

Germ Theory Temporalities and Generic Innovation in Neo-Victorian Fiction

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Abstract:

By representing the microbe as a force that catalyses antagonistic and amicable connections between peoples of different nations, Matthew Kneale, Sheri Holman, and Anne Roiphe put forth the idea that the (neo-)Victorian germ serves as a force to facilitate prioritising global health over the issues of individual nations. Conceptualisations of the microbe in their novels reflect current medical and political rhetoric on bioterrorism and 'killer' viruses. And because of their revamped conceptualisations of the germ, texts such as *Sweet Thames* (1992), *The Dress Lodger* (2001), and *An Imperfect Lens* (2006) transcend the traditional neo-Victorian novel genre to comprise a nascent category I call global contagion fiction. Furthermore, since both British and Americans have 'travelled' to the Victorian era via their authorship and readership of this literature, this generic subcategory can also be thought of as transatlantic as well as transhistorical. Global contagion fiction is a co-production of British and American authors not writing as representatives of their respective contemporary literary traditions but as transatlantic citizens of superpowers equally intrigued and threatened by globalisation and the rise of bioterrorism.

Keywords: bioterrorism, contagion, cholera, disease, epidemic, genre, medicine, 9/11, Thames, transnational.

By representing the microbe as a force that catalyses antagonistic and amicable connections between peoples of different cultures and nations, neo-Victorian authors posit the (neo-)Victorian germ, for better and for worse, as an agent of proto-globalism. Conceptualisations of the microbe in this fiction do not simply echo the terms of nineteenth-century germ theory, but also, and perhaps more importantly, reflect current medical and political rhetoric on bioterrorism and 'killer' viruses. Such twenty-first-century representations of nineteenth-century epidemics, I further contend, often render neo-Victorian contagion fiction an allegory of the modern threat of infectious illnesses. The fight against Victorian germs in neo-Victorian

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fiction thus takes on new importance for contemporary readers who recognise the dangers of germ warfare present in their own era.

Via its depictions of nineteenth-century conceptualisations of the germ, neo-Victorian fiction has itself undergone a larger generic transformation. In seeking to replicate the hallmark settings, personas, issues, and prose of the nineteenth century, neo-Victorian literature clearly constitutes a form of the historical novel, which, as Lukács famously argued, can be differentiated from the costume drama in its commitment to representing regular people of little distinction who struggle with the changes wrought by larger national and social events, such as political regime changes, economic crises, and armed conflicts. Thus, if, as Perry Anderson notes (via Lukács), the classic historical novel is “an epic depicting a transformation of popular life through a set of representative human types whose lives are reshaped by sweeping social forces” (Anderson 2007: 24), then one of those reshaping “forces” depicted in neo-Victorian fiction is arguably the fear of epidemics and pandemics. As Ann Heilmann and Mark Llewellyn argue, neo-Victorian fiction “is *more than* historical fiction set in the nineteenth century” (Heilmann and Llewellyn 2010: 4); inevitably it also dramatises present-day concerns. Indeed, “neo-Victorianism represents a wide range of experimentations” (Heilmann and Llewellyn 2010: 32), and this essay calls specific attention to the generic innovations made by certain neo-Victorian texts oriented around the theme of infectious disease. Novels such as Matthew Kneale’s *Sweet Thames* (1992), Sheri Holman’s *The Dress Lodger* (1999), and Anne Roiphe’s *An Imperfect Lens* (2006) do adopt and adapt Victorian contexts, but this temporal transposition is designed to rehearse and revive contemporary debates as well as to afford new lives (or afterlives) to period characters and concerns. More specifically, these novels’ representations of epidemics, like their reconfiguration of the germ, suggest twentieth- and twenty-first-century anxieties stemming from the threat of bioterrorism as well as from global pandemics of ‘new’ illnesses, such as Ebola and the West Nile virus, and ‘old’ diseases, such as influenza, strains of which have evolved to be resistant against modern drugs.

This essay will explore how certain novels, through depictions of infectious disease, transcend their ‘home’ genre of neo-Victorian historical fiction and collectively gesture toward the inauguration of a new generic category: global contagion fiction. Furthermore, because both British and

Americans have ‘travelled’ to the Victorian era via their authorship and readership of neo-Victorian literature, this nascent genre can be thought of as both transatlantic and transhistorical. Global contagion fiction, I contend, has and will continue to emerge as a co-production of British and American authors writing less as representatives of their respective contemporary literary traditions and more as transatlantic citizens of past or present superpowers equally intrigued and threatened by globalisation and the rise of bioterrorism. In simultaneously rendering the past present, and the present past through the lens of infectious illness, neo-Victorian novelists such as Kneale, Holman, and Roiphe therefore also contribute to a new tradition of global literature shaped by transnational rather than national concerns.

Why should the nineteenth century, however, serve as such a crucial setting for playing out the issues of this nascent category of global literature? How did the Victorian period become the backdrop for exploring contemporary concerns about contagion? In addition to the fact that nineteenth-century Britain was rife with various epidemics (cholera, smallpox, yellow fever, etc.) and therefore provides a realistic arena for fictional accounts of those illnesses, this era more importantly saw robust interest and research into the source and treatment of contagious disease. Advances in germ theory and discoveries about the nature of illness and its transmission did not, however, emerge solely from the elites of the medical and scientific professions. In some cases (for example, the early eighteenth-century inoculation campaign of Lady Mary Montagu-Wortley), these developments were the product of intense lay efforts to eradicate illness. Just as infectious disease permeated all socio-economic classes, so too was the task of controlling its transmission and developing a cure taken up by individuals from all levels of society. Collectively these actions can be seen as a mass – albeit often unintentional – collaboration between nineteenth-century Britons to purge their nation of illness.

In spite of what was arguably a cross-class, cross-gender, cross-social, and cross-cultural fight against contagion in the Victorian era, this period is commonly considered a time in which strict social codes governed interpersonal, particularly inter-sex interactions. (Neo-)Victorian character couplings in literature that involve parties from significantly different social backgrounds are particularly intriguing to modern Western readers who (despite critical backlash) continue to associate the era with restriction,

division, and restraint, and who, as a result of living in multi-cultural societies, have been sensitised to the influence of class, race, gender, and religion on interpersonal interactions.¹ Just as much contemporaneous Victorian fiction drew upon these themes in ways that attracted (and continues to attract) a large readership, so too does contemporary neo-Victorian writing. Landmark neo-Victorian novels such as John Fowles' *The French Lieutenant's Woman* (1969) capitalise on the appeal of these heterodox heterosexual alliances; indeed, Fowles' text can be considered the first to present the fallen woman/scientist/upper-class-fiancé triangle via its depiction of the aspiring social outcast Sarah Woodruff, paleobotanist upper-class gentleman Charles Smithson, and the virginal, middle-class beauty Ernestina Freeman. Moreover, because modern readers are increasingly acquainted with and have often come to expect greater violence and drama, neo-Victorian authors in the wake of Fowles continue to 'up the ante' in their period representations. As this essay will show, subsequent global contagion (née neo-Victorian) fiction texts feature heterosexual coupling narratives that revolve around characters occupying polar ends of the class spectrum but then intertwine these plots with equally intense representations of illness, so as to titillate the contemporary reader with the dangers of desire as well as the dangers of disease.

