

When Plague Strikes Short Guide

When Plague Strikes by James Cross Giblin

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Overview

Diseases have taken a greater toll of life than even the most disastrous war, and the enemy is invisible. In *When Plague Strikes*, Giblin is particularly interested in how the victims of an epidemic behave when faced with a calamity that has rendered them helpless and—in past ages—for which they have no explanation. Even after the plagues temporarily abated, their effects were felt.

Societies in the stricken areas were forever changed. Athens, for example, after its plague in 330 B.C., was sufficiently weakened to help Sparta and her allies win the Peloponnesian War.

Giblin identifies the historical roots of three deadly diseases: smallpox, which originated in ancient Egypt; the bubonic plague (also known as the Black Death), which originated in central Asia in the 1300s; and AIDS, which originated in sub-Saharan Africa in the 1970s. He traces and compares how these diseases were spread and the devastation they caused. The author's approach to his subject is one of intellectual questioning, rather than social commentary.

Of particular interest is Giblin's interpretation of how catastrophic events cause the balance of power in societies to shift. The Black Death, while it did not completely discredit the authority of the Catholic Church in the Middle Ages, taught the people involved that the Church could neither explain nor remedy the tragedy by appealing to its God. The people of that time reasoned that since God is the only source of life in all of its forms, He had to be responsible for what was happening to His people. They also believed that since God did nothing to help them, He must have been using the plague to punish them for their sins. When physicians rather than priests discovered how to combat smallpox, the Church lost still more of its credibility and authority. In our time, the difficulty that physicians have had in finding a cure for AIDS has contributed to a questioning of our faith in medical science.

Two of the diseases described by Giblin were incurable for centuries, and AIDS is still without a remedy. The organisms that produce disease antedate the appearance of man on our planet, and Giblin helps to give historical perspective to our relationships with them.

About the Author

James Cross Giblin was born on July 8, 1933, in Cleveland, Ohio, the son of Edward Kelley Giblin, a lawyer, and Anna Giblin, a teacher. He grew up in nearby Painesville. A shy child, he led a rather introverted life in his early school years. In junior high he began to conquer his shyness by working on the school paper. The paper was started by his ninth-grade English teacher, who encouraged him to come out of his isolation and work with his classmates.

In his high school years, Giblin became interested in theater after getting a part in the play *Outward Bound*. He went on to play several roles in Harvey High School's drama productions, and he was cast in the small but funny role of the Lost Private in a professional production of the comedy *At War with the Army at Rabbit Run*.

Once out of high school Giblin studied drama for a semester at Northwestern University and then transferred to Western Reserve University (now Case Western Reserve University) near his parents' home. There he starred in a number of stage productions. He later earned an M.F.A. in playwriting from Columbia University in New York.

Giblin worked for a time as a special order clerk at the British Book Centre, then joined the staff of Criterion Books in 1959, first as a publicity director and later as an editor. Giblin found that he especially enjoyed editing children's books, and he moved to Lothrop, Lee, and Shepard in 1962. At Lothrop, having edited J. J. McCoy's career book *The World of the Veterinarian*, Giblin decided to write his own works for children. Though his first attempts were unsuccessful, Giblin's articles on children's books were being accepted by periodicals, and he was lecturing at conferences of children's book writers and librarians.

Collaborating with Dale Ferguson, Giblin published his first children's title in 1980, *The Scarecrow Book*. Since then he has written a number of nonfiction works; most explain historical developments on subjects ranging from the pasteurization of milk to the technology of windows. He has also done four biographies on national figures: George Washington, Thomas Jefferson, Charles A. Lindberg, and Edith Wilson.

Giblin has earned several honors for his works, including the Golden Kite Award for nonfiction from the Society of Children's Book Writers and Illustrators, the American Book Award for children's nonfiction, and the Boston Globe-Horn Book Award Nonfiction Honor Book. Giblin has also garnered several American Library Association notable children's book citations.

