

Ivana Bago

# The Autoimmune Condition: A Report on History

01/11

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The Autoimmune Condition: A Report on History

With the recent discovery of the sheer diversity and the life-sustaining function of organisms like yeast, viruses, and bacteria that populate the human microbiome, medical science has provided potentially new meanings to a long tradition of philosophical critiques of autonomous selfhood and notions such as singular-plural being.<sup>1</sup> Yet ironically its effects are largely felt in the booming lifestyle and self-enhancement markets, where, for instance, the advertising of fermented foods comes with the previously unforeseen promise of health and immunity by way of, not despite, human-bacterial cohabitation. The Covid-19 pandemic, however, has sidelined even such a commodified science of coexistence, reinstating – in the collective imaginary – a militaristic conception of immunity, in which the human appears once again as a closed system, defending against the alien invader.<sup>2</sup> But this singular and collective body hardly faces the virus in a robust state: obesity, chronic diseases, allergies, cancers, and lifelong dependencies on pharmaceuticals mark the growing reserve army of those deemed to be “immunocompromised” and therefore particularly susceptible to the virus.<sup>3</sup>

Among these “underlying conditions” is a series of still mysterious autoimmune diseases, whose very definition challenges the idea of self-contained existence. Encompassing over eighty diverse chronic conditions such as rheumatoid arthritis, multiple sclerosis, Crohn’s disease, Hashimoto’s Thyroiditis, and type-1 diabetes, the term “autoimmune” names an immune system that has gone haywire and turned against its own tissues – misrecognizing the (presumed) self as enemy. Although discovered in the 1950s and taken as an explanation for already existing pathologies, autoimmunity has only recently been more widely acknowledged, and conditions falling under its purview are also on the rise, currently affecting between 5 and 10 percent of the US population, mainly women.<sup>4</sup> Generally characterized by tissue damage and a little-understood rhythm of flares and remissions, autoimmune diseases are predominantly treated by the lifelong administering of immunosuppressant drugs, and their ultimate cause remains a matter of speculation. As Ed Cohen has written, autoimmunity names a “known unknown,” which has “resisted every digitized, high-tech, genetically engineered means that has been thrown at it.”<sup>5</sup>

Can this autoimmunological riddle be seen not just as a medical, but also a historical condition? One, indeed, whose etiological crisis calls for the very appearance of history as a way out of the epistemological presentism that François Lyotard diagnosed in 1979 as the postmodern condition, characterized by the

dissolution of “grand narratives” into competing “language games”?<sup>6</sup> In the set of notes that follow, I will propose that we view the autoimmune condition both as a medical diagnosis and a heuristic, periodizing device, whose etiological impasse encapsulates the symptoms of the planetary crises of today, and at the same time activates a mounting pressure, and desire, to overcome them.

### Diagnosis Unthinkable

Although hypotheses about physiological autoreactivity have appeared in medical research records since at least the early twentieth century, the diagnosis of autoimmunity remained unthinkable before the 1950s, when the terms “autoimmune” and “autoimmunity” were first recorded.<sup>7</sup> Until then, there was only immunity, which gained its biological meaning only in the late nineteenth century, by merging the ancient Roman concept of immunity, understood as legal exemption, with the political notion of self-defense that Thomas Hobbes defined during the English Civil War (1642–51) as the first “natural right.”<sup>8</sup> Thus defined, biological immunity reinforced the evolving field of bacteriology and its key tenet, germ theory, which associated disease with external microbial agents invading the body and triggering its defensive, immunological response.

To think of *autoreactivity* meant to disrupt this essentialized opposition between self and other, saliently expressed in the turn-of-the-century presumption of *horror autotoxicus* – the idea that while the body technically *could* create autoantibodies and turn against its own tissues, it would necessarily regulate against such blasphemous, “dysteleological” behavior.<sup>9</sup> Germ theory, which ontologized disease by relating each condition to a specific pathogen, itself had displaced the earlier constitutional model, which saw illness as a complex of internal disturbances resulting from the interaction of individual physiology and the environment. In 1911, George Bernard Shaw scoffed at this shift: “We are left in the hands of the generations which, having heard of microbes much as St. Thomas Aquinas heard of angels, suddenly concluded that the whole art of healing could be summed up in the formula: Find the microbe and kill it.”<sup>10</sup>

