtiere and W. Sights, “Contagion and Blame in Early Modern England: The Case of the French Pox”, *Literature and Medicine*, 22 (2003), p. 7.

43 Similarly, no traces of persecution or blaming appear with another new disease of late medieval Europe, the so-called English sweats, a highly contagious and lethal disease that mysteriously appeared with the War of the Roses and mysteriously vanished eighty years later. Von Hütten, *De guaiaici medicina et morbo gallico*, 4r-v, and translated in Quétel, *History of Syphilis*, p. 27. Also, Eamon fails to note that the disease carried many other names, especially among the populace at the end of the fifteenth and during the sixteenth and seventeenth centuries that were not associated with other nations and without any suggestion of blame, most prominently the “Great Pox”, “les grosses poçques”, “la grande gore”, “la panque denarre”, “les fiebres Saint-Job”. Also, in France, it was named after towns heavily afflicted by the disease but did not present overtones of blame: “peste de Bordeaux”, “mal de Niort”, “mal du Carrefour de Poitiers”, “gorre de Rouen”; see Quétel, *History of Syphilis*, pp. 10 and 13.
appropriate to “remove the shame of the name ‘franzese’”. He argued that the disease was brought from Spain and not France to Naples and then adds that the disease was ‘not exactly of that nation’ either; instead, it came from the islands (e.g. the West Indies), made possible by the ‘otherwise most fortunate (più opportunamente) voyages of Christopher Columbus, the Genoese’. But certainly he did not then blame this Italian hero or the Indians.44

Historians such as Anna Foa have gone further, claiming that sixteenth-century Europeans blamed foreign ‘Others’ for intentionally spreading the disease as was charged against the Jews during the Black Death. She points to the famous Modenese physician Gabriel Falloppio, who in narrating Francis I’s siege of Naples in 1494 claimed that “cunning Spanish soldiers” at night would leave their garrisons and poison wells in Naples.45 But against Foa’s claims, the famous surgeon does not suggest that these poisons had been concocted from the pus of victims’ sores as would later be charged against plague-spreaders. Nor did Falloppio target a despised foreign ‘Other’. The Spanish, after all, were the Neapolitans’ allies, sent by their king to defend the Italians.

More strikingly, (and not mentioned by Foa), Falloppio’s charge of contamination during the Neapolitan siege was not limited to foreigners. He reports that Italian bakers to cheapen their bread in these hard times mixed gypsum in their dough and thereby inadvertently abetted the disease’s spread.46 Again, it was clear that no agent of the disease was intentionally spread to the enemy soldiers or the Neapolitan population. Instead, in what sixteenth-century physicians thought was good Galenic logic, contamination of foodstuffs weakened indigenous populations and thereby fuelled epidemics.47 If his description intended any blame, it was self-blame and not against any foreign ‘Other’ or enemy. Finally, Falloppio does blames the new disease’s spread on a third cause - the terrible social conditions brought on by the siege that led to extreme poverty and food shortages. These social and economic conditions caused the “contagion to take wings”, by “propelling” Naples’s “most beautiful girls” into “secret prostitution”. Drawn by these women’s beauty, young French soldiers indulged in unbridled sex and infected them, and because of their extreme poverty Naples’ beautiful women willing obliged. The entire French army became infected and afterwards, all of Europe. But even here with sexual licence and promiscuity, Falloppio, despite his Counter-Reformation milieu, expresses sympathy for the victims and refrains from blaming either a sinful and impoverished indigenous other or the enemy French.48

Another story from a medical source that has been used to demonstrate the connection between the sixteenth-century spread of syphilis and blaming the ‘Other’, again points instead to self-blame. According to Foa and Eamon the maverick surgeon, Leonardo Fioravanti, who spent a great part of his medical career at the disease’s epicentre - Naples - did not blame fellow Christians, even foreign ones, but went further to attack ‘the most abominable Other’, the New World Indian. Indeed, Fioravanti invented a novel theory for the spread of “mal Francese” in

