Amir A. Afkhami. *A Modern Contagion: Imperialism and Public Health in Iran's Age of Cholera*. Baltimore, MD: Johns Hopkins University Press, 2019. Pp. xiv, 276. Cloth $54.95, e-book $54.95.

A Modern Contagion: Imperialism and Public Health in Iran's Age of Cholera places cholera (and also bubonic plague) into modern Iranian medical and political history, persuasively arguing that pandemic disease was a powerful driver for change across multiple fields. Cholera, Amir A. Afkhami writes, "not only shaped the adoption of new paradigms in medicine and health; it also changed Iranian perspectives on governance, influenced European imperial policy, unmasked social and political vulnerabilities, and caused enduring institutional changes" (3) during the Qajar dynasty (1796–1925). It is a bold claim, Afkhami explains, because historians of modern Iran have largely neglected disease, in part because the domestic research is so challenging. Afkhami overcame the limitations through decades of work in archives in multiple countries. The result is a book that makes an important contribution to both modern Iranian history and the global history of public health.

Historians have long viewed cholera as an important chapter in the story of European imperialism. The disease flowed along pathways built by European powers and several of them ran across Iran—a critical meeting point of Europe and Asia. Iran's geographic location dramatically enhanced European interest in its sanitary affairs as far as they applied to pandemic disease. The Europeans subsequently invited Iran to the International Sanitary Conference of 1866, and other conferences after that, which built stronger international connections for the Iranians who participated. In the short term, however, European concerns about the movement of cholera and bubonic plague through Iran actually reduced the Qajar regime's room for action as domestic sanitary policies were entangled in Britain's efforts to curb Russian economic and political influence in the region. It was not until the aftermath of World War I that the Iranian government was able to take control of its sanitary policies. The new Mohammad Reza Pahlavi regime convinced the Pasteur Institute to open a satellite institution outside of Tehran and soon officially changed the language of Iran's Sanitary Council from French to Persian, thereby marginalizing its European members. This work, Afkhami claims,

"capitalized on the administrative and intellectual developments in public health established in the post-constitutional period and instituted the framework that brought Iran's age of cholera to a close" (167). Those developments were products of both foreign and domestic forces, for while European politics hindered Iranian autonomy, access to emerging Western ideas about public health and disease prevention heightened Iranian expectations of their government.

A key point of the book is that the Pahlavi regime focused on public health in part because the imperial connections of the previous century had given Iranian elites exposure to new ideas about disease prevention. Those ideas were, in turn, "critically influenced by the forces of tradition, modernity, and nationalism within the country itself" (9). And also, of course, by the horrors of cholera. Beginning in 1821 and continuing throughout the century, outbreaks—magnified by European imperial action in the region—brought disruption. That disruption did not take identical form to what happened in Europe: "Tehran did not experience the class-driven mass hysteria, lynching of physicians, and burning of hospitals" (70). Instead, cholera outbreaks enhanced the prestige of "militant Shiʿite clerics" and fueled anti-European and anti-Qajar sentiment (73). Even as it incited anger against European political and economic interference in Iran, cholera expanded the reach and the influence of European science, which ultimately changed the way that elite Iranians understood disease and their perception of the role that the government should play in disease prevention.

"These new sanitary theories and practices, propagated by medical advisers and the proliferation of printed scientific literature from the West," Afkhami argues, "transformed Iranian perspectives of disease prevention from one of passive fatalism to a proactive enterprise" (42). The influence of the ideas only grew with time. By the early twentieth century, public health had "worked its way to the forefront of urbane conceptions of the 'new civilization' (*tamaddun-i jadid*) to which Iranian intellectuals aspired" (107). When cholera broke out again in 1904 with devastating results, Iranians decided to act. Afkhami notes that members at the very first meeting of the Secret Society in 1905 "drew attention to the poor sanitary state of the country." Many would-be leaders in the Constitutional Revolution the following year participated, driven in part by disgust with the shah's inaction. And they were not alone. They were joined by "the powerful religious elite, who could make or break the emerging political movement" (133). That acceptance changed Iran's future: "Iran's Constitutional Revolution," Afkhami concludes, "triggered by the social and economic impact of the 1904 cholera outbreak, could not have occurred without a growing secular view of epidemics" (134).

The 1906 revolution did not immediately lead to the dramatic public health reform that the revolutionaries wanted because of lack of funds and continued European interference in Iranian affairs, but it laid the groundwork that the Pahlavi regime would build on following World War I. In the war's aftermath, the Pahlavi regime was finally able to push aside European resistance to the implementation of the sanitary reforms that had gained popularity decades earlier in response to both the horrors of the disease that had spread along imperial networks and to the ideas of public health that had followed close behind it. *A Modern Contagion* has filled important gaps in the literature on modern Iran and on international disease history. It is a welcome addition.

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