Most importantly, the dual contemplation on perilous love/lust and loathsome plagues found in global contagion fiction is fitting, because the 'end of days' apocalyptic atmosphere that epidemics tend to engender make such unorthodox relationships comprehensible if not permissible. With the onset of contagious illness in neo-Victorian fiction there is fear but also hope for a new world order in which persons of disparate backgrounds might more readily come together socially, professionally, and even romantically. Disease can be desirable for the class revolution it inspires. Even though works such as *Sweet Thames*, *The Dress Lodger*, and *An Imperfect Lens* are influenced by the fear of the mass destruction caused by epidemics, these texts also gesture toward the positive possibilities latent in the eradication of certain social structures and institutions.

1. **Modelling the Contagion Narrative in *Sweet Thames***

With its titular reference to T.S. Eliot's 'The Waste-Land', *Sweet Thames* suggests as its setting a helter-skelter world defined by a cacophony of social, economic, and biological forces.² Eliot's application of the

descriptor “sweet” to Britain’s major river invokes pleasant nostalgia; however, in the context of Kneale’s neo-Victorian novel, the juxtaposition between this particular noun and adjective is far more jarring. Nineteenth-century denizens would be hard pressed to describe the Thames as either literally or figuratively “sweet”; reactions to the capital’s main water source ranged from the bitter to the abhorrent. Furthermore, Britons were under no delusion that the river running through their capital was salubrious, though conceptualisations of the river’s deleterious effects on the body varied according to the critic’s understanding of microbes and sanitation. The Thames’ complex role in the lives of Londoners, as a source of hydration and sickness, employment and entertainment, transport and habitation nevertheless made it take on a life of its own in the world of the capital.

Contemporaneous literature accordingly reflected the river’s diverse functions, and authors, notably Charles Dickens, capitalised on its enormous thematic fiat.³ Neo-Victorian fiction accordingly follows suit, with authors such as Kneale affording the Thames a prominent role in their writing. Representations of the river in *Sweet Thames*, particularly its putrid stench, have led Marie-Luise Kohlke and other critics to assert that the body of water “serves as a resonant metaphor for the sordid underbelly of Victorian respectability and the neo-Victorian’s ‘tunnelling out’ of our nineteenth-century predecessors’ secrets, vices, perversions, and illicit desires” (Kohlke 2010: 251).⁴ For Rosario Arias, *Sweet Thames* exemplifies how neo-Victorianism “relishes deconstructing sanctioned versions of the sanitized past” (Arias 2009: 154). I accept that the interjection of this generic element is part of a neo-Victorianist movement to undermine historically sanctioned conceptualisations of desire and disease in the nineteenth century. However, I also believe Kneale’s novel sets a precedent for future neo-Victorian novels dealing with contagion by establishing cross-class sexual tension as a necessary component to infectious disease epidemiology.

While Holman and Roiphe fully flesh out the complications of such triangular relationships in *The Dress Lodger* and *An Imperfect Lens*, respectively, Kneale lays a simple foundation for further generic development via his depiction of the Joshua Jeavons/Isobella Moynihan/Katie the Prostitute triad. In Jeavons, Kneale presents a model for the man-of-science protagonist, which in *Sweet Thames* is made manifest in the young engineer who aspires to purge the capital of dangerous effluvia by remodelling the sewage system. Jeavons’ motivations are influenced by a

sincere concern for public health as well as by his own personal ambitions, for he sees such a technological feat as facilitating his social and professional ascendancy. Despite having 'married up', Jeavons still faces continuous emasculation from his wealthy father-in-law Augustus Moynihan (also his boss), who initially rejects the former's proposal to marry his daughter Isobella on the basis of the young engineer's socio-economic inferiority. Moynihan eventually consents to the marriage, but Jeavons' new wife Isobella exacerbates her husband's nuptial insecurities by refusing to consummate their marriage. In the face of these pressures and via a sort of sublimation of sexual desire, Jeavons attempts to become the hero not just of his own story but also for mankind by introducing a new drainage system that would curb the outbreaks of infectious illness. This struggle for professional and public improvement is a quest also taken up by other protagonists of neo-Victorian fiction, who combine aspects of two characters common to Victorian fiction: the 'self-made' man who aspires to rise to a greater socio-economic position through industry and ingenuity, and the scientific man of feeling, whose special interest and sensitivity to the natural world are reflected in his individual intellectual pursuits.

From this intersection of capitalist ambition/self-promotion with sincere concern for scholarship thus emerges the neo-Victorian scientific/medical hero whose struggles resonate with the twenty-first-century cultural emphasis on a profession as a vocation rather than as a mere means of employment. Accordingly, Jeavons emphasises to the reader: "You must understand that the drainage of the metropolis was not a mere question of work, or professional advancement. It was a mission to me. A passion" (Kneale 2001: 21). As a scientific hero, Jeavons believes he is called to take on certain endeavours whose completion is in service to a public as well as personal good. And this public good need not be confined to the realm of health, for Jeavons sees the opportunity for economic improvement in his designs for a new metropolitan drainage system:

Indeed, I saw it a little less than a *double* salvation for the metropolis. Not only would the streets be cleansed – the wound healed – but the sale of the effluent to farmers would bring in a substantial income, reducing the burden upon rate-payers, and so adding to the wealth of the citizenry. (Kneale 2001: 21, added emphasis)

Public health gives rise to public wealth; such is the message promoted by Kneale's narrator and other global contagion fictions through their chronicles of the protagonist's quest to eradicate an infectious illness. Furthermore, the bounds of this 'public' transcend the hero's local or even national community. Because of his particular interest in epidemic diseases that spread quickly across borders, the neo-Victorian scientific/medical hero by implication has a responsibility to and effect on world health. Whether or not characters such as Jeavons aspire to improve the living conditions of everyone on the planet is irrelevant; their involvement in infectious illness necessarily imbricates them in an international struggle against germs.

Kneale inaugurates another generic feature that recurs in later neo-Victorian contagion texts: the repeated thematic representation of some specific aspect of the featured disease. In *Sweet Thames*, the motif of liquid serves as a reminder to the reader of the ubiquitous threat of cholera by gesturing toward the extreme purging and eventual life-threatening dehydration caused by the disease. In addition to its continual references to the river Thames itself, the primary body of liquid that serves cleaning, consumption, and contamination purposes, *Sweet Thames* is also flooded with images of other smaller effusions, such as the adulterated spirits flowing from gin palaces, the sticky molasses generated by the entrepreneur Harold Sweet, and the olive oil force-fed to Miss Symes, the Jeavons' servant, to arrest her vomiting. This misguided cure and other more nefarious representations direct the reader to the most dangerous liquid of all, the 'effluvia' Jeavons hopes to ward off via a renovated sewage system. Throughout most of the story, Jeavons and others believe these 'effluvia' harmful due to their capacity to generate 'miasma,' which, when breathed by the unsuspecting masses, sickens their bodies.