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44 Guicciardini, Storia d’Italia, p. 234.
45 G. Falloppio, Tractatus, in De Morbo Gallico omnia quae extant apud omnes medicos causasunque nationis, ed. by L. Luisini, 2 vols, Venice 1566-1567, p. 663; Idem, De Morbo Gallico, Padua 1564, 2r.
46 Falloppio, De Morbo Gallico, I, pp. 662-663; and Idem, De Morbo Gallico, 2r-v. The Cologne physician, Ioannes Vochs, De pestilentia anni presentis (1507), in Aphrodisiacus sine De Lue Venerea in duas partes divisus [...] Aloysius Luisinus [...] , ed. by Ch. Gothridus Gruner, Jena 1789, pp. 120-121, also saw the corruption of badly baked bread as infecting the blood and, after the sin of pride, causing the disease to spread in Germany.
47 Sixteenth-century physicians often saw the corruption of foodstuffs as a cause of pestilence and mistakenly cited Galen for support; however, Galen saw such corruption as the consequence and not the cause of plague; see Cohn, Cultures of Plague, p. 216.
48 Falloppio, De Morbo Gallico, I, pp. 662-663; and Idem, De Morbo Gallico, 2r-v. On the myth of beautiful women and prostitutes as the origins of syphilis, see L. McGough, “Quarantining Beauty: The French Disease in Early Modern Venice”, pp. 211-237, in Sins of the Flesh: Responding to Sexual Disease in Early Modern Europe, ed. by K. Siena, Toronto 2005, p. 211; and Idem, Gender, Sexuality, and Syphilis, p. 45. She argues persuasively that this myth did not arise until around the mid-sixteenth century.
Europe that got both the French and Spaniards off the hook. Although he held emphatically that the disease was not new; he saw its recrudescence as centred on Naples. Its re-emergence, however, had nothing to do with Columbus’s voyage, Hispanic sex with Indians, or Charles’s crossing the Alps in 1494. Instead, it depended first on a previous war in Naples in 1456. By Fioravanti’s tale, no outside ‘Other’ brought the disease there; rather its native butchers were the culprits. With food shortages of all sorts, but especially meat, they carved up humans felled in war and sold the butchered flesh to enfeebled soldiers: cannibalism was the cause that gave rise to the characteristic pustules. By Fioravanti’s account, the siege of Naples in 1494-1495 led to more severe shortages, prompting Neapolitan butchers to rely again on their old tricks. Fioravanti then claims to have tested the theory by feeding various animals with bits of their own kind. The experiment proved positive: all the tested animals - a piglet, a small dog, and a bird of prey - broke out with the characteristic pox of Mal Francese.

Fioravanti concocted this novel thesis around the middle of the sixteenth century, when learned as well as lay audiences would have known that the disease was spread principally by sex, and had its most recent origins in the New World. Thus, to make the thesis sound not utterly absurd, he ended his story with a brief aside: in addition, the disease spread from the New World because the Indians also practised cannibalism. This was not, however, the point of his long story. Yet it is, the only part of that story Eamon and others after him have cited to prove that Europeans placed their greatest blame for syphilis on the abominable non-Christian.

Even during the nineteenth and twentieth century, new and mysterious diseases of pandemic proportion have not all had the same disastrous psychological consequences for hate and blame. Take cholera and yellow fever. Under strikingly different political regimes and social contexts, cholera set off waves of social violence against the rich, doctors, hospital workers, and government officials in its first major spread across Europe and America, 1831-1837. In Sicily, major insurrections of peasants, miners, unemployed workers, and vagabonds swept through the cities of Messina, Catania, Siracusa, Catania and the countryside, threatening the stability of the Neapolitan regime. Moreover, unlike Black Death, cholera’s dance with social loathing did not suddenly cease with its first appearance; instead, subsequent waves in the 1850s to its sixth in 1910-1911 could continue to provoke hate and collective violence, that is, after John Snow mapped its mode of transmission in 1854 or after Koch cultured the bacillus in 1884. Even with cholera’s seventh wave that reached Peru in 1991, when this disease no longer presented any mysteries, and case fatalities had sunk well below 1 percent, the old class hatreds of earlier cholera outbreaks resurfaced. Government ministries attacked the poor, labelling them ‘pigs’, and accusing them of spreading the disease by their ‘pig-like’ habits. The poor retaliated with
mass demonstrations against state officials. A year later cholera struck the poor of eastern Venezuela, sparking claims of international genocide. The government blamed the disease’s spread on the poor’s dirty, uncivilized habits, especially their diet of crabs, while the poor accused the government and multinationals of poisoning their water and contaminating their food (especially their crabs) to kill them off.

