

Derrida, Autoimmunity, and Islamic Medicine

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Abstract

Autoimmunity often refers to a medical condition, yet it was used by Jacques Derrida to theorize the conflict between religion and science as well as Islam and the West. Derrida's use of the term autoimmunity became widespread after he used it to diagnose the "American Organism" in the aftermath of the attacks on the Twin Towers in New York City on September 11, 2001. Most commentary on Derrida's political diagnosis have focused on his reading of Islam as an Other within the US body politic. This essay takes a different approach and reads Derrida's diagnosis within the tradition of Islamic Medicine. If we are to truly rethink the othering of Islam as a viral autoimmune disease in the body politic of the US empire, we need to understand Islamic thought as forming the very basis of the West's image of itself. I argue that Islam is far from a self-contained category opposing the West: a virus or a plague attacking it from the outside. Rather, Islam is the swallowed-within of the West itself, to which, the West continuously returns/reacts in an autoimmune fashion.

Keywords

Autoimmunity, Derrida, 9/11, Islamic Medicine, Virus

The immune system is not only a network of organs in the body but a political concept that has been traced to Roman law. Derived from the Latin *immunis*, our contemporary notion of immunity comes from the Roman legal system where immunity meant exemption from municipal service (Esposito 2011; Cohen 2009).

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As it entered medical discourse, it brought with it both a sense of exceptionality: immune are those (in the context of a pandemic) who will not get sick, and that of risk, since immunization is, as Roberto Esposito has written, “a protective response in the face of a risk” (2011, 1). The term *immunity* has thus been used in political philosophy to describe a defensive sovereign entity: a body or a nation that guards itself against the risk of an attack.

If immunity is what protects a sovereign entity against attacks, *autoimmunity* is the condition of a body attacked by its own immune system. The latter term also has a political history, which began in the twenty-first century with its use as a metaphor for understanding the planes that crashed into the Twin Towers in New York City on September 11, 2001. Jacques Derrida, in an interview with Giovanna Borradori titled “Autoimmunity: Real and Symbolic Suicides,” drew on the medical notion of autoimmunity to describe the newly unfolding declaration of the war on terror. Over the course of the dialogue, Derrida proposed an image of the United States that surpassed its territorial boundaries into an “American organism” spreading across the globe (Derrida 2003, 91). Where does the US begin and end, Derrida contemplated, when it is a hegemonic entity with its rule of law extending beyond its political borders, when “American interests” expand the political body of this organism in various directions across the globe?

Within this expanded image of the American “organism,” Derrida saw an autoimmune condition: a “suicidal” organism attacking itself from the inside. Derrida’s autoimmune diagnosis required, first, that we imagine the US as a swelling entity, an “organism” with multiple limbs, and second, that we see an inner malfunction (or malice) that turns on the body in a suicidal fashion. If the former is the US body politic, the latter is a “suicide bomber,” who goes by the name “terrorist.” Who and where is the terrorist? Derrida admits that the “terrorist” is incredibly vague and indiscernible, coming from “anonymous forces that are absolutely unforeseeable and incalculable” (Derrida 2003, 98). The aggression, he writes,

comes from the inside, from forces that are apparently without any force of their own but that are able to find the means, through ruse and the implementation of high-tech knowledge, to get hold of an American weapon in an American city on the ground of an American airport. Immigrated, trained, prepared for their act in the United States by the United States, these *hijackers* incorporated, so to speak, two suicides in one: their own (and one will remain forever defenseless in the face of a suicidal, autoimmunitary aggression—and that is what terrorizes most) but also the suicide of those who welcomed, armed, and trained them. (95)

Derrida’s autoimmune diagnosis thus imagines a body politic whose internal defense system has taken its own tissues as its site of attack. Terrorists are

“incorporated” forces that attack the body they inhabit. Derrida makes his biologic more explicit when he reads the attack on the World Trade Center as “targeting of the heart, or rather, the symbolic head of the prevailing world order” (95). While until September 11, it was the Cold War that had shaped the political image of war on a global scale, autoimmunity would henceforth define the US body politic.

What can we make of Derrida’s autoimmune diagnosis? Anjuli Fatima Raza Kolb, in her recent study *Epidemic Empire*, argues that Derrida’s autoimmune diagnosis continues a longstanding theorization of Islam as a plague. “We continue to observe the wedding of terrorist violence to the epidemic imaginary in the use of this figure by writers, public intellectuals, law makers, scientists, and policy experts, along the political spectrum” (Raza Kolb 2021, 4). She writes, “For Donald Rumsfeld, terrorism is a ‘cancer on the human condition,’ for the journalist Hans Magnus Enzenberger it’s a retrovirus, ‘a pathological copy of the organism it attacks,’ for Boris Johnson, it’s a ‘plague,’ for Jacques Derrida it is a ‘suicidal autoimmunity aggression’” (4). The problem with these metaphorical languages, Raza Kolb argues, is that they lead to epidemiological solutions whereby data collection and surveillance technologies come to aid military attacks that target the site of so-called disease, further racializing populations into contagion and eradication.