When Jeavons finally realises the cholera contagion to be water-rather than air-borne, he redirects his efforts to removing contaminated water sources in various areas of the city. The idea that transmission of cholera occurred through water rather than air was not, however, conclusively proved or widely accepted until the end of the nineteenth century, that is to say, far beyond the novel's temporal setting.⁵ Rather than allowing the reader a voyeuristic, imaginative experience in which he, like the characters, attributes cholera to bad air, Kneale uses thematic measures to ensure his audience is not completely immersed in false nineteenth-century rhetoric. By invoking a disproportionate number of liquid as

compared to air-related images (e.g., clouds, fog, smoke, vapour), the author purposefully interjects his twenty-first-century scientific understanding into the (neo-Victorian) world. *Sweet Thames* thus achieves a didactic function by educating as well as entertaining the modern reader as to the 'facts' of contagion, and this epidemiological education is important if the novel is to impress upon its audience that infectious illness continues to be a serious threat.

Jeavons does not have access to this modern knowledge, and only gradually comes to an incomplete understanding of contagion transmission. For the majority of the novel, his focus lies on his sewage renovations. His "Effluent Transformational Depositories" would mean another 'double salvation', in this case for the inventor himself, because professional public success is so intertwined with his personal, private happiness (Kneale 2001: 103). Although the introduction to his retrospective narration is devoted mostly to background on his engineering innovations, Jeavons nevertheless recognises, "What is my story? Most of all it is the search for my wife. And where I eventually found her" (Kneale 2001: 22). With this admission, Jeavons lays the groundwork for a scientific-heterosexual 'romance' plot, the novel's initially parallel, eventually intersecting narratives of vocational and emotional/sexual fulfilment. Jeavons finds himself in the midst of a double search, first, for the figurative origin of the cholera contagion and then, for the literal location of his missing wife.

Both searches terminate in unexpected places that challenge the hero's assumptions concerning cultural and scientific boundaries. With regard to contagion, Jeavons initially designates foul miasma as the source of its proliferation:

A smell of effluent hung in the air, rising up from some badly built drain, seemingly stronger since my unintended arrival in the district. I sensed the odours as in some way feeding the criminality above, acting as a fertilizer of evil, luring me to misadventure. (Kneale 2001: 24)

In associating the noxious effluent with the impoverished district, the engineer posits a *causal* link between contagion and moral degeneracy. His realization, however, that depravity and disease in fact enjoy a *correlative* relationship fittingly comes not from his own professional application of the

scientific method under safe and sanitised conditions, but rather from his own descent into poverty and bout with cholera.

Subsequent to being forced to take up quarters in the lower-class, disease-ridden district of the city, Jeavons encounters a fellow resident who accuses him of contaminating their water supply: “Got your poison, has you, mister snoot? Yer poison that you’ve ben shovin’ into our wells, that we’ll all drop dead of Cholera?” (Kneale 2001: 255).⁶ Although Jeavons initially dismisses the assertions of this non-professional, the engineer gradually sees the undeniable truth in the man’s observations: “Thus, on that drizzly early September morning, in a slum street, threatened by a wild-eyed madman of a vagrant, I found myself converted” (Kneale 2001: 256). That such understanding should come to Jeavons indirectly through his economic descent and directly through his interactions with a common “vagrant” challenges the idea that scientific knowledge is confined to certain spheres and/or carried by upper-class intellectuals. Jeavons’ transformation from healthy middle-class scientist to unemployed sick pauper catalyses his enlightenment, for, as he tells Mr. Sweet, “I *do* know these people. Indeed, I am one of them. You must know that I myself have lately suffered the Cholera – and – thanks to your rulings, no doctor would come” (Kneale 2001: 263). But perhaps even more importantly, such moments in the text speak allegorically to the fight against infectious illness in the modern world by implying that the fight against contagion requires contributions from a spectrum of socio-economic classes. Lay patient perspectives as well as those of professional scientists are necessary to understanding the full impact of infectious illness and, subsequently, to minimising its fallout.

Emotional and sexual catharsis is similarly achieved by crossing social and economic spheres to receive help from unorthodox acquaintances. Jeavons’ second search, that for his missing wife, gains momentum after he seeks the assistance of various street characters, including a dog-seller who eventually leads him to Isabella’s temporary quarters in a warehouse slum. In a cruel (and rather incredible) twist of irony, these quarters are directly next to the bedroom of Katie, the engineer’s favoured prostitute. This discovery only reinforces the idea of permeable spaces and the fallacy of certain economic, social, familial, and physical boundaries. When Jeavons locates his wife dressed in a “cheap scarlet dress” in her father’s home, the chastened scientific hero finally understands his wife’s self-imposed connubial separation (Kneale 2001: 304). Her anxieties about sharing his

bed, in effect merging their respective personal spaces, had less to do with a particular aversion to her husband and more with prior sexual abuse she suffered at the hands of her father:

I looked from her to Moynihan, from Moynihan to her. So it was he. Had always been he, from the first. Even before I had met her. Strange to say, it was as if part of me had known all along, as if half the summer's madness had sprung from this alone. My fevered work to transform London. (Kneale 2001: 305)

In addition to acknowledging again the link between his scientific and romantic struggles, this speech also suggests Jeavons' latent repression of the fact that answers to both problems could be found at 'home'. Jeavons learns that the locus of the cholera contagion is the well in his very neighbourhood, just as the catalyst for his marital troubles proves not some outside male competitor but rather his wife's father.

Furthermore, this realisation implies that the period's focus on 'foreign' contaminants as the cause of disease is misdirected. Here again Kneale's modern knowledge of cholera intervenes to suggest the folly of assuming contagion is necessarily imported. Any country is susceptible to epidemic illness because all peoples have the capacity to generate contagion; infectious disease is therefore a unifying and equalising issue among nations as well as classes. In the nineteenth century, for example, cholera ravaged multiple countries and raced across five continents. London alone experienced multiple epidemics, with the first major outbreak occurring in 1831; subsequent events occurred from 1848-1849, 1853-1854, and 1866-1867. The United States similarly experienced devastating epidemics along its Eastern seaboard in 1832, 1849, and 1866. And the disease did not confine itself to Western nations. Despite being known as 'Asiatic cholera' (and accordingly attributed to the peoples of that continent), cholera was more often spread in the East through British military campaigns (Carpenter 2009: 38). Subsequent colonial projects, especially the construction of railroads in Southeast Asia also facilitated transmission. The Indian subcontinent in particular saw the spread of the disease expedited through British imperialism. Mary Carpenter, citing

David Arnold, has pointed out that in studies of medicine and epidemic disease in nineteenth-century India,

it has become so customary to employ military metaphors such as “attacks” and “invasions” to epidemic diseases, or to their “conquest” by science, that “one could easily overlook the literal correspondence between cholera and military power in colonial India”. (Carpenter 2009: 38)

By characterising cholera as an abstract minority rebel presence that ‘attacked’ a country, such written accounts reinforced the disease’s link to disempowered groups within the larger nation, such as immigrants, ethnic minorities, and colonial subjects. The identities of these different marginalised communities sometimes even merged with those of the undesirable classes as fear spread among the populace; for example, Pamela Gilbert has explored how in Victorian England “[working class] cholera victims were seen as akin to Indians who ‘produced’ the disease” (Gilbert 2009: 132), rather than its innocent victims.