On the other hand, despite scientists’ inability to discover yellow fever’s mechanism of transmission until the twentieth century and its casual agent not until 1927, the psychosociological effects of this disease differed strikingly from cholera’s, even when racial and sectional tensions were stretched to their limits as at New Orleans in 1853 during one of the worst epidemics in U.S. history. Instead, this disease brought communities together, encouraging charity from the north to southern cities and prompted tolerance across class and race. The absence of social loathing and violence is all the more surprising given yellow fever’s patterns of immunity. Overwhelmingly, its victims were recent immigrants and the poor, more so than with cholera or any other disease of nineteenth-century America or Europe. Moreover, because of resistance gained from millennia of exposure in West Africa, blacks possessed much greater immunity to it than whites - a fact that could have stirred suspicion and fuelled mounting racism as had happened to Jews in 1348-1351, alleged to have escaped the Black Death. Instead, whites solicited blacks to provide basic services for the mostly white yellow-fever afflicted. Blacks volunteered; racial tensions eased.

Another case in point is the Great Influence of 1918-1919, which in absolute numbers felled more than any single pandemic in world history. That it provoked no major riots or religious and sectarian hatred is more remarkable still. In 1918 its symptoms, seasonality, and the age structure of victims differed radically from any flu epidemic past or future, marking it as a new and mysterious disease. In addition, this pandemic exploded in the midst of war frenzy and nationalist hatred. In the U.S. the great influx of immigrant workers fleeing Europe and the upsurge of racial and class tensions added fuel to the socio-economic toxins soon to spark the bloodiest race riots in U.S. history and a hysterical red scare across America. Yet this general

54 Ibidem, pp. 281-283.
56 On its patterns of immunity and effects on immigrant populations, see J. Pierce and J. Writer, Yellow Jack: How Yellow Fever Ravaged America and Walter Reed Discovered Its Deadly Secrets, Holboken (N.J.) 2005, pp. 15, 38, and 47. In 1853, 7,000 of the 8,000 to 11,000 victims at New Orleans were recent immigrants, in the main, the poor Irish; J. Duffy, Sword of Pestilence: The New Orleans Yellow Fever Epidemic of 1853, Baton Rouge 1966: “Even at the peak of the outbreak the newspapers maintained an incredibly calm and objective approach to local news. [...] they refrained from excessive criticism [...] (p. 93). In view of the almost universal assumption by the middle and upper classes that the poor brought on disease by their dissolute, immoral, and intemperate lives, one can only assume that the yellow fever had had a sobering effect upon the poor or else had made the upper classes more tolerant!” (p. 95).
60 Johnson, Britain and the 1918-1819 Influenza Pandemic, p. 122. decimated those in good health and in early adulthood, failing to conform to flu’s usual “U” curve of death that killed predominantly infants and the elderly. Instead, in 1918-1919 it triggered pneumonia much more often than with any pandemic of flu before or since and inflicted much higher fatality and mortality rates, attaining mortalities as high as 40 percent in places such as the Western Samoa and other Polynesian islands. Among other places, see A. Crosby, America’s forgotten pandemic: the influenza of 1918, 2nd ed., Cambridge 2003; first published 1976. In the U.S. it was called that “strange prostrating malady”; see The New York Tribune, 12 September, 1918.
61 Crosby, America’s forgotten pandemic, p. 65.
milieu of hate failed to influence influenza. Instead, the pandemic eased social tensions. With public services near collapse and unburied bodies left in heaps, elites, and especially women, in cities such as New York, Washington, Philadelphia, and El Paso entered ghettos, opened soup kitchens to feed the poor and Mexicans and other ethnic minorities; joined motor corps, donated their automobiles as ambulances, scrubbed floors, cared for orphaned infants and children, and put their lives at stake by nursing the infectious. Charitable organizations cut across accustomed denominational lines; people of all kinds became nurses and orderlies, “thrusting themselves into the presence of lethal disease”. Such a view does not emerge from any Panglossian sentiment among historians: just the opposite, as a recent work on ‘Spanish flu’ in Britain illustrates. After concurring with the orthodoxy on big pandemics and blame, citing Sontag, Farmer, Nelkin, Gilman, and others - its author must in the end admit that despite the disease’s naming, the British experience of 1918-1919 betrays no evidence whatsoever of any Spaniard being blamed for the disease or persecuted.

