REVIEW ESSAY

PLAGUE AND MORE PLAGUES

ANN CARMICHAEL

Indiana University, Bloomington


The coming of the demon of pestilence
Suddenly makes the lamp dim,
Then it is blown out,
Leaving man, ghost, and corpse in the dark room.¹

These two books approach the problem of recurring plagues in Europe with a shared conviction: the catastrophic European epidemics from 1347 to 1722 were not caused by Yersinia pestis, the organism responsible for modern bubonic plague. The real plague can now scare us all over again, reclaiming its garb of sudden, calamitous mortality, unknown and untreatable. Any comfort we took in the modern “conquest” of plague should be set aside.

For Samuel K. Cohn, Jr., the Black Death and subsequent pandemics in the fourteenth and fifteenth centuries were spread by “lightning contagion” (113-14), were extraordinarily virulent, and were characterized primarily by pustules and “boils.” Cohn argues that historians and scientists have long misread survivor accounts; eyewitnesses described a disease that does not resemble modern bubonic plague. He believes that early in the bacteriological era, scientists actively sought to “mould a uniform image of epidemic disease between past and present” (17). Most investigators in the twentieth century followed the same pattern, and Cohn will now undo the error with a close re-reading of late fourteenth and fif-

teenth century sources. Susan Scott and Christopher J. Duncan find modern biomedical evidence a useful analytic tool, not a counterpoint to traditional textual analysis. They hold that epidemiologically early modern plague does not resemble modern plague. They conclude that an Ebola-like virus—a hemorrhagic fever—most likely caused the most lethal earlier plagues. Evidence for such an alternative diagnosis in their view comes not from study of symptoms during the confusing weeks of massive mortality, but in patterns of household deaths during the year before an epidemic. Neither book is positioned within the epistemological debate among historians of medicine during the past twenty years, a debate about whether retrospective diagnosis of the biological causes of past diseases is possible from written accounts. Rather both start from the assumption that the questions about plague's cause have biomedical answers. In other words, both books hold that surviving documents from the centuries of plague in Europe can effectively address the question whether "plague" then had the same biomedical cause as "bubonic plague" since the 1890s.

Despite some overarching similarities in their conclusions, in their uses of original evidence the two books are not commensurate. Cohn confines his analysis to the late medieval and Renaissance periods, concentrating on qualitative assessment of narrative sources, but also drawing from "over 40,000 death documents" in order to provide us some simple graphs of the seasonal variation and high mortality of urban plagues. In contrast Scott and Duncan review the earlier period with numerous hefty quotations from other plague historians, but train their original research on parish records from the northern English rural community of Penrith, in the years leading up to a punishing, protracted epidemic of the 1590s. They stop tracking the plague where most others begin, at the point of crisis mortality 2 to 4 times normal annual death rates.

Neither are the objectives of the two books commensurate. Scott's and Duncan’s objective is to trace the path of plague by showing sequences of parish and household deaths that occurred well before contemporaries were aware of the plague in their midst. Sociologist Scott and biologist Duncan surely distress some hapless readers with their massive array of formulae, epidemiological hypotheses, charts and graphs. Indeed, historians who have ever used these early records may even question the utility of a scientific apparatus that far exceeds the depth of observation typical among early modern village vicars. Duncan and Scott assert