Although *Sweet Thames* specifically concerns the 1848-1849 outbreak in the British capital, inserts of advertisements for various ‘cures’ attributed to different nations (modelled closely on authentic Victorian versions) further emphasise cholera as a global issue. These letters and articles outlining methods of treatment from Spain, China, and the United States are often interjected in the middle of dramatic dialogue between characters on relatively parochial concerns as a means of preventing the reader from conceptualising the disease as a problem limited to the fictional space of the novel. By presenting these prescriptions as “Spanish,” “American,” and “Chinese”, Kneale also shows the reader that international anxieties about cholera did not necessarily inspire cooperative efforts. Western countries were loath to take any share of the blame for the transmission of cholera, preferring instead to shift responsibility almost entirely to less technologically advanced and/or ‘dirtier’ peoples and places (Kneale 2001: 81, 123, 133). However, these same countries were also determined to monopolise credit for successfully combating the disease. Offering an effective treatment would demonstrate a nation’s medical prowess, and thereby reinforce its position within the global power hierarchy. Competition for ownership of ‘the cure’ thus grew as it became

apparent that the fight against cholera had significant geopolitical as well as humanitarian stakes.

By placing Jeavons' personal and local struggle to beat out other engineers in the metropolitan renovation competition in the context of the larger global effort to eradicate disease, Kneale forces the reader to acknowledge that the implications of contagion extend far beyond the nineteenth-century world of *Sweet Thames*. Such recognition stems from the fact that cholera, a terrifying albeit virtually extinct epidemic illness, shares characteristics with 'newer' infectious diseases, such as SARS and the West Nile virus, and thus enables the fictional neo-Victorian London setting to serve as a metonym for the twenty-first-century real world. Jeavons' concluding admonitions reinforce the novel's agenda to reach beyond the bounds of its own temporality:

If I have learned anything from my summer of discoveries, it is that the more accepted and widespread a notion, the more fiercely it should be suspected [...]. Readers, guard yourselves, I urge you, against the toxic slumbers of unanimity. Seek, instead, that most dazzling of prizes; to see through the delusions of your own time. Every generation has its vanity, its scorn of preceding eras, and its determination to be the first – or last – example humanity of real distinction. (Kneale 2001: 311)

Through his protagonist's final monologue Kneale argues that reading neo-Victorian fiction should not be an exercise in self-congratulation, i.e., a means by which to experience satisfaction about how advanced *we* are *now* and how 'backward' *they* were *then*. The nineteenth-century world of *Sweet Thames* is a past that has not yet passed, if we consider that some of the ideologies and behaviours of its residents provide patterns repeated in our own era. As I have argued, the novel achieves its relevancy to the modern reader by serving as a retrospective allegory for the current threat of global pandemics. Like the Victorians, we are susceptible to the trappings of our time period, that is to say, the widespread stereotypes and biased 'facts' about contagion proffered by some twenty-first-century thinkers. *Sweet Thames*, however, offers individual thought as a means of combating contemporaneous epistemological conventions. "You will not fully escape

the influence of your own time – that is an impossible hope,” warns Jeavons, “but, if you trouble always to find your own thoughts, you may just rise above the fog of its more ludicrous imaginings” (Kneale 2001: 311). Every era generates its own “fog”, that misleading miasma that distracts one from the truth; what we can learn from rehearsing the Victorian era in novels like *Sweet Thames* is the value of interrogating our own temporality.

2. Heterodox Albeit Healthful Alliances in *The Dress Lodger*

In *The Dress Lodger*, 1840s cholera-stricken Sunderland rather than London serves as the backdrop for the intersection of narratives of ‘romance’ and scientific collaboration. Holman’s imposition of this specific Victorian setting creates an apocalyptic urban atmosphere that not only exposes the desirability of cross-class couplings, but also suggests that the resolution of epidemics hinges on partnerships that mix genders, social ranks, and educational levels. As in *Sweet Thames*, the pursuit of contagion and the pursuit of companionship intertwine when the prostitute Gustine and the physician Henry Chiver try to find emotional and vocational satisfaction in combining their knowledge and possession of human bodies (including their own). While Holman similarly features her scientific hero in a sexual triad (the third member being Audrey, Chiver’s middle-class fiancée), she also complicates these relationships by positing the disease itself as part of another, more significant ‘love’ triangle.⁷ In her novel, *cholera morbus* emerges alongside Chiver and Gustine as a silent but deadly co-protagonist, a character whose functions include comic relief, moribund entertainment, tragic intervention, and social pathos. Furthermore, as an object of comparatively more intense passion, the germ emerges as the third party such that the more prominent emotional triangle in fact is composed of man, woman, and disease. Whereas in Kneale’s *Sweet Thames* this triangular relationship assumes a conventional form in comprising all humans, in Holman’s novel, the competitive presence of cholera as a character effectively edges out the sweet but effete Audrey in the triad. Despite its diverse roles and instantiations, the germ’s existence is still continually challenged by some members of society. In its depictions of the medical hero and infectious disease, *The Dress Lodger* thus chronicles a doubly paradoxical interaction: the simultaneous pursuit and evasion of the microbe as well as the struggle to both affirm and eradicate its very being.

As a disease that claims victims of various social classes, cholera provokes, and perhaps demands, a similarly heterogeneous combatant. The relationship between Gustine and Chiver thus represents the union of lay and professional, female and male epistemologies in a way that suggests that the fight against contagion requires a heterogeneous coupling of different gender perspectives and life experiences. If Holman's novel represents modern concerns about the threat of global pandemics, then the Gustine-Chiver partnership implicitly makes the case that eradication of modern infectious illnesses requires similar cross-socioeconomic efforts. The relationship between Chiver and Gustine exemplifies how epidemic disease can give rise to sensational entertainment as their clandestine interactions chronicle the development of the 'romance' plotline.

In *The Dress Lodger*, attraction between man and woman is so intertwined with the obsession with contagion that the success of the former seems dependent on the resolution of the latter. Unlike Jeavons and Katie in *Sweet Thames*, Chiver and Gustine have slept together prior to the beginning of the novel and this pre-coupling of the male and female protagonist eliminates the need for any sort of 'courtship' narrative. Without such a narrative, the novel can focus immediately on establishing the connection between the man-woman pair and the germ. Because Gustine and Henry's relationship comes to be defined in terms of their connection to and investment in disease (cholera) and disability (the exposed heart of Gustine's infant son), their interactions, however fraught at times with sexual tension, are irrevocably ensconced in a professional-platonic context. As prostitute and physician, respectively, Gustine and Henry are vocationally linked to the body, and both contribute different knowledge to the investigation and treatment of disease. Their material transactions are accordingly oriented around contagion; whereas other heterosexual (neo-)Victorian couples might exchange handkerchiefs, jewellery, nose-gays, and letters, Gustine and Henry trade in bodies, drugs, and medical care.