Despite the histories of Yellow Fever and Influenza, the chronological patterns of the disease-hate nexus appears to be the opposite of what historians presently presume - that earlier on when the causes and cures of pandemics were unknown, hatred was more rife. Over the past year I have begun to collect descriptions of epidemics in historical and literary sources back to the 8th century B.C. The most famous of ancient pandemics, the fifth-century B.C. Plague of Athens, might suggest such a supposed pre-modern proclivity for blame. From origins in Ethiopia, this plague spread quickly to Greece, entering the port of Piraeus. According to Thucydides, inhabitants here claimed that Peloponnesian soldiers at war with Athens spread the disease by poisoning cisterns. However, no more is heard of these accusations once the disease reached Athens, levelling a third of the population, and where Thucydides begins his detailed account of the disease’s signs and symptoms and social and psychological consequences - lawlessness in the city, bodily and material lust, loss of fear of the gods. The failure to blame any foreign and belligerent ‘Other’ as mortalities mounted in Athens is all the more surprising given that this disease devastated Athenians but, according to Thucydides, failed to afflict their enemies, the Peloponnesians, ‘to any extent’.

Despite the fragmented survival of early registers and written sources, epidemics fill the annals of antiquity and the Middle Ages. Livy alone recorded fifty-four of them, mostly from 490 to 165 B.C. The modern historian to pay the greatest attention to the representation of diseases

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62 These conclusions are based on evidence from hundreds of newspapers included in the on-line newspaper archive of The Library of Congress, *Chronicling America*, from September to November 1917 (3,440 pages investigated).

63 Crosby, *America’s forgotten pandemic*, p. 82.


68 Idem, 2.53, p. 353.

69 Idem, 2.53, p. 355; Instead, with mortality rates rising and the defeat of the Athenian navy at hand the Athenians turned inward and placed the blame on their esteemed leader, Pericles, for his decision to continue the devastating war with Peloponnesia and failure to sanction his countrymen’s desires to negotiate with the enemy; *Ibidem*, 2.57-59, pp. 359-361.

70 Thus this would amount to about thirty-six epidemics mentioned by Livy. According to R. Duncan-Jones, “The Impact of the Antonine Plague”, *Journal of Roman Archaeology*, 9 (1996): “Major epidemics are so frequent in Roman annalists that contemporaries must have found them relatively commonplace” (p. 109). Actually,
in antiquity, R. P. Duncan-Jones, leaves the impression that blaming was the usual outcome of ancient plagues, because, he argues, “societies” had “no effective medical explanation” for them. Yet he mentions only three such cases, and when we turn to the texts, all three prove problematic. His first is the best: the Peloponnesians’ poisonings at Piraeus, but as we have seen, it did not result in blaming Peloponnesians or any other ‘others’ once plague gained momentum in upper Athens. A second case comes from Livy: deaths among the Roman ruling class in 329 B.C. were pinned on wealthy Roman matrons convicted of poisoning. But Livy was sceptical, calling it “a false story”. Moreover, if it were in fact an epidemic, even a disease (and there is no claim that it was), it did not spread beyond a limited number among Rome’s ruling class; nor were the alleged poisonings spurred on by ethnic or class hatred. As Livy comments, even those who found the matrons guilty believed their acts were ones “of madness rather than deliberate wickedness”. In a third case, one of 184 B.C., Roman rulers attempted to justify their crushing of a rebellion by shepherds around Rome by accusing them of mass poisoning. Our sources, however, do not record any epidemic that then accompanied these alleged acts; instead it was state propaganda to put down a shepherds’ rebellion.