Setting

The Black Death, smallpox, and AIDS have been global in their scope. Bubonic plague began somewhere in central Asia and came west with its carriers—fleas that lived on rats. The disease was first reported in the southern Ukraine on the Black Sea in 1347. In October 1347 an Italian merchant ship arrived in Messina, Sicily, with its crew and passengers either dead or dying from the disease. It spread to the Italian mainland—first in its ports and then inland to the major cities. It entered France through Marseilles and other ports and spread rapidly to Avignon and Paris. By the time the pandemic ended in 1349 most of Europe had been infected. Outbreaks would recur at intervals during the centuries to follow: in London in 1664, for example, and in China in the late nineteenth century.

Smallpox became endemic in ancient Egypt and may have been brought back to Europe by the Crusaders. European colonists brought it to the Americas where its effect on Native Americans was devastating both in North and South America. Cities such as Boston were also hit with terrible epidemics. Vaccination on a worldwide scale seems to have finally conquered this disease. An epidemic among nomads in Somalia was the last significant outbreak, and on November 28, 1977, the last patient in the area was sent home cured.

AIDS also spread rapidly after it arose in sub-Saharan Africa in the 1970s. It has since appeared in practically every country, but the United States and Brazil have had the most cases outside of Africa. It has also become common in Thailand and India, particularly among prostitutes and drug addicts.



Social Sensitivity

Although Giblin's book covers only three of the many disastrous plagues that have devastated the world, he captures the horror and hopelessness that their victims must have felt. Each one brought death in a horribly painful form, and each altered the societies it struck. The Black Death found most of its victims among the very poorest people. Estimates vary on the number of people who perished, but the plague left a population that was much depleted. In the years following, laborers were at a premium. They could leave serfdom and receive higher wages than ever before. They enjoyed a higher standard of living than was possible for them earlier.

The Catholic Church, the most powerful force in the lives of the people, never quite regained its former influence. It had represented itself as the only source of God's grace. Faced with a calamity of this magnitude, it was as helpless as the peasantry to prevent and cure the misery of the plague.

Some of the priests met their death while tending to the needs of their parishioners; others simply fled. Giblin also points out that the Church's control of learning and medicine was loosened. While doctors for centuries afterward would continue to follow the teachings of Galen, they at least began to study the human anatomy more closely. The case of smallpox seems to be a complete triumph for medical science. Dr.

Edward Jenner is without question one of the great heroes in medical history. His discovery of vaccination gave doctors a weapon that ended centuries of misery and death.

So far, as Giblin points out, no Edward Jenner has appeared to help solve the problem presented by AIDS. Associated in this country, initially at least, with homosexuals and drug users, the disease was ignored by the public and elected officials. AIDS came on the scene when the Reagan administration was severely cutting funds for many programs. Giblin maintains an open mind when dealing with the controversies of the 1980s. He presents both the politicians and the gay community impartially. He is also brutally matter of fact, saying that all concerned were blameworthy to an extent.

Congress did finally allocate monies to the medical community, although belatedly. Scientists stepped up their research efforts, although the lack of funds impeded their progress. They discovered drugs such as AZT (azidothymidine) to slow the development of HIV, though no cure to the disease has yet been discovered.

Literary Qualities

Giblin is a master of expository writing.

His style is simple, and he presents complex material in an easily understood fashion. Some of the mysteries of medical science become less baffling. Giblin's work is both very informative and interesting.

Though written for young adults, this book could be read profitably by adults as well.

Themes and Characters

Giblin, when he wrote *When Plague Strikes*, was interested in seeing whether there was a pattern in the populace afflicted by the diseases he described. All these plagues, from the one which struck Athens to the AIDS pandemic in our time, were unexpected and found physicians helpless to understand or cure them. Appeals to God were equally ineffective, although priests and ministers insisted that the diseases must be willed by Him. This attitude prevailed among many different religious groups.

The threat posed by disease was invisible and there were no remedies available, so panic often arose. When residents of an afflicted area fled to where they hoped they might be safe, they usually spread the disease even further. Typically they also looked for culprits who might be responsible for the calamity. The Muslim inhabitants in the southern Ukraine, for instance, blamed the Black Death on the Italian traders in their midst, and in our time homosexuals and drug addicts have been blamed for AIDS.