Raza Kolb’s study is an important critique of the epidemiological bio-logics that have long protected the health of sovereign body politics (such as the “American organism”) at the expense of eradicating those targeted as diseased. Metaphorization of disease has supported invasive military attacks. Furthermore, the traffic in metaphors is not unidirectional (going from the medical to the political) but move in the opposite direction as well, producing autoimmunity as a suicidal body at war with itself. While the conceptualizations of the virus in the early years of the twentieth century presented the virus as a foreign invader attacking an individual’s immune system (Cohen 2009; Martin 1994; Wald 2008), autoimmunity—coined in the 1950s—visualized a body whose immune system was unable to distinguish between self and other. As the historians of autoimmunity have noted, autoimmunity was a difficult medical concept to accept because “the body’s failure to recognize itself, its capacity to treat itself as foreign, seems both sinister and bizarre” (Anderson and Mackay 2014, 3).

We can accept that epidemiological metaphors have been used to promote war, displacement, and the eradication of “diseased” bodies, as well as presenting autoimmunity as a body at war with itself, hence promoting invasive medical “attacks.” My aim in this essay, however, is to enter this debate from an entirely different angle. Rather than focusing on the detrimental effects of viral and autoimmune imaginaries on the surveillance and targeting of Muslim populations, I want to ask if centering Islamic thought as a site of medical and philosophical

knowledge can contribute to how we understand Derrida's use of autoimmunity as a diagnosis of the "American organism." What can we learn, in other words, if we shift the balance of who produces theoretical knowledge and turn to Islamic medicine for a political diagnosis of the present? If Islam has long been thought of as a plague, a virus, or a disease in the West (a vaguely defined geographical and temporal designation), what does Islamic medicine have to say about such categories?

I use the term *Islamic medicine* to refer to the medico-philosophical thought system that historically developed in the medieval Islamic world (from the eighth through the eleventh centuries), and which has generally been understood by historians as a bridge between classical Greco-Roman philosophy and what we understand as Western medicine today (Pormann and Savage-Smith 2007). If this historical foray into medieval science in the Muslim world seems odd at the outset, it is because, as one historian puts it, "among the great scientific traditions in the history of mankind, none has been treated by Western scholars with more contempt, subtle as it may often present itself, than the Arabic tradition" (Kahl 2003, 1). Despite this contemptuous reputation, my aim is to lay out the historical significance of Islamic medicine not only to how we theorize viruses and disease but to understanding Derrida's use of autoimmunity as a political and philosophical concept.

While Derrida began to use the term *autoimmunity* in his later writings, it is not the first medical term that appears in his body of work. His turn to autoimmunity was long foreshadowed by his interest in Plato's use of the Greek concept of *Pharmakon* (often translated as both poison and medicine), which, as I elaborate further below, has direct bearing on how he understands the medical notion of autoimmunity. Greek thought is routinely understood as the direct precedent for Western philosophy. Yet this genealogy carves out the major Arabic translation movement in the medieval Islamic world that not only preserved but extensively interpreted, reconceptualized, and transmitted Greek knowledge to the Latin West. As I argue below, if we are to truly rethink the othering of Islam as a viral autoimmune disease in the body politic of the US empire, we need to understand Islamic thought as forming the very basis of the West's image of itself. Thinking with Islamic medicine allows us to see the fictional construction of Islam as an "other" of the West.

Common sense today holds Islam to be a religion that stands in opposition to a West whose identity is based on secular science. Yet Derrida's first introduction of the term *autoimmunity* in his philosophical works was aimed at erasing the binary logic through which revealed religions stand in opposition to secular technoscience. Guiding us to understand the very idea of "religion" as etymologically based in the notion of return or repetition, Derrida shows the nestling of religion and science into one another. Building on Derrida's thesis, my

contention in this essay is that Islamic medicine is the historical moment in which revealed religions absorbed (digested and fermented) Greco-Roman philosophy, the outgrowth of which became Western science. In this sense, just as Greek thought is the basis of Islamic science so is Islam the swallowed within of Western science. Derrida's autoimmune diagnosis, I conclude, names the refusal of the West to see Islam as an inherent part of itself.

Autoimmunity and *Pharmakon*

The term *autoimmunity* began to appear in Derrida's writing in his essay "Faith and Knowledge" (1998) but became more central to his thinking in the long interview with Borradori, cited above, conducted shortly after September 11, 2001, and later in *Rogues* (2005). As Michael Naas has noted, despite its appearance in Derrida's work in the mid-1990s, the term *autoimmunity* became "developed in a more accelerated fashion after 9-11" so that it became "yet another name, in some sense the last, for what for close to forty years Derrida called 'deconstruction'" (Naas 2006, 18). Turning to autoimmunity was hence not a departure from Derrida's existing philosophy, or a unique coinage for the assessment of US politics after 9/11, but a further development for Derrida of a key concept in his philosophy.