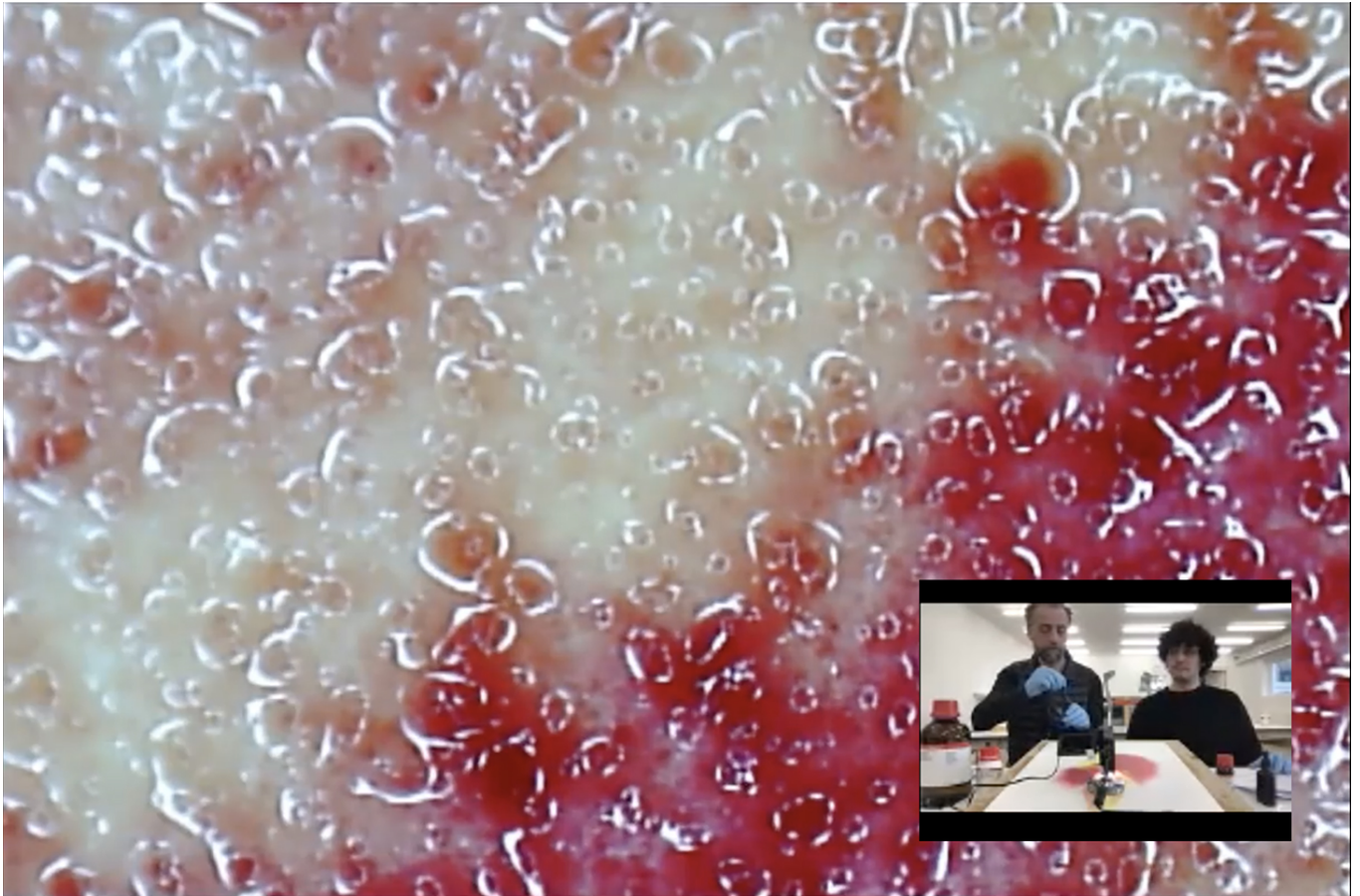
Shaw’s demeaning of the positivist authority of microscopic test-tube evidence – whose validity he equates with angelic, metaphysical hearsay – is an unsurprising case of poetic skepticism towards scientific reductionism. However, skepticism of the attack-defense model persevered in the medical community too, as a number of conditions (rheumatoid arthritis, for example), remained without a designated guilty pathogen, and so

were left unexplained. Seemingly deviant immune responses, such as allergies and immune system overreactivity, increasingly captured the interest of researchers across Europe and in the US, whose experiments in the first decades of the twentieth century involved discoveries or hypotheses of autoreactivity. By the 1950s (and many intentionally brain-injured lab monkeys later), a breach of *horror autotoxicus* became an increasingly common explanation for previously inexplicable diseases and various chronic inflammatory conditions. “Once an immunological solecism,” write Warwick Anderson and Ian MacKay, in the postwar years “autoimmunity became widely available as a conception of disease causation,” marking “a change in contemporary assumptions about the normal human body and its pathologies, as well as a shift in theories of biological individuality and the nature of the self.”<sup>11</sup> This change by no means implied a sudden shift: autoimmunity only gradually gained adherents, remaining “a stubbornly marginal, and even farfetched” notion, which is “still emerging” and has only recently “begun to find its voice in public.”<sup>12</sup> This prolonged, oppositional emergence, Anderson and MacKay also argue, should ultimately be read as a challenge to the prevailing disease-specific therapeutic approach, and a call for a return to the constitutional, Hippocratic model that saw disease as a *biographical*, idiosyncratic process, which demands a personalized, holistic treatment.<sup>13</sup>

It could be said then that the autoimmune condition presents biomedicine with a set of paradoxes: the autoimmune body self-destructs and disaggregates on the cellular level, yet it makes itself discernible and treatable only as a person, as a whole. The individual tissues scrutinized for evidence of the immune system’s self-offensive self-defense force the perversely specialized, modern biomedical apparatus to avert its gaze from its razor-sharp microscopic lens and consider the blurred edges of an ancient, Hippocratic bird’s-eye view. Most crucially, the autoimmune subject demands not simply the saving of its bare, physiological life by means of targeted pharmacological intervention but the possibility of endowing this life with text (biography), the chance to reconstruct its story. What is this story?

### Beyond the Self-Principle

The immunologically divided body – a self intolerant of itself – can be seen as a kind of physiological analogue to the psychoanalytic split subject, never coinciding with itself, its integrity ever muddled by the dark realm of the unconscious. Just as autoimmunity can only be



Goldin+Senneby, *Star Fish and Citrus Thorn*, 2021. Lecture performance. Photo: Index Foundation.

properly treated “biographically,” the psychoanalytic “talking cure” depends on the notion that it is possible to suture the psyche’s unsayable wounds and erasures, creating a meaningful narrative of one’s self and life, fictionalized and (re)constructed as it may be. The medical discovery of autoimmunity following World War II could also be analogized to Sigmund Freud’s post-World War I discovery of the death drive, derived from his observation of psychic phenomena such as the compulsion to repeat an unpleasurable or even traumatic event. Evidence of the ego’s seemingly illogical, self-hurtful behavior revealed to Freud the uncharted psychic territory that lay “beyond the pleasure principle,” in the same way that the self-destructive autoimmune response revealed a living organism straying beyond the immunological principle of self-defense.<sup>14</sup>