The Black Death (1347-1349) was so called because internal bleeding darkened the skin of its victims in the disease's final stages.

The term "bubonic" originated because the lymph nodes of a sufferer's groin developed swellings the size of eggs in an early stage of the disease (the Greek *bubos* means groin). The victim suffered horribly and his nervous system collapsed. An afflicted person usually died within five days of infection.

The Black Death was brought to Europe on Italian merchant ships fleeing the outbreak in the southern Ukraine. On one such ship, which arrived at Messina, Sicily, in October 1347, all aboard were either dead or dying. City officials confined the sailors to their ship, but that action proved futile.

Black rats had gone to shore soon after the arrival of the ships, and their fleas were already spreading the infection. (The flea's connection to the plague would not be discovered until the nineteenth century.) The disease entered mainland Italy through its ports, and soon inland cities such as Florence were struck. Giovanni Boccaccio described the city of Florence when the plague was at its height in his *Decameron*, "The city was empty of inhabitants most of whom had either died or fled. They had soon realized that neither religion nor medicine could help them." Thirty miles south of Florence, in Sienna, the chronicler Agnolo di Tura reported that "people said and believed 'this is the end of the world.'"

In the spring of 1348 the Black Death, having entered France by way of Marseilles and other ports, reached Avignon where the Popes and their College of Cardinals had been in residence since 1309. It was estimated that 400 people were dying each day, and after the cemeteries had been filled to overflowing, bodies were being dumped into the Rhone River. Pope Clement VI, following the advice of his physicians, isolated himself in his bedroom between two raging fires. The fires were supposed to protect him from the miasmas (poisonous swamp vapors) that were believed to spread diseases. This



belief was based on the theories of Galen (130?-200 A.D.), who was the accepted authority on medicine during the Middle Ages, and whose opinions went unchallenged until the sixteenth century.

A terrified populace began placing blame for the disease on minorities. In England elderly women and the mentally ill were made scapegoats. The Flagellants, a dissident religious group who believed they could appease God by whipping themselves, started rumors that Jews were furthering the plague by poisoning wells with poisons imported from Moorish Spain. Many Jews were slaughtered in Germany and Switzerland.

The agents of Clement VI calculated that 23,840,000 people died in the course of the plague. The exact number is not known.

Smallpox, in its two forms, variola major and variola minor, had been present in Europe as long as the Black Death. Over the centuries it killed even more people worldwide, including an estimated 56,000,000 Native Americans in North and South America. Modern historians say that smallpox, rather than Spanish armies, were the true conquerors of the Aztec and Inca empires.

Unlike bubonic plague, whose victims were usually poor, smallpox attacked people of all social and economic classes. One of the first prominent victims of the disease was the Egyptian pharaoh Ramses V. He died in 1157 B.C., mysteriously and suddenly, with symptoms which closely resembled smallpox, according to twentieth-century scientists who have studied his mummy. Also, the Muslim physician Rhazes, early in the tenth century, completely and accurately described the symptoms of smallpox.

Unlike bubonic plague, which is transmitted by fleas from infected rats, smallpox spreads by person-to-person contact. The incubation period is about a week. Then on the ninth day or shortly thereafter, chills, high fever, backaches, and headaches follow. Four days later a rash breaks out, and over the next several days the flat spots of rash become raised, blister-like pustules.

After a day or so, these pustules split open and begin to dry up. The scabs fall off, leaving deep, pitted scars on the face and body. If the victim recovers, though, he is immune to further attacks of the disease.

The Chinese were the first to take advantage of this fact. They practiced inoculation by blowing dust from smallpox scabs into the nostrils of a patient. The result was a mild infection, but also immunity. Lady Mary Whortley Montague, the wife of the English ambassador to Turkey, heard of another method of inoculation practiced by people living in rural Turkey. Powdered scab dust was injected into scratches on a person's upper arm. Returning to England in 1721, Lady Mary influenced Princess Caroline, the wife of the Prince of Wales (the future George II), to have her children inoculated. Thanks to the encouragement of the Royal Family, many in England were inoculated.