To evaluate the social and psychological reactions to pestilence in past time, I have thus far found over a thousand descriptions of epidemics before the sixteenth century. While ancient authors seldom described the symptoms or epidemiological traits of diseases, they regularly pointed to the palliative non-medical measures populations took to confront these disasters. Yet, despite this attention, hardly any ancient author hints that a population or government blamed an outsider, the poor, or the rich of wilfully spreading an epidemic. Instead, when a plague was particularly severe or mysterious, populations turned to their oracles and sacred texts. The answers received show that they saw the causes lodged in the heavens or brought on by themselves and not by any ‘Other’. To placate the gods they called for united communal action with vows to stage games, build chapels, declare work-free holidays, and

overwhelmingly, they come from one author alone, Titus Livy (59 BC – AD 17) and his massive  *Ab Urbe Condita* even though only 35 of his original 142 books survive.

72 *Ibidem*, p. 115.
73 Livy, 8, 18.
75 *Ibidem*, p. 115.
76 Finally, Duncan-Jones cites two references from Dio Cassius’s *Roman History*, arguing that “plagues” in Rome under the emperors Domitian (81-96 A.D.) and Commodus (180-192) were understood by contemporaries as having been instigated by criminals using poisoned needles. The first of these incidents, around 90 A.D., however, does not refer to any plague at all, rather simply that “some persons made a business of smearing needles with poison and then pricking with them whomsoever they would”. Many of the culprits were later rounded up and punished. The second incident, nearly a hundred years later, refers back to the crimes of ca. 90 A.D., alleging that the malevolent practices had not completely disappeared; however, now in 189 A.D. they ran parallel with a pestilence, “the greatest of any” the author had known with as many as two thousand dying in Rome in a single day. Yet, despite these parallel developments of the same year, Dio Cassius never suggests that any Roman pinned the terrible pestilence’s origin or its spread on the criminals’ poisonous prickings.
77 Perseus 4.0, last updated in 2007, accessed July 30-August 3, 2011. The Perseus collection, however, is weak in the number of Greek and Roman texts it has thus far downloaded for late antiquity. For instance, it does not include the histories of Cassius Dio (ca. 155-ca. 229) or Paolo Orosius (ca. 383-ca. 420), which recorded several epidemics in the first centuries after Christ. I used keyword searches (epidemic, pandemic, plague, pestilence, pestilential, disease, poison and variants of these words). Individual deaths, metaphorical usage, and legendary plagues that are difficult to pin down chronologically, such as ones in the Bible, were discarded from my tallies. I have supplemented the Perseus searches with ones for Livy in the Brepols Library of Latin Texts (A), finding six further epidemics, and have added two from skimming through Paulus Orosius, *Seven Books of History against the Pagans*, trad. A. T. Fear, Liverpool, 2010.
78 Seventh century B.C. (2); sixth (0); fifth (19); fourth (14); third (12); second (16); first (2); first A.D (5); and five in which the date cannot be determined.
79 Livy, 4.25; 27.23, and 27.4
80 Livy, 4.30.
mass prayers at shrines with wealthy matrons sweeping temple floors with their hair. Instead of igniting class violence, plague came to Rome’s rescue, as in 433 BC when an epidemic “afforded a respite” from strife between plebs and patricians. They offered vows to Apollo to build a temple for the people’s health and strove to import corn from Sicily to avert famine, and by these communal offerings, unity was temporarily achieved. In 403 B.C. a plague dumfounded Romans; their doctors could point to no causes and knew no cures. The mystery did not, however, lead to blame or persecution (as our historians presently would have predicted). Instead, it implemented the opposite: for eight days, Romans celebrated lavish festivities to propitiate the gods: throughout the City […] houses were thrown open […] all sorts of things placed for general use in the open courts, all comers, whether acquaintances or strangers, […] brought in to share the hospitality. Men who had been enemies held friendly and sociable conversations […] and abstained from all litigation, the manacles were removed from prisoners.