In return for money, attention, and care for her child, Gustine proffers more than just her own body to Chiver (and others); she also procures corpses for use in his laboratory and experiments. Henry accepts these offers with hesitation since both forms intensify his ties to the prostitute and in effect weaken his more respectable professional and personal attachments, including his engagement to the wealthy Audrey. Chiver's reluctance about his developing partnership with Gustine also has

pathological roots, for he considers such interactions detrimental to his physical as well as social/vocational health:

From the moment [Gustine] came into the bar, he'd felt a thin sheen of sweat break out upon his brow, as if she were calling some fever out his chest, down his shirt, and between his legs; now he can hardly wait to get home, draw a hot bath, and wash this whole evening away. But of course, he can't go home and take a bath – his students will be there. (Holman 2001: 39)

Chiver's wish to "wash this whole evening away" reflects his need to purge himself of the moral and physical contamination incurred by liaisons with a 'dirty' woman, a low-class prostitute such as Gustine. This conflation of sickness with sexual excitement is in itself not unusual, as amorous passion was frequently metaphorised as fever in Victorian writing, particularly in sensation fiction (see Gilbert 2005: 10, 99, 105, 119). What is more significant is that this suggestion of Gustine as the source of illness figures her as a type of contagion. Although professionally, emotionally, and sometimes, sexually, Chiver benefits from his association with Gustine, he counters its advantages with the disadvantage of his (perceived) physical deterioration. "He can't go home and take a bath" in light of his pedagogical responsibilities and thus resigns himself to tolerating this contamination for the greater good of medical study. Indeed, his concerns about Gustine as a carrier of disease are not entirely irrational, for she ultimately takes revenge against the erring physician by deliberately infecting Audrey with cholera.

The eradication of infectious illness in *The Dress Lodger* is therefore not only contingent on the partnership between persons of different genders, classes, and vocations, but also involves bodily sacrifice. Gustine's physical contributions, however, certainly outweigh those of Chiver, for not only, as previously mentioned, does she offer her and others' bodies for his sexual and vocational satisfaction, but also eventually loses her child in Chiver's pursuit of medical knowledge. The physician first plans to have the child legally removed from Gustine, and then, following its death, steals its body. This baby, with its "working heart beating on the outside of its chest" (Holman 2001: 66), its cardiac organ literally located outside the body, symbolises innocence and fragility.⁸ Gustine may not 'wear her heart on her

sleeve', but the fact that her child wears it on his breast suggests the family is simultaneously weakened and empowered by the continued exposure of this metaphorical organ of passion. The external heart certainly endangers the child, but it also provides the means for its survival. Audrey, who "[had] never seen anything like it. Never in her years of visiting. Nor in her hospital work. Nor even in Henry's textbooks", relates her discovery of this phenomenon to her fiancé (Holman 2001: 66). Chiver then beseeches Gustine to give the child to him:

Ever since I left Edinburgh, I have been searching for something that might recall me to life. I long to leave death behind, but I knew no other way. Now I have found this child, and with a single visible beat, his heart can teach me more than all the cadavers in Sunderland. (Holman 2001: 180)

In Gustine's baby Chiver sees the key to his own professional and personal salvation, a means of proving himself to peers and the father of his fiancée. He is careful, however, to emphasise the advantages such an arrangement would bring to the baby, even accusing Gustine of being "selfish" for denying her son a chance of a "life [that] would be better than anything [she] could provide" (Holman 2001: 199). Gustine's demanded 'donation' of her child is figured as a necessary sacrifice both for the survival of the baby itself and the advancement of medical science (and, by extension, Chiver). Moreover since Chiver would "recompense her handsomely" for her son, Gustine's existence, too, comes to hinge on this exchange (Holman 2001: 180). This transaction does not come to pass, at least not on the 'beneficent' terms initially described by Chiver, who eventually steals the infant's corpse after it dies, its mother having refused to give up her child.

This sorrowful turn is not unprecedented in a novel that is coloured, literally as well as figuratively, by dreary death and somatic sacrifice. While *Sweet Thames* deploys liquid imagery as the thematic representation of cholera, *The Dress Lodger* evokes the disease through the colour blue. This hue marks the persons and objects which provide the means for scientific research, uplift from poverty, economic survival, and the removal of contagion. Gustine's pristine pale "face and exposed arms [...] the colour of cooling milk, faintly blue in the bucket" and the blue silk gown on loan

from her landlord is what differentiates her from other, more pedestrian prostitutes and attracts the attention of refined clients like Chiver (Holman 2001: 6). Following an unsavoury association with the body-snatchers cum murderers Burke and Hare during his studies under Dr Robert Knox, Chiver “found himself telling this strange blue girl everything about himself”, most specifically his anxiety over failing to secure a cadaver for his students (Holman 2001: 33). The “bold, blue prostitute” connects him not just to the bodies of suicide and drowning victims, blue from their recent exposure to the freezing Wear, but also to the child with “a raised blue bruise shimmering under nearly transparent skin”, that is to say, the exposed beating heart (Holman 2000: 49, 66, 180). All those persons tinged with blue gesture toward its most chilling instantiation: the ‘blue death’ or cholera morbus, for it is in the terminal stages of this illness that the victim turns a deep bluish colour as a result of severe dehydration.⁹ That other *living* bodies (the baby with “blue bruise”, Gustine, the “strange blue girl”) are at least partially marked by this colour denotes their occupation of some liminal position between healthy life and violent death. Henry Chiver’s continual interactions with these bodies in his quest for greater scientific knowledge also suggests that the advancement of medicine, specifically developing measures to preserve life in the face of illness, requires communing to some extent with the near-dead. The blue mother and son may in some ways taint or ‘infect’ Chiver because of their associations with death and disease, but this contamination is ultimately necessary to fend off cholera.

In stark contrast to this ill-fated coterie of blue characters is the irascible child Pink, daughter of Gustine’s pimp Mike and caretaker to the baby. Pink represents the potential for vibrant life in the midst of death and decay. Of the six inhabitants of the lodging house, Pink is the only resident not already seriously marked and/or contaminated. While her brassy manner and world-wise demeanour do not exactly designate her as pure, her physical health nevertheless makes her the comparatively innocent minority among a household that includes her alcoholic father, the one-eyed old woman or the ‘Eye’ who acts as Gustine’s minder, the feeble baby, the prostitute Gustine, and “Fos,” the upstairs tenant afflicted with “the Fossy Jaw” (Holman 2001: 64).¹⁰ Pink thus becomes the symbol for reproductive futurity in *The Dress Lodger*, for although at the end of the novel, post epidemic, the prostitute turned nurse Gustine is “happily married for the

past ten years to that sailor who stepped off the pitcher and over the Quarantine,” she is unable to transcend the taint of infectious disease and reclaim her procreative function (Holman 2001: 289). As the Eye predicts, “where most women measure their lives in childbirth and miscarriages [...] you measure yours in epidemics” (Holman 2001: 289). With her only (disabled) child dead, and “with no children in tow (her body was too ravaged for that)”, in spite of her normative romantic coupling with the kind sailor, Gustine represents a reproductive dead end. Her primary legacy is not the live bodies of children but the sickly and/or deceased bodies of cholera victims, whom she cares for “again in 1853, then in 1866” (Holman 2001: 289). Pink’s destiny is appropriately rosier, healthier, pinker; her reproductive capacity compensates for Gustine’s infertility, for “all the babies [Gustine] could want live down the street at Pink’s house, where she is the mother of four, nearly a child a year since she married at seventeen” (Holman 2001: 289).