In the American colonies, Boston had been hit by a series of smallpox epidemics in the seventeenth century. In 1721 an even more severe outbreak occurred. The Reverend Cotton Mather had read a letter written to the Royal Society in England describing



inoculation, and he began to promote this practice in Massachusetts. Inoculation proved successful in other colonies, as well.

Dr. Edward Jenner discovered the preventive measure called vaccination. He had heard of people developing an immunity to smallpox because they had already become infected with cowpox, a milder disease. In 1796 he experimented with this theory, vaccinating a young boy using pus from a cowpox scab. Soon after, the boy was inoculated with the smallpox virus but did not contract the disease. Dr. Benjamin Waterhouse promoted vaccination in the United States, with the backing of President Thomas Jefferson.

Vaccination enabled physicians to eliminate smallpox around the world. In 1895 Sweden became the first country to wipe out smallpox. The World Health Organization (WHO) of the United Nations mounted an ambitious campaign in 1966 to eradicate the disease through the combined efforts of all member nations. The campaign was a success and the disease was conquered in 1977. This was a great triumph for the World Health Organization.

No attempts to cure AIDS have yet succeeded. It surfaced in the central African nation of Zaire in the mid-1970s. The disease came to the attention of European health professionals in the 1970s when a Danish doctor, Grethe Rask, returned to Denmark after working for three years in Zaire hospitals. She had a disease that nobody could identify. Her immune system was seriously weakened and her blood contained very few T cells, a type of white blood cell that helps the body defend itself against disease. Rask later died, her lungs filled with *Pneumocystis carinii* bacteria, a rare form of pneumonia. In 1980 some young homosexual men in New York City developed similar symptoms. Like Rask, they had swollen lymph nodes and their T cell counts had dropped to such low levels they could not fight off various diseases. The rare skin cancer, Kaposi's sarcoma, was one of these. The men later developed *Pneumocystis carinii* pneumonia. They were dead before the year ended.

The disease was a medical mystery at first. Heroin addicts and Haitians were appearing in emergency rooms with the same symptoms. A hemophiliac in Florida became yet another victim. He had been getting injections of Factor VIII, a clotting factor concentrated from thousands of blood donors. Medical authorities began to suspect that they were dealing with a virus rather than bacteria because a virus could pass through the filtering process to which Factor VIII was subjected. A baby in San Francisco in 1981 developed symptoms of AIDS after a series of blood transfusions. A year later it was learned that one of the donors had since died of AIDS. The nation's blood banks seemed to have become contaminated.

One of the victims of AIDS, Gaetan Dugas, a French-Canadian flight attendant, bragged of his sexual contacts across the United States and Canada. He gave the names of some of his contacts, thus enabling scientists to trace a clear pattern of infection for the first time. By July 1982 new cases of GRID (Gay Related Immune Deficiency) were numerous enough for the Center for Disease Control to call the disease an epidemic.



After it became evident that the disease was not limited to homosexuals, it was renamed Acquired Immune Deficiency Syndrome, or AIDS.

Because of its connection with homosexuals, AIDS had acquired a stigma among the American public. After a number of celebrities went public with their battles with the disease, however, attitudes changed. Actor Rock Hudson, a popular film star, helped focus the public's attention on a disease that most Americans preferred to ignore, including Hudson's old friend, President Ronald Reagan. Another well-known actor, Anthony Perkins, and the popular pianist Liberace were other victims. The great tennis player, Arthur Ashe, also died. Ryan White, a young hemophiliac who contracted AIDS because of infected Factor VIII, became a national hero as he fought against both the ravages of the disease and the prejudice of his Indiana neighbors who ostracized him. He appeared on talk shows, trying to open the plight of AIDS sufferers to public discussion. After his death on April 8, 1990, White was commended by President Reagan, who had kept silent during the early years of the epidemic.