For late antiquity, historians have asserted that the Pestilence of Cyprian, 252 to 266 A.D., incited Romans to persecute Christians. Yet the sources show little evidence of it. For a variety of reasons, Romans threatened to throw Cyprian to the lions, but his abundant surviving letters do not relate persecution of Christians to the plague named after him. Instead, this plague ended the persecutions of Emperor Valerius and inaugurated one of the longest periods of Roman tolerance of Christianity. It lasted to Diocletian’s edict of 303, when a decade-long persecution - Christendom’s bloodiest, the so-called “Great Persecution” - ensued. But no plague was then lurking to trigger it.

The rise of Christianity, nonetheless, brings a new ingredient to the disease-hate relationship. Relying on Old Testament examples, Christian writers could now view plagues positively as God’s vengeance to punish their persecutors. By Paulus Orosius’s account, the Romans understood the plague of 253 as God’s fury against their persecutors, and it prompted an about-face in their policies, ending their half-century of persecution. Similarly, the early fifth-century church historian, Sozomen interpreted the pestilence of 363 as the ‘manifest token of God’s displeasure brought down against Julian the Apostate’s persecution of the church’, and in 409 a plague following Alaric’s siege of Rome was “Divine wrath sent to chastise [the

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81 Livy, 1,31; 40.19; 41.21; 41, pos. 256.
82 See Livy, 3,7, vol. 2, pp. 24-8, in 462 B.C. In several incidences, the Romans offered sacrifices to the gods, and on two occasions these sacrifices specified the inclusion of humans as well as animals. But in no case did our authors, ancient governments, or their populations attribute blame to these victims or to the social or ethnic groups they may have represented.
83 Livy, 4.25.
84 Livy, 5.3.; As with antiquity, so with the Middle Ages, new and mysterious epidemics failed to spark blame and hatred. Instead, they led to charity and created temporary unity rather than division, as with the early Middle Ages’ first pandemic, that of plague, in 541. The eye-witness historian of the Byzantine court, Procopius describes the traditional adversaries of Constantinople unifying in their effort to bury the plague dead, turning to charity or staying at home to tend the sick and the dead.
85 “Plagues of the Roman Empire”, in *Encyclopedia of Pestilence*, II, p. 536.
86 His tract on the plague, *De mortalitate*, pp. 297-314, in *Corpus Scriptorum ecclesiasticorum Latinorum*, III, pt 1: S. Thosti Caecili Cypriani opera omnia, Vienna 1868, describes the signs and symptoms of the disease and claims that “Many of us died from it”, but fails to mention any persecution that supposedly ensued from it. G. Clarke, *Christianity in the first three centuries*, pp. 589-671, in *Cambridge Ancient History*, 12, 2nd ed., ed. by A. Bowman, P. Garnsey, and A. Cameron, Cambridge 2005, nonetheless, conjectures: “One can imagine orders for a public expiation at the plague, at a ceremony in the circus from which the notable figure of the leader of the Christians - popularly blamed for the visitation of the plague through their failure to worship “Roman gods” (p. 647). He supplies no evidence, however, of any such persecution or blame placed on Christians for the plague.
87 Clarke, *Christianity in the first three centuries*, pp. 649-52. The later Christian chronicle of the ten persecutions from Nero to Constantine’s Edict in 313, does not allude to any persecution stemming from the eruption or spread of plague. Instead, the relationship was the other way around: the Romans paid for their persecutions by God’s vengeance, served on them in the form of plagues; see *Orosius: Seven Books of History against the Pagans*, 7.26, pp. 364-366.
Romans] for their luxury, debauchery, and manifold acts of injustice”.89 Yet before the Black Death of 1348, I have found few, if any cases, when a new epidemic spurred a community to persecute the outsider or any social group from within. Agobard, bishop of Lyon, reports a story that circulated around 810: Grimoald IV, duke of the Beneventans, had supposedly sent some of his people to spread a special dust on fields, mountains, meadows, and springs of northern Europe to kill the cattle of his enemy, Charlemagne. Many were apprehended and confessed to have scattered the poisonous dust.90 But this was an epidemic of cattle, not of men, and was a matter of warfare, not of internal anxieties leading to the persecution of insiders or outsiders living within the affected society. In 1172 the Venetian doge claimed that those on their occupied island of Chios (Scio) in the Aegean Sea revolted against tax rises by poisoning wells to kill off Venetian soldiers, but there were no claims of spreading any epidemic other than the poisoning itself. Most significant was the 1321 slaughter of lepers in southern France, partly instigated by the king himself on grounds that they poisoned wells. But, even though this may have been the blueprint for the mass murder of Jews in 1348-51, no new epidemic, a sudden increase in leprosy, or of any other disease sparked the atrocities. Nor do we hear of any other mass riots against lepers during the Middle Ages. Instead, (as Zachary Gussow was first to stress and which the more detailed research of François-Olivier Touati, Carole Rawcliffe, and Luke Demaitre has more authoritatively underscored), the medieval persecution of lepers was largely a myth created by nineteenth-century politicians and governments to justify their own brutal segregation and treatment of lepers.91