To explain the death drive, Freud acknowledged the limits of his existing psychological model, and turned to microbiology for answers. He proposed, with a great deal of confabulation, that all living cells seek to return to their original, inorganic condition: inanimacy or death, the ultimate neutralization of all incoming stimuli. Although Freud did not speak of immunity, his biology-derived reading of drives as mechanisms shielding the body from excessive excitations structurally mirrors the role of immune defense. The death drive, as manifest in the compulsion to repeat a traumatic event, is an overactive and retroactive dispensation of such a shield, which compensates for the lack of protection at the actual moment of the traumatic “breach of the protective barrier.”<sup>15</sup>

Similarly to Freud, in order to explain the body’s overactive response to its living cells postwar immunologists had to acknowledge the limits of their biochemical model, and resorted to (re)theorizing the biological self, finding inspiration in cybernetics and philosophy. Unhappy with what he thought were predominantly reductionist, biochemical theories of antibody formation, Australian immunologist Frank Macfarlane Burnet sought a “communications theory of the cell,” in line with the writings of Alfred North Whitehead and Norbert Wiener, which included ideas on biological individuality and identity as a pattern-forming process of self-inheritance and self-creation.<sup>16</sup> The key immunological riddle was no longer the issue of defense against specific invaders but the mechanism of recognition and tolerance, the question of how self and nonself come to be differentiated in the first place.

In a conclusion that implied a negation of ontological selfhood, Burnet proposed the clonal selection theory, which explained that the

organism’s “immunological pattern,” i.e., self-recognition, or self-tolerance, was not hereditary, but formed during embryonic life through the mutation and cloning of lymphocytes with different antigen receptors. Those lymphocytes that have the potential to react to antigens of the body’s own tissue are destroyed and not allowed to clone, which explains the eventual development of self-tolerance. Autoimmunity, then, is an aberration of normal immunological function, a proliferation of self-reactive lymphocyte clones, which Burnet likened to a “mutiny in the security forces of a country,” a failure of communication and control in the immune system, the normal function of which he also compared to “the control of crime or delinquency or the economics of industrial society.”<sup>17</sup>

What is this mutinous army of cellular clones rebelling against? Burnet’s model is shaped not only by cybernetics – evident in his binary, one-versus-zero model of self and other – but also by the Cold War imaginary of threats to state boundaries and the normal functioning of the “industrial,” that is, capitalist, economy. His idea of self-identity might not be ontological (an organism is not “conceived” as self; it becomes one during embryonic development), but it is teleological. Self-identity is posited as a goal that a healthy immune system – and, by the logic of Burnet’s metaphors, a healthy self, healthy state, healthy economy – ultimately needs to achieve. It is no coincidence that autoimmunity is defined as the pathological inability to attain coherent selfhood precisely in the postwar era in the US, when individual freedom became a key ideological weapon in the staged American immunological response to the dreaded threat of communist, collectivist-totalitarian invasion, including a threat to the free-market economy.<sup>18</sup> Translated back into the Cold War imaginary that it came from, the autoimmune “mutiny” implied not simply pathology but also a *resistance* to the idea of individual freedom reduced to self-interest (as defined by capitalism). Burnet’s autoimmune “mutiny” may be none other than the threat of communism.

Mostly in conversation with Jacques Derrida’s reflections on autoimmunity in his late writings, philosophy and the medical humanities during the last two decades have picked up on this rebellious germ inherent in autoimmunity’s breach of the enclosures between selfhood and alterity.<sup>19</sup> Rather than an index of pathology, autoimmunity is analyzed as a concept with critical, and even political, potential, one that can point the way towards a more radical or ecological conception of life, as well as beyond human exceptionalism. Such a view would align with a general contemporary propensity to think



politics in terms of vulnerability, and the body as a ground for political subjectivation, the limitations of which Marina Vishmidt identified as grounded in a certain “ahistorical formalism.”<sup>20</sup> The perspective on autoimmunity that I wish to explore here also seeks to view it beyond the presentist terms of a generalized logic of identity and alterity based on the scientific discovery (or interpretation) of the “how” of a presumably universal biological condition. It is precisely autoimmunity as an etiological riddle, a “known unknown,” which demands that we also see it in terms of the “why” – as a historical condition, both in the sense of its historical emergence as diagnosis, as well as with regard to its growing prevalence as a debilitating, sometimes life-threatening condition whose *case history* is still open.<sup>21</sup>

05/11



Goldin+Senneby, *Star Fish and Citrus Thorn*, 2021. Lecture performance. Photo: Index Foundation.

### Etiology of the Present

This search for causes – which is very much ongoing in medical research, with a number of existing hypotheses – involves not only a novel activation of the “biographical,” Hippocratic approach, as Anderson and MacKay have argued from the perspective of medical treatment. It

also calls for a counter-presentist, historical turn that is able to situate individual stories within their broader material and historical environment. Such a turn is enacted in the artist duo Goldin+Senneby’s online lecture-performance *Star Fish and Citrus Thorn*, part of their ongoing project *Crying Pine Tree*, a novel-in-the-making about an autoimmune tree, begun in 2020.<sup>22</sup> In the performance, Goldin+Senneby read two parallel narratives: one about Élie Metchnikoff’s 1882 discovery of biological immunity, which happened when he inserted a citrus thorn into the transparent body of a starfish larva and observed its defensive reaction under a microscope. The other narrative is about the persisting effects of this discovery on the body of Jakob Senneby, one member of the artistic duo, who lives with a diagnosis of multiple sclerosis, an autoimmune condition that damages the body’s nerve sheaths. The narratives are accompanied by a live microscopic camera recording of a piece of paper being stained with three different tissue dyes, which, the artists explain, Metchnikoff used to make laboratory specimens “readable” under a microscope.