In 1983 Dr. Robert Gallo, a noted virologist, began a concentrated effort to find the cause of AIDS. Earlier he had found a new retrovirus, HTLV, and was convinced that another retrovirus was probably causing AIDS. Highly competitive—some of his colleagues would have said abrasive—Gallo was afraid that the scientists at the Pasteur Institute in Paris would find the cure before he did. The Pasteur Institute was much smaller and not funded nearly as well as the National Cancer Institute where Gallo did his work. It had the advantage, however, of being able to work without interference from political groups. The French scientists had discovered a new retrovirus that they labeled LAV (lymph-associated virus), but project director Luc Montagnier still was uncertain whether or not it was a variation of HTLV. The French, by January 1984, had almost conclusive proof that LAV caused AIDS. Having grown twenty cultures of AIDS virus, Gallo still insisted LAV was not a new virus but a variant of HTLV, so he called the virus HTLV-III. Subsequent studies showed that the two viruses were identical. The virus that caused AIDS, which would eventually be labeled HIV (human immunodeficiency virus), had been found.

Thanks to Dr. C. Everett Koop, Reagan's Surgeon General, a report on AIDS was published, calling for a battle against the epidemic. The report urged that the public should become fully informed about the disease. Unlike many conservatives at the time, Koop did not moralize, but he advised gay men to be more cautious when engaging in sex and advocated the use of condoms.

Some religious groups reacted to AIDS in much the same way priests and ministers had reacted throughout history when plagues appeared. Their leaders reasoned that it was God's will, and that it was God's way of showing His wrath because of the sins of the afflicted. There were also signs that the public was frightened: doctors refused to treat patients who had the disease, and formerly friendly neighbors made outcasts of victims such as Ryan White.



Topics for Discussion

1. Why does the Black Death still fascinate us after all these centuries?
2. As human populations continue to expand, and the number of poverty-stricken people also grows, is a calamity like the Black Death inevitably part of our future?
3. It is a temptation to view the people during the period of 1347-1349 with some condescension, "those poor ignorant souls." Why is this attitude unjustified?
4. What prevented the recognition of the role of microbes in human history from being acknowledged earlier?
5. Giblin placed a question mark at the end of the title for Chapter Ten, "The End of Smallpox?" Why?
6. The role of the Reverend Cotton Mather as an advocate of inoculation contrasts with his position during the Salem Witch Trials. Why?
7. The "will of God" has been used to justify some of humankind's most devastating events, including plagues. Is this religious attitude at all justified?
8. How does the AIDS pandemic differ from the others discussed in this book?
9. Why was Dr. C. Everett Koop such an unlikely hero in the struggle against AIDS?
10. Does the intense rivalry between the National Cancer Institute and the Pasteur Institute surprise you? Why?
11. In a way, the last years of his life enabled Rock Hudson to be as great a hero as he was in many of his films.

Explain this.

12. What role did Ryan White play in galvanizing activities to combat AIDS?



Ideas for Reports and Papers

1. World War I was followed by an influenza pandemic responsible for even more deaths. Some medical experts do not rule out the possibility that it could happen again. How does that plague compare to the ones Giblin describes?
2. HIV is a retrovirus. Why is this microbe so scary?
3. Is the emergence of such diseases as AIDS and ebola the result, as some maintain, of the destruction of tropical forests? Is this an oversimplification?
4. In the wake of the AIDS pandemic in the 1990s, another incurable disease began to get the public's attention. Why are spongiform diseases so frightening? How does mad cow disease compare to AIDS?
5. Understandably proud of their accomplishments, scientists in the 1950s and 1960s sometimes announced that their victory over many diseases was won.
Why was this attitude premature?



Related Titles/Adaptations

The number of books and articles on the diseases discussed in Giblin's book grows steadily. Boccaccio's description of the Black Death in "Day One" of his Decameron (c.

1348) is worth reading. Daniel Defoe's *Journal of the Plague Year* (1722) is also worth reading, although in Defoe's case, what appears to be a firsthand account is actually based on contemporary records of events he would have been too young to remember. Albert Camus' *The Plague* (1947) is a piece of fiction with an epidemic of bubonic plague as its background.

Giblin is still correct when he says that Randy Shilts' *And the Band Played On* is the most complete history of AIDS. The conquest of smallpox is covered in June Goodfield's *Quest for the Killers*, a companion to a television series.