Understanding the relationship between autoimmunity and deconstruction is simple enough. If we view autoimmunity as an unraveling of a biological self (an organism whose immune system turns against itself) (Timár 2015),¹ then it is the medical term given to what Derrida had already called deconstruction: an unraveling of a discourse from the inside, a text that turns against itself through its own inherent contradictions. While deconstruction, Naas writes, is "a 'method' or 'textual strategy' aimed at disrupting the self-identity of a text or concept, the organization of discourse in the shape of what we assumed to be well-formed organic bodies, 'autoimmunity' appears to name a process that is inevitably and irreducibly at work more or less everywhere, at the heart of every sovereign identity" (2006, 15). For Naas, and others (Al-Khafaji 2022; Timár 2015), while earlier terms such as *deconstruction* and *différance* dealt more specifically with texts and discourses, *autoimmunity* was used more capaciously taking any "sovereign entity" such as bodies or body politics, as its site of critique.

So why did Derrida borrow a term from the medical sciences to name an already existing method in his work? This is perhaps because deconstruction had risen, in part, through engagement with the medical notion of *Pharmakon*. In his essay, "Plato's Pharmacy," first published in *Tel Quel* in 1968, Derrida described writing as *Pharmakon*, a concept he translated as "'remedy,' 'recipe,' 'poison,' 'drug,' 'philter,' etc." (Derrida 1981, 71). As this list suggests, and as Derrida elaborately develops in his text, *Pharmakon* is a term with an inherent contradiction. It is both poison and medicine that can be death-dealing or life-giving if administered as a drug to a living organism. Writing, in Derrida's study, was the *Pharmakon* applied

to oral speech (*logos*). Derrida argues that in Plato's text, *logos* (or oral speech) appears as a living organism. He writes,

Logos, a living, animate creature, is thus also an organism that has been engendered. An *organism*: a differentiated body *proper*, with a center and extremities, joints, a head, and feet. In order to be "proper," a written discourse *ought* to submit to the laws of life just as a living discourse does. Logographical necessity (*anangkē logographikē*) ought to be analogues to biological, or rather zoological, necessity. Otherwise, obviously, it would have neither head nor tail. Both *structure* and *constitution* are in question in the risk run by *logos* of losing through writing both its tail and its head. (1981, 79)

In this quote, the oral and the written are found to be in opposition in Plato's text. The oral is the breath that animates the body of a discourse. The body is the written text, and as such the *Pharmakon*, that at once gives discourse "its head and its tail," a corporeal structure and composition, and puts it at risk of losing its corporeality. Within this zoological image, the discursive organism becomes embodied in writing, a *Pharmakon* (or a recipe, a method, or a remedy) that gives the ephemerality of *logos* its composition. Derrida's analysis of Plato's *Pharmakon* highlighted the fallacy of the body/soul opposition inherent in the writing/*logos* analogy by pointing to the (dis)enabling potential of writing in bringing a discourse to life.

It seems that there are two ways of interpreting Derrida's engagement with Plato's *Pharmakon*. On the one hand, *Pharmakon* is the poison/remedy that is administered for what is assigned as an illness. Writing, in Plato's text, is offered by the Egyptian god Theuth to the Egyptian king as a "remedy" (*Pharmakon*) for forgetfulness. Here, a malady has already been diagnosed (forgetfulness), to which the *Pharmakon* (written text) is a remedy. The Egyptian king refuses the gift of writing—for it is understood to cause more ill than good—hence highlighting the poisonous flipside of the gifted *Pharmakon*. In this interpretation, *Pharmakon* is arriving on the scene of illness from the outside as a remedy.

On the other hand, we can interpret *Pharmakon* not to be about illness (or its external fix) at all but about what it means for an organism to be embodied in the first place. If *Pharmakon*—as writing—is what gives *logos* its limbs (its head and tail, its corporeal composition), then the *Pharmakon* is not the disease or the remedy for it, but the very fact of embodiment, or the structural mattering of discourse. The *Pharmakon* is thus not simply about disease, or combatting it, but about what it means to have a body and how such a body is situated in relation to the breath—or soul/*logos*—that animates it. In this sense, Derrida's engagement with Plato's *Pharmakon* stages a broader philosophical question about life and liveliness and not about disease and its remedies.

Indeed, as Areej Al-Khafaji has recently argued, Derrida's work has extended the notion of "writing" to encompass contemporary life sciences where the very idea of a living being is being deciphered through notions such as the genetic code, DNA trace, and message. "The modern bio-logic," Al-Khafaji writes, "tends to 'decipher the living as a language' with its own rules of grammar, syntax, and semantics that assist the cell to decode genetic messages before reading them" (2022, 68–69). For Derrida, Al-Khafaji writes emphatically, "to read is 'to live'" (70). It is apparent from Al-Khafaji's argument that Derrida's theorizations about writing have consistently also been about biological life. As with his reading of Plato above, Derrida's notion of textuality is never about dead matter, awaiting *logos* to breathe life into its dead corpse, but a discursive analysis of life itself.