Goldin’s narration of Metchnikoff’s observation of the starfish is intertwined with Senneby’s memories of his first encounter with an MRI scan, an occasion when his own body was “made readable” to biomedical technology.<sup>23</sup> The myopic, microscopic vision of the camera is juxtaposed with Senneby’s narration of the life experiences connected to the onset of his illness, eventually proven by the MRI scan’s static image of “spots” on his brain and spinal chord, and presented to him as evidence of his autoimmunity. Senneby disbelieves the diagnosis, claiming it should rather be called “surrealism.” Senneby’s surrealist disbelief of the biomedical diagnostic apparatus is reinforced by Goldin’s parallel deconstruction of it, by means of a story that tells of biological immunity’s historical origins in the late nineteenth century. The starfish larva stabbed by a thorn and placed under a microscope to reveal its defensive response suddenly looks different, and less transparent, once the scientist observing it, Élie Metchnikoff, is presented as a Russian Jew who “had hastily left his home and university position in Odessa earlier that year, following a flare-up of antisemitic pogroms, and was living in exile on Sicily.”

Biomedical technology in *Star Fish and Citrus Thorn* can be said to encapsulate Fredric Jameson’s idea of the death of historicity in late-capitalist postmodernity, one aspect of which he describes as “the reduction of our temporality to the present of the body.”<sup>24</sup> By juxtaposing the atemporal, myopic view of the body in the

biomedical laboratory with biographical and historical narratives, Goldin+Senneby create a dialectical image that at once identifies this presentist, corporeal reductionism and activates the desire to overcome it, by providing the affected body – which is conceived as both individual and collective, as both “starfish larva” and “Jakob Senneby” – with the outlines of its history. In a twist resembling what Laurent Fournier calls an emergent “autotheoretical turn,”<sup>25</sup> here the *auto* or self is both the central object of investigation and a mere point of departure. No longer simply biographical, the *autohistorical* self is a case history of a generalized, autoimmune condition.

The outlines of such a historically conceived autoimmune condition can be read through different hypotheses as to its etiology. Research into the connection between autoimmunity and hormone production stems from the statistic that over 70 percent of autoimmune patients are women. This fact enables another link to psychoanalysis, via Freud’s research on hysteria, which also posed itself as a problem of etiology. Initially, Freud suggested that hysteria arose as a result of sexual abuse in early childhood – which he euphemistically called “seduction” – but he later retreated and suggested that abuse might not be a product of his patient’s experiences but of their imaginations, even wishful thinking, accounted for by his new theory of the Oedipal structure.<sup>26</sup> The possible social, materialist explanation was thus supplanted by a psychological, structural one, whose elements were drawn from the repertoire of myth and literature. Surely, Freud’s suggestion of sexual abuse as causative of psychological disorder must have provoked for his male colleagues a scandal similar to the “dysteleological” breach of *horror autotoxicus*, only here in a reversed logic that suggested that the hysteric condition is not self-induced, but the result of external, oppressive circumstance. Similarly, the prolonged resistance of the larger scientific and medical community to theories and experimental evidence on autoimmunity may have stemmed from the gradual rhythm of paradigm shifts in science, as well as the internalized Christian dogma of bodily integrity, and the taboo of suicide. But it was also surely related to the gendered nature of the diagnosis, and the repeated experience by patients of the dismissal of their symptoms as “merely psychological,” or even “hysterical,” which results in years, sometimes decades of living with aggravating symptoms, and without diagnosis, and thus also without treatment.<sup>27</sup> It’s all in your head!

Various hypotheses to describe autoimmunity’s rise have emerged. The infection hypothesis presumes that autoimmune

disorders, although presenting as autoreactivity, are ultimately caused by an earlier germ invasion, which went undetected.<sup>28</sup> If true, this would mean that nothing has really changed since classical immunology. The genetic hypothesis sees autoimmunity as an inherited condition, but this view is complicated by the new science of epigenetics, which shows that biology is not destiny, and genetic makeup is not simply given, but is highly dependent on environmental factors.<sup>29</sup> In fact, most explanations of the etiology of autoimmune diseases do consider environmental factors and are generally grounded in the idea of autoimmunity as a “Western” condition, with higher prevalence in industrialized nations. The pregnancy-compensation hypothesis is a recent one, based on the gendered prevalence of disease in industrialized nations and the fact that women no longer have as many children as they did in the past. The idea is that women’s immune systems, normally elevated during pregnancy, are no longer working as they might have in preindustrialized eras.<sup>30</sup> The hygiene hypothesis – which does not sit well with the current pandemic – proposes that members of hyper-sterilized, fully vaccinated, affluent societies have no bugs left to fight, so their immune systems have weakened and turned against themselves.<sup>31</sup> According to this logic, an excess of immunity causes autoimmunity. This idea is perhaps more frightening when applied to the real threat of so-called superbugs, which have developed antibiotic resistance, and which are thus a prime example of the immunological turning autoimmunological.<sup>32</sup>

Unlike classical epidemiological nemeses in the form of plagues, which have haunted the world for centuries, and which are exacerbated by poverty and poor hygienic conditions, autoimmunity has been classified among the so-called “diseases of affluence,” as opposed to diseases of poverty. Such a view is complicated by a demonstrated link between traumatic experience and autoimmunity, which would help explain the high prevalence of autoimmunity in both industrialized nations and underprivileged social groups, such as women and ethnic minorities.<sup>33</sup> This simultaneity of affluence and scarcity, the slippage of one into the other, is the most symptomatic point of the etiological inquiry into autoimmunity, and is most evident in the prominent place accorded to “Western” lifestyle and diet as contributing factors of autoimmune disease, including “high-fat and cholesterol, high-protein, high-sugar, and excess salt intake, as well as frequent consumption of processed and ‘fast foods.’”<sup>34</sup> Such a diagnosis of “excess” yet nutritionally deficient “intake” points to exactly the kind of fake, excess abundance of

capitalist consumerism that consolidated under the restructured, US-dominated feeding of consumer-capitalist desires in the aftermath of World War II, right at the time when autoimmunity was proposed as a theory of sovereign selfhood gone wrong.