In *The Seventh Seal* (1956), Ingmar Bergman recreates the atmosphere of the years when the Black Death ravaged Europe. A procession of flagellants is included. The Tom Hanks film *Philadelphia* (1993) presents the struggles of an AIDS victim to claim his legal rights.

FURTHER REFERENCE Burns, Mary M. Review of *When Plague Strikes: The Black Death, Smallpox, AIDS*, Horn Book, vol. 72, January/February, 1996, p. 90. Burns states that Giblin offers insight into history and our own time by analyzing the causes, consequences and the social attitudes toward devastating diseases. He deals with AIDS in his final chapters, showing that humans react similarly in all ages to major plagues.

Dudley, William, Ed. *Epidemics: Opposing Viewpoints*. San Diego, California: Greenhaven Press, Inc., 1999. Two varying opinions are presented in response to such questions as "Do Infectious Diseases Pose a Significant Threat to Humanity?" Related topics are also covered. A bibliography is provided for each topic.

Garrett, Laurie. *The Coming Plague: Emerging Diseases in a World out of Balance*.

New York: Farrar, Strauss, Giroux, 1994.

Garrett thoroughly examines diseases that have appeared in recent years. She describes the efforts of doctors and scientists from the Centers for Disease Control who have worked all over the world to effectively treat strange microbes. The world, she believes, has become much more vulnerable because modern transportation can spread these diseases much more rapidly.

Goodfield, June. *Quest for the Killers*. Boston: Birkhauser, 1985. This book inspired a companion television series. Goodfield believes that the joint efforts of medical experts all over the world can cope with outstanding problems. Beginning with a strange disease called kuru in remote New Guinea, she covers hepatitis B, schistosomiasis (which is spread by infected snails in tropical regions), leprosy, and smallpox.



Rochman, Hazel. Review of *When Plague Strikes: The Black Death, Smallpox, AIDS*, Booklist, vol. 92, October 15, 1995, p. 396.

Rochman believes that Giblin's social history of disease provides a context for the current public health debate about AIDS.

Ryan, Frank. *The Forgotten Plague: How the Battle against Tuberculosis Was Won and Lost*. Boston: Little, Brown and Company, 1992, 1993. Ryan, a British physician, tells the story of what may be the worst plague of all. Tuberculosis has killed more than a billion people worldwide.

The disease once thought under control has staged a resurgence thanks to a drug-resistant strain, and in alliance with AIDS it has become as dangerous as ever.

Shilts, Randy. *And the Band Played On: Politics, People, and the AIDS Epidemic*. New York: St. Martin's Press, 1987. By the time America paid attention to AIDS, the disease had established a foothold among certain populations, including homosexual men and intravenous drug users. Indifference and bigotry played key roles in the nation's failure to realize the seriousness of the plague in its midst. The most thorough study of the AIDS epidemic thus far to appear.

Sutton, Roger. Review of *When Plague Strikes: The Black Death, Smallpox, AIDS*, *The Bulletin of the Center for Children's Books*, vol.

49. Sutton remarks that Giblin's tone is quiet and respectful, but he is aware that the subject he is handling has an inherently grisly appeal. Sutton adds that Giblin works carefully to bring his readers from thrill-seeking to sober consideration.

Tuckerman, Barbara W. "This Is the End of the World: The Black Death," *A Distant Mirror*, Chapter 5, pp. 96-131. Rats and fleas were so common during the fourteenth century that people failed to connect them with the plague. Tuckerman gives a graphic account of the fate of European Jews, who were often blamed for furthering the spread of disease.

Ziporyn, Terra. *Nameless Diseases*. New Brunswick, New Jersey: Rutgers University Press, 1992. Ziporyn notes that at medical conferences conflicting reports are sometimes given by equally reputable researchers. Diseases receive labels that prevent adequate treatment. As Ziporyn remarks, "Perhaps even more strikingly, the meaning of AIDS seems to change every time you turn around—and as the meaning changes, so do the chances of people with the disease." Progress has been made in classifying AIDS since this book appeared, but confusions in medical circles, as the book shows, can produce unfortunate effects.



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