With her seemingly unlimited procreative abilities, Pink will surpass Gustine in the realm of posterity, for at twenty-one she already has four means (i.e., children) of living beyond her own time. Indeed, life after the epidemics – indeed, the life after the Victoria era – is ensured by the presence of Pink, who thus might be considered the text’s seminal *neo-Victorian* character. She is the generic link between Victorian fiction and twenty-first-century representations of that fiction; she reminds the contemporary reader that the people depicted in *The Dress Lodger* are not isolated beings entirely removed from our own existence but rather our ancestors. Modern readers know they are not Pink’s children; however, they understand they are in a way Pink’s children’s children’s children, and in so doing, implicitly connect themselves to the nineteenth century. In the case of the American reader, this psychic connection (catalysed by a twenty-first-century U.S. novelist writing about nineteenth-century England) renders *The Dress Lodger* and other neo-Victorian novels by American authors transatlantic as well as transtemporal texts. For this reason, fiction such as Holman’s, preoccupied with infectious disease, is in part a modern response to the threat of pandemics, and therefore does not have to be confined to the neo-Victorian fiction genre, but rather be considered a special type of global literature that attends to international medical concerns.

3. Reflections of Terrorism in *An Imperfect Lens*

An Imperfect Lens conforms in many ways with the generic framework set up by Kneale and Holman but also deviates from these models by presenting a special critique of contagion shaped by the events of September 11th, 2001. Well known for her literary portraits of bygone New York, Roiphe displays similar proficiency in *An Imperfect Lens* by recreating an episode in the life of another great urban centre. While *Sweet Thames* and *The Dress Lodger* take place in nineteenth-century London and Sunderland respectively, *An Imperfect Lens* uses Alexandria, Egypt, as the setting for its chronicle of a cholera epidemic. As I will show, this historical and geographical transposition reflects Roiphe's anxieties concerning the continued threat of foreign terrorism and mass destruction in her hometown New York City. Although both London and other major port cities like Sunderland and Alexandria were ethnically and economically diverse in the Victoria era, Roiphe emphasises the ancient Egyptian metropolis as a special site of social, material, and cultural juxtapositions. Like London, Alexandria imposes certain real and figurative boundaries upon its citizens, for both cities are characterised by different residential districts. In terms of dimensions of diversity, however, Alexandria is represented as especially fluid and exotic. The city is chaotic, cosmopolitan, invigorating, and overwhelming, a place in which people, animals, religions, and objects necessarily co-mingle as they follow their own trajectories.

The image of the "half-lemon" dome in the city's description again exemplifies global contagion fiction's thematic representation of a particular characteristic of the cholera illness and/or its bacterium, in this case the crescent or curve shape as a symbol of cholera. This form of motif is particularly appropriate considering the novel's emphasis on identifying the microscopic structure of the bacteria, which are described as

crescent-shaped creatures, millions of new moons invisible to the naked human eye [...]. They were stowaways on water barrels, on cracks in hands and feet, thriving in the dark planks of wood damp with their smell, breeding everywhere in droplets of water, bubbles of organic proteins, tiny sacks of floating scythes, so small a foot couldn't crush them, but carrying in their ooze neither eternal life nor holy peace, but

quick death, bowels spilling, blood vessels leaking, cracking:
Cholera. (Roiphe 2006: 12)

The cholera germ infiltrates physical and material spaces in such a way as to become an unseen part of the landscape. Its subtle ubiquity is reflected in continual manifestations of the crescent or curve, which occur via additional references such as the “red flag with the star and crescent” hanging from ships in the port, the “simple sliver [of moon]” that rises in the Egyptian sky, and the sweets “with honey and raisins baked in a crescent shape Este nibbles with her mother” (Roiphe 2006: 1, 65, 91). These subtle images reinforce the connection between a specific germ and a specific disease by repeatedly displaying the former’s structural identity, as well as emphasising the degree to which the crescent contagion has marked the city and its inhabitants.

As a clearinghouse for different peoples and goods, Alexandria is the prototype of modern cities of international exchange such as Hong Kong, Berlin, London, and New York. Its capacity to serve as the epicentre for an outbreak of infectious disease in the late nineteenth century is thus highlighted so as to establish its analogous relationship to similarly vulnerable global metropolises in the twenty-first century. Through the insertion of an outside reference text, however, the novel emphasises that the tremendous power of contagion in the urban setting is not a distinctly Victorian or Western phenomenon. While reading ‘A History of Cholera’, the venerable Egyptian physician Dr. Molina learns that

Celsus, who wrote about A.D. 30, had considered Cholera the most dangerous of all diseases of the stomach and intestines. Lommius, a celebrated physician of Brussels, who wrote in the 1600s, speaks of Cholera as the most fearful atrocissium of stomach diseases...Cholera appeared in 1819 in Port Louis, Mauritius, where it had arrived with a ship from Trincolmalee, Ceylon [...]. It killed six thousand on the island within weeks. (Roiphe 2006: 37, 109)

Through Dr. Molina’s research on cholera, the modern reader learns that this disease is a promiscuous and repeat offender, having infected and killed diverse people throughout the ages, and though cholera has become a far

less serious and widespread threat in this century, its representations in neo-Victorian literature can easily be correlated to other infectious illnesses such as Ebola, the West Nile virus, etc., whose presence is more familiar if not more relevant in the twenty-first century. More significantly, however, Roiphe, unlike Kneale and Holman, writes in a post-9/11 context that suggests that a city's exposure to contagion may result from its position as a (bio)terrorist target as well as from its status as a global centre.¹¹

The danger of epidemic disease thus becomes even more pressing to the reader of *An Imperfect Lens*, who is sensitised to the vulnerability of major Western cities to terrorist attack. Roiphe cleverly taps into this anxiety not only by paving the way for analogies between Victorian Alexandria and modern world cities, cholera and twenty-first-century illnesses, but also by centring her novel in the Middle East, the contemporary amorphous locus of terrorism. Western readers culturally predisposed to view Egypt, Syria, Israel, and other nations as centres of violence and political unrest are faced with the additional reality that from these countries emerged microbial as well as human dangers. Roiphe's focus here on the Middle East as a clearinghouse for contagion taps into the 'axis of evil' rhetoric following the 2001 terrorist attacks on New York City and Washington D.C.

A temporal relocation also facilitates the connection between the threat of infectious illness in *An Imperfect Lens* and the threat of bioterrorism in the post-9/11 West. While the 1883 setting, several decades after the epidemics depicted in Kneale's and Holman's novels does not significantly decrease emotional and historical distance so as to intensify the reader's identification with the fictional characters and late nineteenth-century Alexandria, the issues explored (e.g. Jewish-Arab-Christian relations) are the stuff of modern debate and therefore resonate more strongly with a twenty-first-century audience. Locating the novel at the end rather than the middle of the nineteenth century also changes the stakes of the scientific mission. A more advanced understanding of the different modes of transmission for infectious illnesses, such as smallpox, yellow fever, and cholera, enables the novel's medical/scientific hero, Louis Thuillier, to focus more acutely on the agent of contagion itself: the microscopic germ. In *Sweet Thames* and *The Dress Lodger*, much of the fear surrounding cholera stems from uncertainty regarding how one 'catches' the illness: contact with contaminated air, water, material goods,

animals, and/or fellow humans are all proffered as explanations by laypeople and medical professionals alike. While the miasma theory of cholera transmission was still on the table in 1883, the work of John Snow and others in the preceding years had considerably shifted scientific focus to liquids (especially water and bodily fluids) as vessels for the microbe's transmission.