Under the hegemonic imperative to pursue happiness by way of the “excess intake” of endless consumption, the sovereign, immune, “Western” self becomes autoimmune and dissolves in the very enjoyment of its “pursuit of happiness,” which, as Antonia Majaca writes, is nothing but a US liberal, Jeffersonian nickname for the Lockean “pursuit of property.”<sup>35</sup> The self-destruction evidenced by such self-interested pursuit reveals autoimmunity as the very “illogical logic” of immunity, as Derrida suggested.<sup>36</sup> But the slippage of immunity into autoimmunity can also be seen as a historical succession. If immunity is understood as the social and political logic of sovereignty grounded in the nineteenth-century redefinition of healing as war by other means (the Hobbseian natural right to self-defense), then both the Freudian death drive and autoimmunity suggested the dark side of immunity at two historical moments starkly marked by death and catastrophe. The Freudian death drive signaled the final blow to the aggressive libido of the modern, bourgeois, rationalist cogito of European capitalist coloniality following World War I and the end of the “age of empire.”<sup>37</sup> Following World War II, and the devastating seek-and-destroy immunitarian logic of Auschwitz and Hiroshima, the discovery of autoimmunity extended this beyond-pleasurable hit to this cogito’s surviving body, which then dissolved in the “excess intake” of “pleasure” over the course of the global capitalist expansion. In contrast to this suicidal, (auto)immunitarian logic, international socialist and decolonial movements, as twentieth-century alternatives to global capitalism, have proposed and practiced more constructive ways for the dissolution of the prison of the liberal-capitalist self and its key tenet, private property. But by 1989, “Western affluence,” meaning capitalist scarcity disguised as abundance, was everywhere, and the riddle of the autoimmune condition now a global problem.

The autoimmune condition presents a set of diverse, chronic symptoms that are not immediately deadly, but rather come and go, numb and debilitate the limbs, cloud the brain, leave a body without energy to perform even the most ordinary tasks, acutely inflame the tissues, and gradually eat at the organs. This accumulation of symptoms on the individual level echoes the current moment of prolonged planetary crisis, a sort of slow apocalypse in which “immunological” defense – in the form of

protecting individual freedoms and private property, policing national and racial borders, extracting labor and resources and exterminating competition while maximizing production and consumption – has turned, or rather revealed itself to be, suicidal. This slippage of immunity into autoimmunity is more immediately obvious in concrete examples that mark contemporary reality in the social and geopolitical peripheries of global capital. The devastating story that Sharmila Rudrappa tells of southern Indian farmers who committed suicide by poisoning themselves with the same pesticide used to protect their sugarcane crops speaks to the autoimmune logic of capital, which forced farmers to kill themselves so as not to suffer the even worse consequences of not being able to pay off their high-interest loans once their crops remained unpaid-for or unsold.<sup>38</sup>

Still, in the mirror of autoimmunity seen as a condition of “Western affluence,” global capitalist coloniality appears as a death by a thousand cuts. There are periods of *remission*, when it all seems better, or even when it seems like nothing at all; when one doubts the diagnosis, attributing the symptoms to a number of other potential causes. But the onset of a *flare*, a sudden, dramatic reappearance or worsening of the symptoms, incites yet another search for *the absent cause*, an image that would somehow make evident the exact structure and genealogy of suffering. However, this image never simply solidifies into a resolute causative agent, but pixelates in the never-fully-collectable sum of its effects, just like in Louis Althusser’s notion of “the last instance,” with which he redefined the classical Marxist understanding of the superstructure’s dependence on the (economic) base.<sup>39</sup>

### **Etiological Grand Narratives and our Daily Bread**

The current moment seems to be a time when the conspicuousness of the crisis – the exacerbation of “symptoms” – is triggering a feverish quest for a cause, for an image of the present’s etiology. Theoretical and academic concepts such as the Anthropocene, the Capitalocene, ancestrality, coloniality, cosmism, and big history are all marked by procedures of historicization that attempt to name an ultimate cause, or origin, of the catastrophe of the present, whether they find the “culprit” to be the human, capital, the colonial matrix of power, (post-)Kantian correlationism, death, or even the Big Bang. Evident also in more “profane” realms – such as nutrition, where “paleo” diets have become prominent (as a way of overcoming the Neolithic shift to a sedentary life and nutrition based on grains), popular histories of *Homo*

07/11

e-flux journal #119 — june 2021 Ivana Bago  
The Autoimmune Condition: A Report on History

*sapiens* and its historical duel with other human species, all the way to fringe or conspiracy theories on the activity of ancient alien civilizations on earth – this resurgence of interest in the *longue durée* and deep history in the last decade indicates a negation of postmodernity's presumably lethal duel with history and its grand narratives.<sup>40</sup> If the postmodern condition was characterized by a spatialization of time and a dissolution of historicity into a set of fragmented and dispersed narratives and “language games,” now grand narratives are called back onto the stage, if only in the form of etiological reconstruction, invoked as a kind of *deus ex machina*, to salvage the unsalvageable.