I will return, in the final section of this essay, to how Derrida's autoimmune diagnosis of the American Organism can be read differently in light of his understanding of the *Pharmakon*. Before doing so however, I turn to the interlocking concepts of poison/remedy within Islamic Medicine. As I show below, the idea of disease (and its potential remedy) rests upon how life and its mattering is theorized within Islamic religious thought.

Virus/Sperm and the Islamic *Pharmakon*

Within contemporary disciplinary divisions of knowledge, philosophy and medicine have distinct areas of expert knowledge. Medicine, with high-tech instruments at its disposal, has an upper hand in proposing what counts as health and disease in an organism, and by offering medical techniques of prolonging life, medicine defines what counts as an organism, what its life is and can be. In other words, medical doctors rather than philosophers in our contemporary world, determine the status of life and non-life.

In the Greco-Roman world, this ordering of knowledge was reversed, where "philosophy had mapped itself out as a space of epistemic authority" over concepts such as the body and the soul (Das 2020, 12). The hierarchical ordering of knowledge did not imply a strict boundary between philosophy and medicine but meant instead, what Aileen Das calls "boundary work": an ongoing competition for epistemic authority over who could define life. Practitioners of medicine such as the well-known Greek physician Galen (born 129 CE in Anatolia in modern-day Turkey) worked to expand their domain of knowledge beyond the human body by theorizing the body's relationship to the soul and the cosmos (Das 2020). The translation movement in the medieval Muslim world, which brought the classical philosophical tradition into the Latin West, contributed to shifting the hierarchical scale of medicine/philosophy that we have in place today, where medicine has jurisdictional authority over what we understand as life. While their texts hold differing positions on the soul's material life in the visible world and the nature of disease and its relationship to the cosmos, practitioners of medicine in the Islamic world engaged with philosophical questions in medical contexts

in order to carve a legitimate domain for answering “philosophical questions” within the discipline of medicine.

From the mid-eighth century to the end of the tenth century, the Muslim world saw an extensive movement of translating Greek texts into Arabic and Syriac where “almost *all* literary and non-historical secular Greek books that were available throughout the Eastern Byzantine Empire and the Near East were translated into Arabic” (Gutas 1999,1). These included texts in numerous disciplines such as philosophy, astrology, alchemy, medicine, and pharmacology. What is today referred to as “Islamic medicine” dates to this translation movement that not only rendered virtually all Greek medical texts into Arabic but reinterpreted these texts for their new cultural and religious contexts and embarked upon further developing their findings (Mahdi 2001; Pormann and Savage-Smith 2007, 24). Translators gravitated toward Plato, Aristotle, and Galen’s medico-philosophical works, which strove to elevate the role of the physician to the level of the philosopher and advocated for the intellectual prestige of medical theory (Das 2020, 16–19; Pormann and Savage-Smith 2007, 12).

Scholars in the Muslim world inherited this tension between medicine and philosophy and debated the question of who can legitimately theorize about matters such as the soul. This debate is reflected in the dismissal of one of the best-known medical practitioners of the medieval Muslim world, Abu Bakr Muhammad ibn Zakariyya Al-Razi (born ~865 CE, Ray, Persia) for having “exceeded his capacity for sewing wounds and examining urines and faeces” (Das 2020, 104) by his contemporary Abu Ali Ibn-Sina (born 980, Afshana, Persia). This disciplinary exchange between physician-philosophers exists alongside each of their texts where the body, its constitution, temperaments, and diseases are discussed in relation to broader questions concerning the soul, creation, and the mattering of life.

Here I offer a few examples of how Muslim physician-philosophers theorized disease in relation to life as well as developing the discourse of toxicology in which the entangled poison/remedy is gradually pulled apart.

My first example is based on one of Al-Razi’s texts, *Kitab Al-Jadari Wal-Hasba* (*Treatise on Smallpox and Measles*) that defines disease in relation to creation. As its title suggests, the work considers causes of outbreaks of two infectious diseases and proposes remedies for cure. In his introduction to the treatise, titled “The Causes of Smallpox and How It Is That Hardly Anyone Escapes the Disease,” Al-Razi gives us the following account of smallpox:

The blood of children may be compared to new wine, in which the fermentation leading to ripeness is not yet begun: and the blood of

young men to the same, fermenting and emitting steams, till it is quiet and ripe. And lastly, the blood of old men is like to wine whose strength is gone, so that it becomes vapid, and begins to grow sour.

Now the smallpox arises, when the blood putrefies and ferments, and the fermenting particles are thrown out of it; the blood of children, like to new wine, being changed to that of young men, which is as wine perfectly ripened. And this fermentation and ebullition is the disease.²

In my initial encounter with this curious passage, I was unable to interpret Al-Razi's use of the notion of "fermentation." In contemporary parlance, fermentation only refers to food production outside of our bodies and not to biological processes of our internal organs. Given Al-Razi's comparison of blood to wine, at first glance, I read this passage as a mere metaphor. Yet the final sentence, which reads "and this fermentation and ebullition is the disease," stood out as an expression beyond metaphor. Fermentation, Al-Razi is saying, *is* the disease. "Smallpox arises," he writes, "when the blood putrefies and ferments." The analogy between blood and wine is used to argue that fermentation is both responsible for the process of growth in a living organism as well as causing an infectious disease.