By contrast, early modernity with its scientific breakthroughs and rise of naturalistic explanations was a fillip for increased blaming and scapegoating as in times of bubonic plague from the early sixteenth-century to at least the plagues of 1656-1657. As we have seen, accusations, torture, and execution of supposed plague spreaders during these centuries were not limited to cities and alpine plains above Milan, Geneva, and Lyon supposedly susceptible to “ideas and fantasies” of ancient magic tumbling forth from isolated Alpine foyers.92 Instead, such accusations sprang up also in sixteenth- and seventeenth-century Toulouse, Rouen, Palermo, and which the more detailed research of François-Olivier Touati, Carole Rawcliffe, and Luke Demaitre has more authoritatively underscored), the medieval persecution of lepers was largely a myth created by nineteenth-century politicians and governments to justify their own brutal segregation and treatment of lepers.91

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Messina, Madrid, Rome, and other places yet to be studied and their impulse had nothing to do with imported ideas or individuals from backward places outside the city. Instead, university-educated judges and physicians compiled and authorized the accusations, imposed torture and executed the victims. In Milan, where the trials have been best studied, the accusers and judges were Milanese inhabitants, some from its oldest families, and included members of one of Europe’s most advanced Heath Boards, steeped in the latest scientific knowledge about the plague’s contagion.

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Nor did the blaming game abate with the laboratory revolution, and cholera was not the only culprit. To take North America alone: with the Milwaukee smallpox epidemic of 1894-1895, ‘mobs of Pomeranian and Polish women armed with baseball bats, potato mashers, clubs, bed slats, and butcher knives’ patrolled streets against health inspectors who attempted to remove patients to hospitals.93 Similar uprisings occurred at Montreal with smallpox in 1885.94 For Honolulu and San Francisco the disease that caused ethnic tensions and social violence to flare was plague in 1899 and 1900, even though the aetiology of the disease was then known.95 On the east coast, tuberculosis was branded the “Jewish disease”, despite Jews’ previous exposure to it in overcrowded cities of Eastern Europe, which gave them greater resistance to it than those born in America.96 More ironic still, New York City’s Italians, because of their supposed filth, were blamed for the polio epidemics of 1907 and 1916 (a disease of cleanliness).97

These incidents of violence and blame, however, pale by comparison with one disease of modernity and its vilification of ‘the other’: typhus. To quell fears of lice-borne pathogens, German governments from the late nineteenth century to the Nazis quarantined and attacked the poor from Eastern Europe and ultimately the Jews, first with the development of new chemicals to cleanse bodies and defend borders, then with the Nazi extermination of the supposed human carriers themselves.98 Yet by 1909 typhus was no longer a mysterious disease or a demographic threat: instead, by then, it had almost disappeared from Western Europe and from Germany in particular.99 As this last, most horrific nexus of disease and hate shows, neither