The most important development that occurred in the gap between the era of *Sweet Thames* and *The Dress Lodger* and that of *An Imperfect Lens* are the theories and discoveries of Louis Pasteur and Robert Koch regarding the bacteria and viruses responsible for infectious illnesses such as anthrax and tuberculosis.¹² Roiphe makes use of the fact that in 1883 both Koch and Pasteur were competing (for themselves and their respective countries, Germany and France) to correctly identify the cholera microbe. An aging Pasteur, wary of the dangers of foreign travel, dispatched his assistant Louis Thuillier to Alexandria to investigate the outbreak. In composing her historical fiction, Roiphe invokes this reality to shift focus from one Louis to another by chronicling not the story of Pasteur, whose work and insights are highly documented and culturally popular, but Thuillier, his twenty-something pupil, who died during his trip to Egypt. While Louis Pasteur may be the hero of nineteenth-century germ theory in reality, the fictionalised Louis Thuillier is the scientific and romantic hero protagonist in the novel. The lack of knowledge and/or publicity surrounding Thuillier certainly facilitates Roiphe's artistic elaboration of his story. His status as an underling and 'everyman' of science also makes him more accessible to the modern reader, who sees his relationship with the unknown dangerous foreign germ in corollary with the average American citizen's relationship to the unknown foreign terrorist.

Similar to other medical/scientific heroes in global contagion fiction, Louis Thuillier is implicated in a 'romance' plot involving an awkward triangle. Again one point of the triangle is a young woman considerably above the hero's station: eighteen-year-old Este is the daughter of Abraham Malina, one of Alexandria's most prominent physicians and a member of the "Committee of Public Safety" charged with investigating the cholera epidemic (Roiphe 2006: 109). The socio-economic imbalance is not, however, the only difference between the couple, for while Louis is French and a self-described agnostic, Este is Egyptian and a devout Jew. A shared passion for epidemiological work brings them together, and as they begin to

work alongside each other in the French laboratory, it becomes apparent through Este's contributions that neither her religion nor her gender impedes her understanding of epidemic. The titular imperfect, i.e. microscopic lens through which they examine various samples in search for the cholera germ mirrors nineteenth-century society's own flawed vision regarding both science and heterosexual relationships. Just as much of their world does not see Este and Louis as compatible due to their different religious beliefs, so, too, does it often fail to recognise the true origins of cholera, which, despite advances in germ theory, is still inevitably linked to contaminated air and 'dirty' people. This imperfect vision is materially represented in Este's flawed engagement ring given to her by her proposed suitor Albert, the third point of the novel's 'love' triangle. Although his religious affiliation (Jewish) and familial connections (brother of Este's childhood best friend) render their engagement "a choice [Albert] knew would please his family and hers" (Roiphe 2006: 46), Este is far less certain that these commonalities will necessarily guarantee a good marriage. When it is revealed that Albert purposefully passed off the low-grade diamond of Este's ring for a perfect gem, she realises his choice correlates to other faulty ways of seeing. Hence her subsequent attraction to Louis in part stems from his commitment to see clearly and correctly, as manifested in his painstaking hunt to identify the microscopic cholera germ.

Although Louis and Este do not identify the specific *vibrio cholerae*, their partnership nevertheless demonstrates the potential of a culturally, socially, and religiously diverse scientific team. The fact that the virus is eventually identified by the German scientist Robert Koch, who too has travelled to Alexandria in an attempt to compete with Pasteur, reinforces the idea that the fight against contagion requires diverse efforts. Romantic as well as medical success comes from 'seeing' beyond the surface and thus understanding the value of heterogeneous partnerships and/or relationships. Louis's death precludes their marriage, and eventually Este weds a "young scientific, who knew, without knowing all the details, that fate had brought him a wonderful gift" and who "told everyone who would listen that the best ideas he ever had came from his wife" (Roiphe 2006: 291). Given that her name, Este, means 'from the East', this assertion only further suggests that medical advances need not solely originate in the West. Even though, however, her husband may ostensibly claim Este as the source of his "best

ideas”, her primary role as wife and mother ultimately suggests she receives no real recognition for her contributions.

An Imperfect Lens further distinguishes itself from other neo-Victorian fiction set earlier in the period by positing the cholera germ as a living creature. Because conceptualisations of contagion in the early part of the nineteenth century were murky and often mythologised, disease-causing agents were imagined as everything from tiny material particles (dust, droplets, air) to living microscopic entities (bugs, germs, seeds). As different agents (e.g. bacteria, viruses, and fungi) were identified and linked to specific diseases, science and society came to have a more complex understanding of the various forms of the microbe or germ, which called into question humankind's understanding of itself as the apex of creation. Louis Thuillier, for instance, knows

that the space he walked in, the food he ate, the gums of his teeth, bruise in the peach he had left in the bowl three days before, all were teeming with creatures that gnawed and consumed parts of things [...] it wasn't just human beings that needed to eat, but all living creatures, those you saw and those you didn't. (Roiphe 2006: 96-97)

Via Thuillier's musings, Roiphe subtly interrogates the assumption of human superiority over contagion, not so much in terms of each respective creature's physical and intellectual powers, but rather with regards to humanity's presumed greater claim to life and space on the planet.

Still the co-existence of the human and the germ responsible for epidemic illness seems difficult, if not impossible, in life as well as literature. The desire to 'wipe out' completely the presence of certain infectious diseases fuelled, for example, the successful campaign against smallpox, which the WHO proudly declared 'eradicated' in 1960. The nineteenth-century world of *An Imperfect Lens* projects similar views, for, as Thuillier acknowledges, "[o]ne thing lived because another thing died" (Roiphe 2006: 97). In the case of contagious agents for cholera and other deadly infectious diseases, that "one thing" is necessarily the human. This idea is more subtly assumed in *The Dress Lodger* and *Sweet Thames* with their comparatively diffuse imaginings of the microbe. Roiphe's more explicit interrogation stems not only from the more precise understanding of

contagion in the 1880s, but also from the ‘us or them’ cultural mentality proffered following the attacks on September 11th. Building on the earlier suggested corollary between the dangerous foreign germ and dangerous foreign terrorist, I want to propose that Thuillier’s contemplation about the ontology of the germ reflects a growing cultural uneasiness with such post-9/11 rhetoric. Many Americans assuage their own anxieties regarding the state’s violent retaliation mission by imagining the terrorist as a creature living but devoid of morality, in essence, dehumanising the enemy so as to facilitate and justify his eradication.

Thuillier similarly strips the germ of humanising qualities: “microbes don’t think, have souls, fear death, or regret their past, so their fate doesn’t matter, shouldn’t concern the superior human mind at all” (Roiphe 2006: 97). But unlike other medical-scientific heroes, Thuillier also challenges this line of reasoning by questioning the assumed superiority of the human over other life:

As Louis considered the matter, he wondered if perhaps all living things didn’t have some pleasure in sliding along, in lifting wings, in guzzling dirt, in moving filaments, in letting rain and sun touch their skins. Was their death, the death of even invisible creatures, of no matter at all? (Roiphe 2006: 97)

With these musings, Thuillier carefully broaches the idea of man-animal equality, suggesting that all life has integrity and value. He views the fight against cholera to be necessary to his own (that is to say, man’s) survival, but does not assume that species’ survival to be more important than that of the little germ. His suggestion that these entities may experience pleasure and pain in their daily existence also proposes that the germ, like the human, has a life narrative, diminishing the gap between it and humanity, while also suggesting that Roiphe’s novel proffers a mere sliver of a spectrum of storylines intersecting and overlapping around this epidemic.