Al-Razi's theorization of disease, as something that arises from within a living organism and that which cannot be separated from what also gives it its capacity to live and grow, is in keeping with his writings on alchemy. As a discipline, alchemy was both a practical activity concerned with "recipes and techniques to produce various chemical products: alums, salts, vitriols and metals" and philosophical in nature engaged with Aristotelian theories of transmutation (Greenham 2016, 195). Aristotle's theory of material change proposed the idea of "concoction (*pepsis*)" as the process through which an organism matures but also one through which an organism could undergo transmutation from one form to another (Fruton 2006, 2). Based on the idea that "all matter had the same origin and was therefore capable of transmutation into other forms of matter," writers such as Al-Razi proposed the possibility of transmutation of not only substances (such as lead into gold) but also generation and transformation of the soul (Greenham 2016, 195–96). This notion of transmutation meant that in Al-Razi's text, concoction of blood is described as both generative, taking an organism from infancy to maturity, and at once conducive of degeneration into disease.

Fermentation similarly appears as a concept in another well-known text of this period penned by the Iranian physician philosopher Abu Ali Ibn-Sina (known as Avicenna in the West) titled *Kitab al-Qanun fi al-Tibb (Canon of Medicine)*, completed before his death in 1037. This five-volume book, which served as one of the main compendiums of medical knowledge for centuries, addressed general

principles in physiology, psychology, anatomy, and therapeutics including recipes for compound remedies. In one section, I came across the following passage:

According to the teaching of philosophy, the process of generation may be compared with the processes which take place in the manufacture of cheese. Thus the male "sperm" is equivalent to the clotting agent of milk, and the female "sperm" is equivalent to the coagulum of milk. The starting point of the clotting is in the rennet; so the starting-point of the clot "man" is in the male semen ("We made the life-germ a clot"—Q.23.14). Just as the beginning of the clotting is in the milk, so the beginning of the clotting of the form of man lies in the female "sperm." Then, just as each of the two—the rennet and the milk—enter into the "substance" of the cheese which results, so each of the two—male and female sperm—enters into the "substance" of the "embryo." (1930, 99)

In his text, Ibn-Sina argued that a fetus is generated when both the male and the female semen are mixed in the womb, "where the male semen plays the role of rennet and the female semen that of milk in the fermentation of cheese—an analogy taken from Aristotle's *Generation of Animals*" (Fancy 2018, 132). As historians have noted, Aristotle "generalized the concept of *pepsis*, to include the ripening of fruit, the development of an embryo, or the spontaneous generation of living things in the earth" (Fruton 2006, 2–3).

Reading Ibn-Sina's text alongside Al-Razi's passage quoted above highlights how the theory of disease in Islamic medicine arises from Aristotelian philosophy. Each physician applies the Aristotelian notion of transmutation to the biological process of generation and growth. In Al-Razi's text, fermentation comes to describe postnatal growth (by which a child becomes an adult and ages through the maturation of blood) as well as the development of smallpox. In Ibn-Sina's treatise, fermentation is concerned with the growth of an embryo through the interaction of male and female "sperms." Fermentation, in both texts, conveys biogenesis, with Al-Razi's text holding transmutation and decay as central within the life cycle of animate and inanimate organisms.

As noted in the last section, the Greek notion of *Pharmakon* held poison and medicine in tension. "Classical physicians," writes the historian Frederick W. Gibbs, "did not draw definitive conceptual boundaries between substances that could help the body and those that could harm it, which ultimately created an unusually rich etymological interplay between various signifiers for poison, such as potion, drink and gift" (2019, 2). The ever-indeterminable line between fermentation and decay is retained in the English language in the word *germ* (which can infect or germinate); yet we forget that the word *virus* also derives from a Latin word that toggles between poison and sperm. Etymologically, the word *virus* comes from the Latin *Vir*, meaning man. It was in the medieval period

that Latin authors “adopted the term *virus* as a synonym of poison” (Battaglia 2007, 142), which has led to our current adoption of the term *virus* for infectious disease. The more common usage of the word *Vir* in Latin is man (from which we derive words such as *virility*) and where “the male sex organ is recorded as ‘*genus virorum*,’” leading to the term *virus* to mean semen, such as in the following sentence: “*lentum destillat ab inguine virus* (a slow drip of ‘virus’ from the groin)” (Battaglia 2007, 144; Jacquart and Thomasset 1985, 13).³ *Virus*, however, also designated poison as in the case of “bites from a rabid dog” being translated as “*virus rabidi canis*” (Gibbs 2019, 244).

