Twitter Thread by Tweeting Historians



Tweeting Historians
@Tweetistorian

Happy Friday! I'm @khowaga, and I'm talking about the social history of medicine and disease in #Egypt. Today's topic is the cholera of 1883. (1/19)

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It goes like this.

According to popular legend, Patient Zero of the 1883 cholera epidemic was a mason in his mid-forties named ■assan N■r-al-D■n, who lived in the port city of Damietta (34,000 people). (2/19)

N■r-al-D■n rarely traveled outside of Damietta, but on the morning of Thursday, June 21, he took the local train to the next major town upriver, Man■■ra (30,000 people) for a weekend trip. The next day, Friday, he began to feel unwell. (3/19)

After a fitful night, he went to the station to return home on Saturday. His condition deteriorated rapidly: on boarding the train he exhibited no symptoms, but by reaching the hamlet of R■s al-Khal■g, about an hour later, he had become violently ill. (4/19)

By the time the train arrived in Damietta, he was so weak that he had to be carried home from the station. He arrived at his house before sunset, died shortly before midnight and was buried promptly the next day, Sunday, June 24. (5/19)

Vital statistical data suggests that N■r-al-D■n--if he actually existed--could not have been Patient Zero, but the story's persistence (it appeared in a government report) is telling: he was an Everyman.

In short, this time it was him, but it could have been you or me. (6/19)

I have a special relationship with the 1883 outbreak. It was my first real deep dive into the history of medicine, and my first experience really starting to understand what a social historian can get out of an epidemic event, so please indulge me for a bit. (7/19)

When cholera first began to spread outward from Bengal--and, at the risk of flogging a European horse, the first wave that went out from India went East, but I've seen more than one current text that says the first wave occurred in the late 1820s and 1830s to the west. (8/19)

ANYway.

When the disease began to appear outside of India, there was immediate concern about the possibility that it would appear along shipping lines. And the British, as the newly dominant imperial force in South Asia, stood to lose the most. (9/19)

You'll remember that when cholera appeared in Britain, local health authorities were accused of using the illness as a means to increase their power. The reaction to this--backed in certain scientific circles--was an insistence that contagion did not exist. (10/19)

The miasmic theory--which held that diseases were endemic to a particular place, and spread through vapors, air, or other as-yet-not understood mechanism--had been around for millennia. (11/19)

Many scientists, even if they believed contagion was possible, continued to believe that some diseases were spread through some localist, miasmic means as yet unidentified. Reports of epidemics were often accompanied by meteorological observations for this reason. (12/19)

However, when presented with the cost of refitting medieval English towns, and the potentially invasive response of mandating vaccines (the debates over the smallpox vaccine occurred at the same time), the idea of localism found political support. (13/19)

Even as British *scientists*, like their colleagues on the continent, became more and more certain of the existence of contagious agents, British policy shifted toward a staunchly anti-contagionist stance. (14/19)

In 1851, the major maritime powers in Europe and the Mediterranean came together at the first of 14 International Sanitary Conferences to standardize quarantine procedures to control the spread of cholera, yellow fever, and other diseases. (15/19)

The Egyptians were represented by the Ottoman delegation as Egypt was technically not independent, but each successive Egyptian government after Mehmet Ali's death in 1849 was clear about its adherence to the agreed-upon international protocols. (16/19)

While Clot Bey himself did not personally believe in contagion, the Supreme Council of Health had always implemented quarantine protocols as a means to assure European trading partners that Egypt was serious about the protection of health and prevention of disease. (17/19)

Britain was a vociferous objector to the implementation of quarantine protocols. Cholera was already present in Europe, the argument went. Therefore, it cannot have come from India--and even if it had done, it was entrenched in Europe, and so there was no point. (18/19)

And so, in June of 1883, with reports that cholera had appeared in Damietta, a port city where ships coming from India often called after exiting the Suez Canal, the British Surgeon General saw an opportunity to settle the issue once and for all. (/fin)

~csr