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94 S. Craddock, City of Plagues: Disease, Poverty, and Deviance in San Francisco, Minneapolis 2000, p. 108.
95 M. Echenberg, Plague Ports: The Global Urban Impact of Bubonic Plague, 1894-1901, New York 2007, pp. 183-241; J. Mohr, Plague and Fire: Battling Black Death and the 1900 Banning of Honolulu’s Chinatown, Oxford 2005; Craddock, City of Plagues, ch. 4. Plague riots also erupted in other temperate zones as in Porto and Lisbon in 1899 against the Health Board’s stringent controls, cordon sanitaire, rampant disinfection, and destruction of property, with assaults on members of the medical profession and Portugal’s chief medical officer, Dr. Ricardo Jorge; see Echenberg, Plague Ports, pp. 113-29.
97 Ibidem, ch. 4. In New York these epidemics were called the “Italian disease”.
98 P. Weindling, Epidemics and Genocide in Eastern Europe 1890-1945, Oxford 2000, pp.70-71; and C. Roland, Courage Under Siege: Starvation, Disease, and Death in the Warsaw Ghetto, New York 1992: “From the beginning of the war, typhus became the great whipping boy for the Nazis, the rationalization of their ghetto policy, and a “scientific” explanation for the forced isolation of the Jews [...]” (p. 120); also, see pp. 125 and 154.
99 By the 1930s incidences of epidemic outbreak had become the creation of the Nazis themselves, confined to local occurrences within starred Jewish ghettos. On statistics for the decline of typhus in Germany, Poland, Russia and the Ukraine, see Weindling, Epidemics and Genocide, Appendix I, pp. 428-436; on its exaggerated and localized epidemics and the Nazi policies and epidemic outbreak at Warsaw and other ghettos in the early 1940s, pp. 10, 14, 87, 298, 393, 425, 426-427; and Roland, Courage Under Siege, pp. 123 and 127; on Europe in general and Victorian cities in Britain in particular, see A. Hardy, “Urban Famine or Urban Crisis? Typhus in the Victorian City”, Medical History, 32 (1988), pp. 401-425. It is not clear that typhus had such power to ignite hatred in other areas of Europe or the United States in the nineteenth and twentieth century or earlier. With the typhus epidemic in New York City of 1892, blame was placed on the influx of Russian Jews and certain journalists and politicians drew anti-Semitic conclusions, but despite unequal treatment, Health Board officials issued no official proclamations of anti-
an epidemic’s severity, transmission by sex, mystery, nor newness necessarily determined its likelihood to spark mass hatred and murder as historians now assume.

In Conclusion, as far as hate goes the interrelations between society and disease are more complex than presently suspected or than mere mortalities can tell. At least in part, pandemics’ probabilities to stir hate depend on the character of the disease. Secondly, the ‘Other’ needs to be analyzed with greater care. As our analysis demonstrates, epidemics’ cultural toxins afflicted insiders as readily as outsiders. The Jew, the foreigner, the poor or any other ‘Other’ was not always or even most often the butt of disease-inspired hate. Finally, the disease-hate nexus was not a Whig history of progress and civilization. Instead, it was just the opposite: diseases’ cultural toxins became more virulent with modernity, after the explanation of diseases’ causation became more scientific and not less so, as historians post-AIDS presently presume. Epidemics were collective experiences that sparked strong, sometimes chaotic, but also well-channelled, emotions. These have not always been the emotions that our present-day preoccupations would predict. Instead, the emotional life of pandemics had a history, and that history, I maintain, has yet to be written. Our next assignment is to unravel when, where, and why certain diseases have inflicted hate, while others, at least temporarily, have healed deeply-rooted class, ethnic, racial, and religious divides in society. In our current crazy climate of ‘impact’ and the humanities, here may lay an area of current concern where ancient and medieval history has something to teach us.

Semitism, and with the quick decline in typhus deaths, public opinion linking the disease to Russian immigration disappeared; H. Markel, Quarantine!: East European Jewish Immigrants and the New York City Epidemics of 1892, Baltimore 1997, pp. 50, 60, 76.