While the ambiguity of *Pharmakon* is preserved, etymologically, in terms such as *germ* and *virus*, it was indeed the medical philosophers in the medieval Islamic world that began to parse out the indeterminate line between poison and medicine in their texts. An early translation of Galen’s *Treatise on Simple Drugs* by Hunayn ibn Ishaq (born 808, modern-day Iraq), for example, includes a diagram with the heading “The things which cool the body are three.”⁴ The three categories are defined as follows: (a) “those that are agreeable and detrimental at the same time”; (b) “those that are totally compatible and agreeable to the body, and they are called ‘foodstuff’”; (c) “those that are detrimental to the body, and they are called ‘lethal drugs.’” This tripartite classification presents us with the ambiguous notion of the *Pharmakon*, rendered here as both “agreeable and detrimental” in the first category but then adds two other categories, each of which are either “agreeable” and are named “foodstuff” or “detrimental” and are named “lethal drugs.” Despite the tripartite nature of the diagram, the ambiguity of the first category seemed to require yet another subdivision into two categories: (a) “those that are more detrimental than agreeable, and they are called ‘drugs’ (*adwiyah*)”; and (b) “those that are agreeable to the body to a greater extent than they are detrimental, and they are called ‘medicinal foods’ (*dawaiyah*).” The ambiguity of the term *Pharmakon* is here dealt with through subdivisions that ultimately render any substance into those that lean closer to being detrimental and those that lean closer to being agreeable.

Toxicology in Islamic medicine is hence characterized by an interest in examining the divide between poison and medicine. While classical texts held poison/medicine in constant tension, the translation movement began to pull it apart. Ibn-Sina (along with Ibn-Rushd) is credited with holding “by far the most new approach to poison—and certainly the most influential for later physicians of the Latin West” (Gibbs 2019, 25). Ibn-Sina followed the classificational approach noted above in order to draw a gradual distinction between “absolute food,” “temperate food,” “absolute medicine,” “poisonous medicine,” and “absolute poison.” Within his classificatory system, poisonous medicines were those that “change the body and are changed by the body, but not assimilated,” while absolute medicines are “that which is not changed by the body but instead changes the body to itself” (Gibbs 2019, 26). The very idea of “absolute food” and

“absolute poison,” while residing on a gradational spectrum, nonetheless proposes an inherent divide between poison and medicine. Ibn-Sina, Gibbs argues, “effectively opened a new line of inquiry regarding poison’s ontological status” (2019, 26).

Islamic medicine is thus the domain of an ontological shift in how we understand the virus today. While in Greek medical philosophy *Pharmakon* was necessarily ambiguous, Islamic medicine began to rationalize and pull apart the inherent contradiction within the notion of *Pharmakon* by dividing the concept into subcategories ranging from poison to medicine. This methodology meant that a conceptual line was made possible between an “absolute poison” and an “absolute medicine,” leading to later theorizations of the virus as a distinct category that was not only separated from “medicine” but removed from the internal workings of an organism altogether. Our contemporary understandings of the virus as an organism that attacks a healthy body from the outside was conceptually made possible due to this effort by writers in the medieval Islamic world to make sense of the distinction between “absolute poison” and “absolute medicine.” While theories of disease, as we have seen with Al-Razi’s text on smallpox, still arose from within the body itself and were inseparable from the processes of generation and growth in any organism, theories of medicine began to distinguish between remedy and poison. This methodology would have a bearing on later understandings of the virus as one that causes disease.

I noted at the outset that *Pharmakon* is not simply a theory of medicine but also a theory of textuality. Writing, in Plato’s dialogue, was a *Pharmakon*: a remedy/recipe for forgetfulness. The role often assigned to Islamic medicine within the historiography of Western medicine is that of translation: an act of writing. Scholars in the Muslim world are credited with translating Greek texts into Arabic, Syriac, and Persian, hence making them available for later translations into Latin. If translation is an act of preserving and transmitting knowledge through textual rendition from one language into another, then translation is an act of writing that guards against loss, or rather forgetting, of a text within a new linguistic context.

Translators in the medieval Islamic world were, in this sense, also *Pharmakologists*: prescribing translations to Greek scientific philosophy. Their extensive acts of translation—so widespread and persistent that it has been dubbed a movement—preserved, clarified, classified, reinterpreted, reworked, and advanced a set of knowledges that currently form the basis of Western medicine; yet their texts also simplified the complexity of certain ideas such as the *Pharmakon* for teaching and practical use by physicians. As historians of Islamic medicine have noted, an effective method of teaching employed in this period was that of division (*dihairesis*), where “the subject matter was divided, sub-divided, and sub-sub-divided so as to be easily digestible” (Pormann and Savage-

Smith 2007, 15). While classification can clarify knowledge systems and make difficult concepts more accessible, they can also erase the theoretical necessity for contradiction and ambiguity. Perhaps the more “digestible” a concept, the less potent, diluting its complex efficacy.

Translation is too often understood as a methodology of transmitting knowledge across languages. In the context of the translation movement in the medieval Islamic world, historians have attended to various methodologies of translation employed by each writer. They have noted, for example, those who opted for “literal” translation (*ad verbum*), where a text is translated word for word, and those who prioritized meaning (*ad sensum*), translating based on what makes more sense in the new language (Gutas 1999 142; Pormann and Savage-Smith 2007, 27). It is crucial, however, to also understand translation as an act of transformation. Whether *ad verbum* or *ad sensum*, translators are alchemists transmutating words across languages and, with them, fermenting ideas into more “digestible” forms. As with every “digestive” process, new organisms come into being growing in unpredictable ways.