As has been shown, the autoimmune condition can be seen to encapsulate this shift, from a spatialized present reduced to a diagnosed body, to the etiological search for the biographical and historical causes of diagnosis. But the presentist ideology of evidence-based science, grounded in anonymous peer reviews and double-blind studies – despite the acknowledged “reproducibility crisis”<sup>41</sup> – is ill-suited for proving hypotheses which depend on so many “environmental” factors, and whose causation becomes evident only in the Althusserian last instance. The (auto)biographical or the testimonial can only partly help, since as a matter of principle they must be relegated to merely “anecdotal” evidence. Such an impasse, of which the problem of diagnosing autoimmunity is but one example, has engendered another contemporary symptom: a growing distrust in science and the scientific method, and a recourse to a host of alternative modes of treatment, from the new fields of integrative and “functional” medicine, to non-Western and vernacular medicine, shamanism, various new-age practices, special diets and fasting methods, Instagram guru-doctors (with their supplement lines), Google diagnostics, Facebook groups dedicated to specific diagnoses, and a meeting of all the above in a whole new conceptual territory called “conspirituality.”<sup>42</sup>

One of the most frequently discussed remedies across these diverse “alternative” realms is changing one's diet – again reflecting the prominent place of “excess intake” in societies of “Western affluence,” but also a sort of autonomization of food in Western societies, where it appears less as nourishment and more as an opportunity for individual (culinary) creativity, with restaurants turning into new museums mapped and reviewed as tourist attractions, with food blogs, food photography, cooking shows, celebrity chefs, and Michelin stars escalating in proportion to the lack of time,

energy, and resources that the late-capitalist subject has to actually buy, grow, and prepare nourishing food for themselves and their loved ones. In this deprivation that hides behind overabundance, various “autoimmune protocols” suggest that autoimmunity may be remedied by “elimination diets,” or methods of fasting based on the Nobel-awarded discovery of autophagy (a kind of positive analogue to autoimmunity, in which cells regenerate by “eating themselves”).<sup>43</sup>

Interestingly, within this repertoire of triggering foods, one again finds items that lead beyond the physiological implications of their consumption, and into history. One of the most frequently suspected culprits of autoimmune reactions, gluten, could be seen in light of the biochemical theories of protein molecules causing inflammation. But it also appears as the key antihero of recent histories that are, quite literally, “against the grain,” in proposing the cultivation of wheat as a key factor that helped give birth to the now hegemonic form of governance, the state – which, it could be added, is a paradigmatic case of immunological enclosure, with its territorial and national borders protecting against “invading” migrant others.<sup>44</sup> The already mentioned “paleo” diets remove all grains, based on archeological findings of the surprisingly good health of our paleolithic forefathers, and the very late – from the perspective of deep history – introduction of grains in the Neolithic era, to which human bodies have still not adapted. In the paleo dietary solution, then, autoimmunity is cured by means of a historical regression beyond the immunitarian, or the sedentary, land-grabbing, and domesticating mode of life and production associated with the Paleolithic's antipode, the Neolithic era. Another suspected food, dairy, is an example of a food adopted by many non-Western nations as a symbol of civilization and affluence, at great environmental cost.<sup>45</sup> Sugar, of course, is most intimately linked with the history of colonialism and its drawing and policing of the boundary between savagery and refinement.<sup>46</sup>

### Waking Up From the End of History

Even if all these ventures from the present-in-crisis into deep history are, as I suggested, primarily etiological quests, which do not necessarily translate into social and political action to remedy the consequences of the individual and collective crisis, taken together, they still enact an ever-stronger desire for such remedy. Waking up from the dream of the end of history has renewed the energy to reconstruct alternative, previously suppressed visions of both the history and the future, and it has also fueled new struggles. Anti-racist and indigenous



movements, for example, are not grounded simply in the voicing of immediate concerns, but in an articulation of these concerns as histories of the present. For the Black Lives Matter movement, racially motivated police violence cannot be disentangled from the US streets marked by historical monuments coextensive with the history of slavery, racism, and colonialism. Even if the activation of such counter-histories includes multiple and diverse individual and collective experiences, they are no longer the disconnected “narratives,” let alone “language games,” of postmodernity, whose effect is exhausted in their very multiplicity. Instead, they are instances of “storytelling for earthly survival,”<sup>47</sup> specific histories that gesture toward universality, and that meet in the common point of pushing against the enclosures of the unsupportable, unlivable present.

Such emancipatory historicity, which arises in the midst of acute crisis, is not without precedent, and it is no wonder that today Walter Benjamin’s “theses on history,” written during World War II, hold such theoretical and poetic appeal.<sup>48</sup> Much less cited is *The Crisis of European Sciences*, the text of another German Jewish philosopher, Edmund Husserl, written in the 1930s, in the midst of the Nazi takeover.<sup>49</sup> In this text, Husserl acknowledged the limits of his own earlier “phenomenological reduction” method, defined as a scientific-philosophical investigation of the relation between an intentional consciousness and its intended object, and proposed what he called “historical reduction,” based on the discovery that no object nor consciousness exists simply here and now, without history. Beneath “layers” of what he called “the crisis of European sciences,” instantiated by a mathematized science and philosophy that emerged following Galileo, lay a “lifeworld,” whose “sediments” and “horizons” needed to be unearthed if humanity is to overcome the condition of living in an unlivable world.<sup>50</sup>

Finally, let us not forget also the patient’s protest – epitomized by Goldin+Senneby’s performative conflating of autoimmunity with surrealism – against the very terms of diagnosis and its suggested treatments. Who knows, maybe autoimmunity will turn out to be surrealist after all. Collected as individual pixels that merge into an image, no matter how blurry, both the “evidence-based” and “anecdotal” instances of storytelling that tackle the known unknown of the autoimmune condition coalesce into a *whole story*, the telling of which may point to a way out of planetary (auto)destruction. At their center is the autoimmune body, which has responded to social autonomization and isolation by multiplying within itself, in a

desperate attempt to compensate for the loss of both politics and sociality, in a gesture of weak heroism, pledging its “consent not to be a single being”<sup>51</sup> – pledging also, as this story has hoped to tell, to be a not-single being with history.

