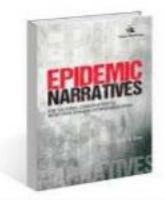
## How epidemics are understood

SAMIR MALHOTRA

ET us be honest: epidemics are chaotically moving events. They rip through societies, unravel economies, and leave behind a wreckage of grief, fear and unanswered questions. But what fascinates some writers more is not the microbes themselves, it is how we try to make sense of them, how we turn them into stories, folktales, films, political propaganda, conspiracy theories. Anything to impose some kind of meaning to the madness.

Rudolf Virchow, the 19th-century physician and reformer, put it best: "Epidemics are a mirror of society, reflecting its inequalities, its fears, and its capacity for both cruelty and solidarity." Dilip K Das seems to take this idea and expands it in 'Epidemic Narratives: The Cultural Construction of Infectious Disease Outbreaks in India'. This is not just a book about disease, it is a book about power, fear and the way we shape reality through the stories we tell about outbreaks.

Reading it felt like time-travelling into a crowded, chaotic archive, where colonial records, newspaper stories and Bollywood films shout over each other, claiming to tell the "real" story of disease. Reading this book in isolation would be unjust, as it appears to enter into a multilogue with many authors of the past. Frank Snowden's 'Epidemics and Society' appears to remind us that pandemics have always reshaped societies. William McNeill's



## EPIDEMIC NARRATIVES: THE CULTURAL CONSTRUCTION OF INFECTIOUS DISEASE OUTBREAKS IN INDIA

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Dilip Das leaves us with a realisation that epidemics, like myths, never truly die. They linger in our collective memory

'Plagues and Peoples' traces the deep history of disease as a force of civilisation itself. And then there's Albert Camus' 'The Plague', which I happened to read during the early days of Covid-19, an experience that made Das' book feel eerily familiar. A fascinating part of the book is the author's argument that epidemics are understood through two competing lenses: the biomedical-realist view that sees disease as a clinical event, with transmission rates, vaccines and containment strategies; and the cosmological-mythic view, which considers disease as a supernatural phenomenon, divine punishment, or an omen of social collapse.

India, he argues, exists at the crossroads of both worlds. And he is right. We saw this in real-time during Covid-19. Some waited for vaccine rollouts, obsessing over epidemiological data. Others turned to home remedies, rituals, WhatsApp-fuelled conspiracies. Das traces this split through history — from the Bombay plague of 1896 to the stigma surrounding HIV/AIDS in India. To be fair, most of the world was not too different.

As a medical professional, I have always seen immunity as a biological concept — antibodies, resistance, viral loads. But Das expands it into something bigger, something unsettling. Societies, he argues, also build immunity, not just to disease, but to misinformation, fear, and even political manipulation. And then there's autoimmunity, a term we usually associate with the body attacking itself. Das flips it into a political metaphor. Societies in crisis, he suggests, often do the same thing: they turn inward, turning on their own people, blaming the sick, scapegoating minorities. We do not have to look far for examples. We saw it during Covid-19,

when fear turned neighbours into enemies and misinformation became pandemic.

Das' biggest strength? He pulls from everywhere — history, literature, films and public health — tying it all together in a way that works well. The chapter on the Pune plague and its ties to colonial paranoia captivates. His breakdown of HIV/AIDS as a "moral disease" in Indian media infuriates. His analysis of films like 'Ganashatru' and 'Virus' is an interesting take.

Despite its insightful analysis, 'Epidemic Narratives' is not the easiest read. The academic language and the dense, and too lengthy, paragraphs can be daunting. While the literary and cultural critique is brilliant, I would have appreciated a deeper dive into policy implications and real-world public health interventions (that is probably because of my background).

But maybe that is the point. Epidemics do not follow neat patterns, and neither does this book. What Das leaves us with is a realisation that epidemics, like myths, never truly die. They linger in our collective memory, and return in new forms — sometimes as pandemics, sometimes as political rhetoric, sometimes as cultural anxieties. I closed the book with more questions than answers. But that is a good thing. Because if there is one truth about epidemics, it is this: while we are still writing the story, more of them are lurking around. Das reminds us that who gets to tell it, and how, matters more than we think.

 The writer is HoD, Pharmacology, at PGIMER, Chandigarh