Arabic translations did not simply render one language into another but revived (or gave new life) to Greek philosophical thought within a new context. These translations performed an alchemy of transmutation that brought new worlds into being.

Autoimmunity and the American Organism

The translation movement in the medieval Islamic world initiated both an ontological shift in the understanding of the virus and a furthering of the disciplinary divide between medicine and philosophy. Despite such shifts, medical philosophers did not derive theories of disease from poisons. As seen in Al-Razi’s text above, treatises on plagues in this period continued to theorize disease as an internal imbalance within an organism. It was not until the early twentieth century that, based on microscopic observations, the virus was theorized as an “enemy” attacking the body from the outside. Microscopic theories of the virus departed from earlier conceptualizations whereby the virus was both poison and sperm, both generative and death-dealing.

The rise of autoimmunity as a medical concept once again revised the reductive idea of a virus as an exogenous hazardous substance. As the term suggests, autoimmunity does away with the idea of a self-same body, opening it up to internal contradictions. An autoimmune disease is a body becoming allergic to itself, setting off the immune system to work against what had previously been its own cells. Proposed as a condition in 1957, autoimmunity described an immune system that “fails in identifying the body’s own tissues, fails to distinguish between self and non-self” (Rosenberg 2014, x). This proposal directly opposed germ theory’s understanding of diseases: viral attacks on an otherwise healthy

body. An autoimmune diagnosis had to engage with the body's internal mechanisms, understand its histories, its inheritances, and its habits. In short, as Warwick Anderson and Ian Mackay write, "autoimmune disease actually is predicated on the idea of disease as a biographical process, a personalized pathology" that arises from internal conflicts and differences held within a self (2014, 15).

How can we reread Derrida's use of the term *autoimmunity* in relation to the *Pharmakon* and centuries of translation and exchange that oscillated the concept back and forth across its virus/sperm spectrum? Let us return to the "American organism" and Derrida's diagnosis of its autoimmune condition. I want to offer here, in conclusion, a reading of autoimmunity in Derrida's work that is not reducible to a disease but rather to what it means for an organism to occupy a body in the first place. The *Pharmakon*, as I have elaborated above, is not simply a medicine/poison but names the inherent condition of embodiment in which a soul becomes materialized in limbs. *Pharmakon* is the way in which an abstraction (soul, logos) becomes materialized (body, writing), a body without which the concept would cease to exist.

If we understand "American" here as an abstraction, a logos, a discourse, or an idea, then its actualization, its mattering into an "organism" requires bodies and lands, a collective entity of worldly things that can be pointed to and named "American." Here, in this mattering, is where its internal contradictions appear, where the body of an "organism" faces the diversity, difference, and discord that such a collective entity known as an "organism" would entail. As noted at the outset, Derrida included in the concept of "American" not simply the settler nation-state contained within the US national boundary but an extended entity with limbs stretched across the globe, into all that protects "American interests" everywhere. "Americanness," while it was always already an abstract concept imposed upon the heterogeneity of Indigenous lands and populations in the Americas, continues to roam in the globalized world spreading its hegemonic mass culture, economy, and military might. "Americanness," while singular as an idea, is vastly plural and heterogenous in form, as any notion of a sovereign entity would be.

Derrida's notion of *autoimmunity* points at this plurality of a self-same concept, where any attempt at policing the boundaries of what can be named "American" turns against itself opening it up to contradictions. The "American organism" (much like any organism) cannot be reduced to a singular self-sameness, policed, and secured against change, diversity, or dissolution. This is because its very mattering, its very worldly appearance depends upon that which is different from itself. Like the notion of the *Pharmakon*, which means that any embodied organism holds within itself body and soul as well as the gap that separates matter from form, Derrida's *autoimmunity* is the contemporary medical language

where an organism sees its own difference and is unable to distinguish between self and other.

By using autoimmunity as a diagnosis for the “American organism,” Derrida launches a critique against the splitting of the idea of “Americanness” from the bodies, lands, and histories that give the concept its form. Timothy Campbell notes that Derrida characterized “American foreign policy after September 11 as essentially an autoimmune reaction to previous cold-war policy that armed and trained former freedom fighters during the cold war’s hot phase in Afghanistan in the early 1980s” (2008, xvii). Campbell highlights that Derrida’s autoimmune diagnosis named the historical process in which the US military trained and armed soldiers in Afghanistan to defend US interests against the USSR during the Cold War, hence building a defense system that in the early 2000s turned against itself. For Derrida, this is the autoimmune suicide where the “hijackers” responsible for the collapse of the Twin Towers enacted “two suicides in one”: that of their own, “but also the suicide of those who welcomed, armed and trained them” (Derrida 2003, 95).

