

A Historical Perspective on Commerce and the Spread of Disease

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Review of: *Contagion: How Commerce Has Spread Disease*; Mark Harrison; (2012). Yale University Press, New Haven, CT. Hardcover, 376 pages.

Throughout history, the spread of contagious disease has been linked with global trade routes. In *Contagion: How Commerce Has Spread Disease*, Oxford University professor Mark Harrison provides a scholarly account of the intimate relationship between the history of infectious disease and international commerce. The concomitant challenges of establishing standardized sanitary regulations that were compatible with the development of free trade are traced along the way. Chronicling the global spread of disease over seven centuries and six continents, Harrison mainly narrates this epic tale using primary source material. Starting with the origins of bubonic plague and ending with avian influenza, specific outbreaks are used to illustrate generalized themes.

Throughout the entire volume, detailed attention is given to the political and economic impact of infectious disease transmission and prevention. Harrison uses many centuries' worth of documentation to show that "Governments have always balanced the prospect of infection against the losses that may result from curtailment of commerce ... [and] that balance has shifted as economies have become more intertwined" (p. xvi). Individual countries wielded public health policies (such as quarantine) as diplomatic tools and even "weapons of war" to gain economic leverage in the international community. Another common theme is the manipulation of scientific evidence to suit policymakers. Medical "experts" were sought who could provide the desired arguments for politically motivated policy decisions. Such decisions regarding sanitary regulations often had little to do with scientific evidence or logic.

The relationship between politics and public health is particularly well-dissected and objectively portrayed with regard to the implementation of sanitary measures such as quarantine. Harrison elaborates on his thesis that the public health policy decisions of countries are determined equally by "diplomatic context" and by the prevailing public opinion. He concludes that, while "all sides appeal to science in an attempt to vindicate their arguments ... there can never be a purely technical solution to the sanitary regulation of trade" (p. 282). At a time when new global epidemics can spread in an instant, Harrison reminds us that, "History shows us that ... trade-related disease is best tackled through a range of measures ... [and] unless we get the balance right ... it is unlikely that we will enjoy

either the security we crave or the commercial freedom essential to our prosperity” (p. 281).

With well over 100 footnotes per chapter and an extensive bibliography, this book is noteworthy for its ambitious scope and objectivity. While *Contagion* will certainly appeal to serious students of the history of medicine, this book may not be suitable for a general audience due to its overabundance of dates, acronyms, and historical minutiae. Unlike many popular science books that bring infectious diseases to life through harrowing personal narratives or fictionalized imaginings, this tome is an exemplary tribute to historical scholarship. All readers will appreciate that the dense text is partially supplemented in two sections with reproductions of paintings, photos, sketches, and original documents spanning the 1500s to the present day. All of these figures are well worth poring over and are accompanied by insightful captions. Instructors may take advantage of Harrison’s extensive research and use specific examples from primary source material to present case studies in public health policy. In addition, some of the figures depicting artwork, cartoons, and public notices may be used as starting points for class discussions or homework. Undergraduate biology students will find this a challenging read, but those who undertake the task will find themselves with a new perspective on our collective history.

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-Ancient disease -Skin and nerve disease caused by Mycobacterium Leprae bacteria -Two forms of leprosy; one is mild and one is more severe. Tuberculoid Leprosy. -Shallow, irregular skin lesions -Some loss of sensation due to damage to nerves in affected areas -More mild -Light-skinned people have reddish patches and darker-skinned people have patches that appear white. -An outbreak of pneumonic plague results in rapid person-to-person spread of Y. Pestis bacteria via airborne transmission -Rats are not required to propagate a plague epidemic once there are cases of pneumonic plague in the population. First Recorded Plague Epidemic. The Columbian Exchange: A History of Disease, Food, and Ideas. Nathan Nunn and Nancy Qian. The Columbian Exchange refers to the exchange of diseases, ideas, food crops, and populations between the New World and the Old World following the voyage to the Americas by Christopher Columbus in 1492. The Old World "by which we mean not just Europe, but the entire Eastern Hemisphere" gained from the Columbian Exchange in a number of ways. A combined history of commerce and disease, and their disturbing propensity for traveling together. Much as we take comfort in the belief that modern medicine and public health tactics can protect us from horrifying contagious diseases, such faith is dangerously unfounded. So demonstrates Mark Harrison in this pathbreaking investigation of the intimate connections between t A combined history of commerce and disease, and their disturbing propensity for traveling together. Instead, we get a history of how free trade advocates have managed to subvert all efforts to halt the spread of disease. In some ways, the problem that Harrison faces is that his chosen topic is chock full of data which is contrary to his sta Subtitle: "How Commerce Has Spread Disease". Yet, a historical perspective of quarantine can contribute to a better understanding of its applications and can help trace the long roots of stigma and prejudice from the time of the Black Death and early outbreaks of cholera to the 1918 influenza pandemic (2) and to the first influenza pandemic of the twenty-first century, the 2009 influenza A(H1N1). pdm09 outbreak (3). In connection with the Levantine trade, the next step taken to reduce the spread of disease was to establish bills of health that detailed the sanitary status of a ship's port of origin (14). After notification of a fresh outbreak of plague along the eastern Mediterranean Sea, port cities to the west were closed to ships arriving from plague-infected areas (15).