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09/11

e-flux journal #119 — june 2021 Ivana Bago  
The Autoimmune Condition: A Report on History

- 1  
Jean-Luc Nancy, *Being Singular Plural* (Stanford University Press, 2000).
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For the historical appearance of this concept of biological immunity in the nineteenth century, and in connection to responses to the cholera pandemic in Europe, see Ed Cohen, *A Body Worth Defending: Immunity, Biopolitics, and the Apotheosis of the Modern Body* (Duke University Press, 2009).
- 3  
With the word “army” I am referencing a Darwinian discourse that pits the immunocompromised against the group that presumably can fight. My usage is also reminiscent of the term “loser militia” that artist Jesse Darling uses in her work *Neoliberal Agitprop Poster* (2013). See the discussion of this and other works by Darling in Giulia Smith, “Chronic Illness as Critique: Crip Aesthetics Across the Atlantic.” *Art History* 44, no. 2 (2021): 286–310.
- 4  
See <https://factor.niehs.nih.gov/2018/4/science-highlights/autoimmunity/index.htm>.
- 5  
Ed Cohen, “Self, Not-Self, Not Not-Self but Not Self, or the Knotty Paradoxes of ‘Autoimmunity’: A Genealogical Rumination,” in *Autoimmunities*, ed. by Stefan Herbrechter (Routledge, 2018), 29.
- 6  
Jean-François Lyotard, *The Postmodern Condition: A Report on Knowledge* (Manchester University Press, 1984).
- 7  
“We want to see how autoimmunity became thinkable,” write Warwick Anderson and Ian R. MacKay in their conceptual history of autoimmunity: *Intolerant Bodies: A Short History of Autoimmune Disease* (Johns Hopkins University Press, 2014), 4. The adjective “autoimmune” was first used in 1951, and the noun “autoimmunity” coined in 1957. The brief overview of the history of autoimmunity in this paragraph and the next is based on Anderson and MacKay’s account.
- 8  
Cohen, *A Body Worth Defending*. 3. Cohen’s book provides a masterful analysis of this merger’s (bio)political, economic, and medical implications.
- 9  
This prohibition against self-harm was proposed by the immunologist Paul Ehrlich (1854–1915), who called the idea of “autotoxins” “dysteleological in the highest degree.” Cited in Arthur M. Silverstein, “Autoimmunity: A History of the Early Struggle for Recognition,” in *The Autoimmune Diseases*, 6th Edition, ed. Noel R. Rose and Ian R. MacKay (Academic Press), 10.
- 10  
Cited in Anderson and MacKay, *Intolerant Bodies*, 34.
- 11  
Anderson and MacKay, *Intolerant Bodies*, 48–49.
- 12  
Anderson and MacKay, *Intolerant Bodies*, 2–3.
- 13  
Anderson and MacKay, *Intolerant Bodies*, 3–4.
- 14  
Sigmund Freud, “Beyond the Pleasure Principle,” in *Beyond the Pleasure Principle and Other Writings* (Penguin Classics, 2003).
- 15  
Freud, “Beyond the Pleasure Principle,” n.p.
- 16  
Anderson and MacKay, *Intolerant Bodies*, 74–76. This theory, which earned Burnet a Nobel Prize in 1960, is still accepted today as the mechanism of the immune response.
- 17  
Burnet, cited in Anderson and MacKay, *Intolerant Bodies*, 89.
- 18  
Anderson and MacKay situate the discovery of autoimmunity within the Cold War context of “cybernetics, and theories of command and control” (143) as well as “significant postwar investments in clinical research” (49), which Burnet and his colleagues benefited from, especially in the US. For an insightful analysis of the Cold War mobilization of the “post-ideological ideology” of individual freedom, see Antonia Majaca, “Odysseus of the Nimble Wits: The Spirits of Totalitarianism and the Cultural Cold War’s Entscheidungsproblem,” in *Parapolitics: Cultural Freedom and the Cold War*, ed. Anselm Franke, Nida Ghouse, Paz Guevara, and Antonia Majaca (Sternberg Press, 2021), 123–49.
- 19  
Jacques Derrida, “Faith and Knowledge,” in *Acts of Religion*, ed. Gil Anidjar (Routledge, 2002), and *Rogues* (Stanford University Press, 2003).
- 20  
Marina Vishmidt, “Bodies in Space: On the Ends of Vulnerability,” *Radical Philosophy* 2, no. 8 (2020): 35. For a perspective that focuses more specifically on contemporary art, see Smith, “Chronic Illness as Critique.”
- 21  
In fact, Cohen’s “known unknown” refers not just to the

unknown etiology, since even on the level of the accepted description of (auto)immune response, grounded in Burnet's account of differentiation between self and other, it is still unclear why the body would not launch a lymphocyte response to "friendly" bacteria in the gut microbiome, or a fetus in pregnancy – all questions that some immunologists have posed to challenge the classical model. Cohen thus wonders whether "immunology's unquestioned appropriation of a *logical* opposition – derived from and embedded in Western thought's governing epistemo-political ontology – as a *bio*-logical axiom unnecessarily limits our capacity to grasp our own complicated nature as living beings." Cohen, "Self, Not-Self, Not Not-Self but Not Self," 30.

22  
The video recording of the lecture-performance, which took place at Indeks, Stockholm, is here:  
<https://vimeo.com/539030362>. See also the essays by Maria Lind and Brian Kuan Wood written in conjunction with Goldin+Senneby's exhibition "Insurgency of Life" at e-flux in New York, 2020: Maria Lind, "What Is Wrong with My Nose: From Gogol and Freud to Goldin+Senneby (via Haraway)," *e-flux journal* 108 (April 2020) <https://www.e-flux.com/journal/108/325823/what-is-wrong-with-my-nose-from-gogol-and-freud-to-goldin-senneby-via-haraway/>; Brian Kuan Wood, "Insurgency of Life," *e-flux journal* 109 (May 2020) <https://www.e-flux.com/journal/109/331477/insurgency-of-life/>.

23  
Goldin+Senneby, *Star Fish and Citrus Thorn*, lecture-performance script shared with the author by email. All ensuing quotes from the discussion of the performance are from this script.

24  
Fredric Jameson, "The Aesthetics of Singularity," *New Left Review*, no. 92 (2015): 128.

25  
"Extra-institutional and, perhaps, extradiscursive, autotheory has the potential to become 'the next big turn' in visual culture and literary studies." Lauren Fournier, *Autotheory as Feminist Practice in Art, Writing, and Criticism* (MIT Press, 2021), 2.