In so doing, *An Imperfect Lens* lays the groundwork for a more prolonged, sophisticated consideration of the microbe’s right to existence. Although for the majority of the book Thuillier questions neither his mission to eradicate contagion nor his prioritising of human over other (non-human) animal health, his subversive reflections constitute a deviation from the

generic model set forth by *Sweet Thames* and *The Dress Lodger*, which reflects uncertainties that emerge in response to the myopic vision of 'the enemy' that arose in the wake of post-millennial terrorist attacks. A discomfort with the renewed emphasis on Western political, cultural, and religious values as 'right', 'safe', and 'superior' after September 11th is retroactively transposed to a neo-Victorian setting in *An Imperfect Lens*. Through this historical and geographical translocation, such twenty-first-century anxieties about the terms of Western attitudes toward the 'War on Terror' are subtly reconsidered via the analogous relationship between combatant French scientist/doctor Thuillier and the enemy Egyptian germ.

Further exploration of the ambivalence inspired by cholera in the novel is deferred in favour of more immediate concerns surrounding disease's potential for future scourges. The epilogue of *An Imperfect Lens* triumphantly relates the eventual identification of the bacterium:

Soon after Robert Koch discovered the cholera microbe on the heels of his discovery of the invisible cause of tuberculosis, all the civilized world believed in germs [...]. Now we know these amoral specks are responsible for more human death than all the spears and arrows, all the bombs and explosives tossed tribe to tribe, nation to nation, from time immemorial to the present. This has been the way of the world since man dropped down from the trees, providing through his own body excellent food for the microbes that lived in the swamps and the grasses and the river waters. (Roiphe 2006: 292)

Roiphe here posits the fallacy of imagining the Victorian era as entirely separate from our current period, emphasising contagion as a continuous threat to mankind. She also removes any remaining obstacles to fully analogising the (neo-)Victorian world in *An Imperfect Lens* to our twenty-first-century existence with regards to the fight against the 'foreign' germ: the 'civilized' world's embrace of germ theory reinforces a sort of nineteenth-century 'us/them' dichotomy that informs certain systems of knowledge and imperialist enterprises, such as the US-supervised state projects initiated in Afghanistan and Iraq following the 2001 terrorist attacks. Belief in the microbe as the source of disease testifies to a people's moral and intellectual

development and implicitly separates them from those ‘uncivilized’ sceptics and nonbelievers. Furthermore, if we consider germ theory as a metonym for Western science, then a people’s membership in the civilised world seems to require privileging that system of knowledge. The fight against global pandemics may necessitate cross-cultural, class, and gender alliances, but that heterogeneous force is nevertheless limited in its diversity given the partiality shown to Eurocentric epistemology.

With this conclusion, Roiphe establishes the battle against contagion as an international, albeit Western-led initiative, as well as endorsing the dominant conceptualisation of ‘germ’: a creature whose potential for (human) destruction renders its own destruction (by humans) necessary and justified. Interestingly, however, like Holman, she also acknowledges the inevitable casualties that arise among the crusaders of contagion via her focus on Thuillier, who ultimately succumbs to the illness he is trying to cure. Of this decision, Roiphe explains,

I wanted to write a book about a hero who died because of his work on the frontiers of scientific discovery. My brother, a hematologist and a laboratory scientist had recently died of AIDS and I hoped to honor him. I remembered the death of Louis Thuillier a century earlier. (Roiphe 2006: 295)

Representing AIDS and her brother through cholera, Thuillier addresses the trans-historical aspect of the neo-Victorian contagion narrative for which I have been arguing. More importantly, however, the association proffered between these two scientific pioneers’ similar fatal ends reminds us that the novel is a literary reflection in the wake of recent death. Although in *Sweet Thames* and *The Dress Lodger*, Kneale and Holman are responding to the mass casualties caused by AIDS, Ebola, the West Nile virus, SARS, and other twentieth- and twenty-first-century epidemic diseases, in *An Imperfect Lens*, Roiphe additionally reflects on more geographically proximal and personal fatalities.

Notes

1. For discussions of Victorian social mores and codes of behavior (both in reality and in popular perception), see Marcus 1966 and Mason 1995.
2. Eliot's invocation of the phrase – "Sweet Thames, run softly, till I end my song" (Eliot 2003: 61, line 176) – is itself a reference to Edmund Spenser's *Epithalamion* (1595).
3. Of the role of the Thames in *Our Mutual Friend* (1865), for example, see Miller 1968: 120.
4. See also Kontou 2010, especially the 'Introduction' and chapters 3 and 5.
5. In the first half of the nineteenth century, most physicians focused on *miasma* (noxious air particles) and *effluvia* (noxious liquids) as possible sources of infectious illnesses, including cholera. Jacob Henle's essay 'On Miasma and Contagion' (1840) was one of the first treatises to argue that tiny living creatures (in such media) were in fact responsible for infection. Following his pioneering epidemiological work on the 1840s cholera outbreaks, John Snow in *On the Mode of Communication of Cholera* (1849) correctly postulated that cholera is water-borne; five years later, the Italian scientist Filippo Pacini actually identified the *vibrio cholerae* bacterium transmitted through the liquid medium. However, it was not until 1884, when Robert Koch presented his findings of *vibrio cholerae* at the Berlin Cholera Commission, that physicians widely accepted that a specific micro-organism in water caused cholera (Carpenter 2009: 51).
6. During the 1840s and 1850s London epidemics, fear arose that the rich were purposely infecting the poor with cholera to scourge undesirable classes.
7. In a 2001 interview, Holman describes this conscious decision: "I thought – okay, I'll have a doctor and a prostitute. But what else was happening in 1832? I began to read about the cholera epidemic which hit England then, and I realized I had the third point on the triangle" (qtd. in Liss 2001: 295).
8. *Ectopia cordis* is a very rare but real congenital malformation in which the heart is located entirely or partially outside the thorax.
9. The so-called 'blue death', along with 'Asiatic or India cholera', 'blue cholera', and 'cholera morbid', were among many contemporaneous synonyms for cholera. See Peters, McClellan, Hamilton, and Sternberg 1885: 110.
10. 'Fos' is short for 'phossy jaw', the lay term for *phosphorous necrosis*, a condition caused by excessive exposure to white phosphorous, a substance commonly used in the production of matches in the Victorian era.
11. Depictions of epidemics and infectious diseases in neo-Victorian fiction can be considered part of a larger contemporary literary trend in which novelists

and filmmakers use mass illness events to explore intensified fears about terrorism following September 11th. Many scholars have investigated these representations of mass-casualty illness events and contagion (real and metaphorical) in contemporary and post-9/11 fiction including most notably Priscilla Wald, who argues that this literature “register[s] the cultural anxieties and fascination that arise when scientific and technological innovations and geopolitical transformations introduce new ways of understanding the world” (Wald 2012: 102).

12. Specifically, Koch’s identification of the anthrax bacteria in 1876 and the tuberculosis bacillus in 1882.

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