26  
The argument proposing that Freud's retreat on his "seduction theory" was not performed in good faith has been controversially made by Jeffrey Moussaieff, *The Assault on Truth: Freud's Suppression of the Seduction Theory* (Penguin Press, 1985).

27  
This is the experience recounted

by Carolyn Lazard in their text "How to be a Person in the Age of Autoimmunity," *The Cluster Mag*, January 2013. Lazard identifies as nonbinary; the dismissal of their complaints as "hysterical" nonetheless illustrates the gendered response of the medical professionals who treated Lazard. For more on Lazard's own artistic work on autoimmunity, see Smith, "Chronic Illness as Critique."

28  
Yehuda Shoenfeld, *Infection and Autoimmunity* (Academic Press, 2015).

29  
On the philosophical implications of epigenesis, see Catharine Malabou, *Before Tomorrow: Epigenesis and Rationality* (Polity, 2016).

30  
Olga Khazan, "A Breakthrough in the Mystery of Why Women Get So Many Autoimmune Diseases," *The Atlantic*, June 18, 2019.

31  
H. Okada et al., "The 'Hygiene Hypothesis' for Autoimmune and Allergic Diseases: An Update," *Clinical and Experimental Immunology* 160, no. 1 (2010): 1–9.

32  
The WHO cites antibiotic resistance as "one of the biggest threats to global health, food security, and development today" <https://www.who.int/news-room/fact-sheets/detail/antibiotic-resistance>.

33  
Bessel Van der Kolk, *The Body Keeps the Score: Brain, Mind and Body in the Healing of Trauma* (Penguin Books, 2015).

34  
Arndt Manzel et al. "Role of 'Western Diet' in Inflammatory Autoimmune Diseases," *Current Allergy and Asthma Reports* 14, no.1 (2014): 1.

35  
Majaca, "Odysseus of the Nimble Wits," 140.

36  
Derrida, *Rogues*, 123.

37  
Eric Hobsbawm, *The Age of Empire: 1875–1914* (Abacus, 2014).

38  
Sharmila Rudrappa, "Famines, Fertility Interventions, and Death: Modernization Projects in Southern India," *e-flux architecture*, April 2021 <https://www.e-flux.com/architecture/exhausted/388538/famines-fertility-interventions-and-death-modernization-projects-in-southern-india/>.

39  
See the discussion of Louis Althusser's "absent cause" in

11/11

e-flux journal #119 — June 2021 Ivana Bago  
The Autoimmune Condition: A Report on History

Bruno Bosteels, *Badiou and Politics* (Duke University Press, 2011), 55–59, or, via Jacques Rancière's reading, in Jaleh Mansoor, "Militant Landscape: Notes on Counter-Figuration From Early Modern Genre Formation to Contemporary Practices, or, Landscape After the Failure of Representation." *ARTMargins* 10, no. 1 (2021): 20–38.

40  
Lyotard, *The Postmodern Condition*.

41  
Fiona Filder and John Wilcox, "Reproducibility of Scientific Results," *Stanford Encyclopedia of Philosophy* (Winter 2018 Edition) <https://plato.stanford.edu/entries/scientific-reproducibility/>.

42  
Ironically, one of the major points of contention that has drawn a boundary between the supposedly oppositional realms of science and anti-science – namely, vaccination – was the invention of a nineteenth-century scientist who took a cue from vernacular knowledge, borrowing the anecdotal evidence of a farmer who successfully inoculated himself and his family against cowpox. Roy Porter, *The Greatest Benefit to Mankind: A Medical History of Humanity From Antiquity to the Present* (Fontana Press, 1999).

43  
See <https://www.nobelprize.org/prizes/medicine/2016/press-release/>.

44  
James C. Scott, *Against the Grain: A Deep History of the Earliest States* (Yale University Press, 2017). Scott borrowed his title from an earlier investigation along the same lines: Richard Manning, *Against the Grain: How Agriculture Has Hijacked Civilization* (Paw Prints, 2008).

45  
Felicity Lawrence, "Can the World Quench China's Bottomless Thirst for Milk?" *The Guardian*, March 29, 2019 <https://www.theguardian.com/environment/2019/mar/29/can-the-world-quench-chinas-bottomless-thirst-for-milk>.

46  
Diane Kriz Kay, *Slavery, Sugar, and the Culture of Refinement Picturing the British West Indies, 1700–1840* (Yale University Press, 2008). It is of course precisely refined sugar, as well as refined wheat, that is thought to be the most detrimental to health.

47  
Donna Haraway, *Staying With the Trouble: Making Kin in the Chthulucene* (Duke University Press, 2016).

48

For one of the most theoretically rigorous and illuminating readings, see Sami Khatib, "Where the Past Was, There History Shall Be," in "Discontinuous Infinities: Walter Benjamin and Philosophy," ed. Jan Sieber and Sebastian Truskolaski, special issue, *Anthropology & Materialism* (2017) <http://am.revues.org/789>.

49  
Edmund Husserl, *The Crisis of European Sciences and Transcendental Phenomenology*, trans. David Carr (Northwestern University Press, 1970).

50  
Although Husserl speaks of "the crisis of the European sciences" as inherent to the "internal" historicity of science and philosophy, his account must also be seen against the background of his own experience as a philosopher of Jewish origins who, with the rise of the Nazis, suddenly lost his identity as a German and European intellectual, together with his right to partake in intellectual life. See Ronald Bruzina, *Edmund Husserl and Eugen Fink: Beginnings and Ends in Phenomenology, 1928–1938* (Yale University Press, 2004).

51  
*Consent Not to Be a Single Being* names a trilogy of Fred Moten books published by Duke University Press: *Black and Blur* (2017), *Stolen Life* (2018), and *The Universal Machine* (2018).