Autoimmunity is hence not a diagnosis in which a virus (namely, the “hijackers”) attacks the “American organism.” A virus attacking an organism is not the definition of autoimmunity. Rather, autoimmunity is the condition where the body’s defense system attacks itself, or as Derrida describes it, a living organism’s process of “protecting itself against its self-protection by destroying its immune system” (1998, 73). The defense mechanism, or the immune system here, is the US military that arms and trains soldiers across its national borders in places like Afghanistan. The “American organism” is hence the American empire that has swelled, in an autoimmune fashion, with its armed and trained defense system attacking itself. Who can be properly named American is here put to test. Is the American defense system (its military populated by heterogeneous bodies across the globe) a part of the “American organism”? Only an affirmative response could diagnose the organism with autoimmunity.

Read in this way, Derrida’s autoimmune diagnosis did not equate Islam with a virus. His text rendered the US military’s defense system (which included in 2001 both the “hijackers” and those who trained them in the 1980s) as the perpetrators of the terror that September 11 has historically come to signify. Yet the question of Islam, and religion more broadly understood, was not far from Derrida’s mind when he imported the concept of autoimmunity from medical theory into his work as a philosopher.

Derrida initially used the idea of autoimmunity to discuss the entanglement between science and religion in his essay “Faith and Knowledge.” Setting out to write about “religious resurgence” in the contemporary world, Derrida contemplated the equal rise of “tele-techno-capitalistico-science” with all its

globalizing dimensions (1998, 45–46). Rather than opposing the “return of religions” (or the so-called fundamentalisms) with the rise of technoscience, Derrida brings our attention to their compatibility, their linkage, and ultimately their self-sameness. The stark division that we routinely hold between religion and science, Derrida notes, is an “internal splitting” that opens a wide gap between the two realms. “This internal and immediate reactivity,” Derrida writes, “at once immunitary and auto-immune, can alone account for what will be called the religious resurgence in its double and contradictory phenomenon” (1998, 46). In Derrida’s assessment, while appearing to be enemies, religion and technoscience are allies. “Religion today allies itself with tele-technoscience,” Derrida writes, “to which it reacts with all its force” (1998, 46).

Derrida’s “Faith and Knowledge” essay thus reads religion and technoscience as two sides of the same coin, or rather as “doubles” that react to each other within themselves in an autoimmune fashion. Derrida’s proposal builds upon two interconnected etymologies for the term *religion*. Derived from both *relegere*, which Derrida glosses as “bringing together in order to return and begin again” and *religare*, defined as “link,” Derrida reads religion as a repetitious act, an act of perpetual return (1998, 36–37). “In both cases (*re-legere* or *re-ligare*),” he writes, “what is at issue is indeed a persistent bond that bonds itself first and foremost to itself” (37). In this bond, or linkage to itself, religion continuously returns to itself for recollection, a “return for a new choice, return to revise a previous operation,” whence the sense of ‘scruple,’ but also of choice, of reading and of election, of intelligence” (37). In the “return of religions” today, Derrida sees such an operation, a return in a new form—that of technoscience—to which it reacts in an autoimmune fashion.

As Campbell notes, “Derrida’s (auto)immunity names the mode by which religion and science are reciprocally inscribed in each other” (2008, xiv). Derrida’s title, “Faith and Knowledge,” drives this idea home by suggesting that while religion requires constant “recollection” and “revision,” science requires faith. Technoscience, Derrida writes, begins with the testimony: “I promise to tell you the truth beyond all proof and all theoretical demonstration, believe me, etc.,” which is an “act of faith” (1998, 44). Faith and knowledge, or rather religion and science, in Derrida’s assessment are similar operations: “between believing one knows and knowing one believes” (40).

Beyond the etymological explication, Derrida also acknowledges the historical tradition that “links Greek philosophy to the Abrahamic revelations” (1998, 20) and hence knowledge to faith. While this is not a “link” that Derrida elaborates upon, it is the history I have laid out in some detail here in this essay. As noted throughout, Greek philosophy was widely translated in the medieval Islamic world and “returned” in the new context of the revealed religions. Religion and philosophy, as historians have noted, posed a challenge to each other from the

start, yet as Muhsin S. Mahdi writes, “In the case of each revealed religion, there followed centuries of sustained effort on the part of philosophers to understand the implications of the revelation and come to terms with them and equally sustained efforts on the part of theologians and jurists to define how and to what extent religion can make use of philosophy” (2001, 33). The extent to which philosophy posed a challenge to revealed religions is exemplified by the difficult and controversial “return” of Aristotelian thought in the medieval Islamic world, after it was not only banned by the church but was also understood by many Islamic theologians as conflicting with their easier reconciliation of Neoplatonic ideas.⁵ Yet, Aristotle, and in particular “the logical work of Aristotle that deals with the question of science and the method of science” (Mahdi 2001, 53) became central in the Islamic world to the extent that, as Masarrat Husain Zuberi writes, “for more than three hundred years [medieval Jewish and Western Latin Aristotelian scholars] read Aristotle mainly with the help of the commentaries of Averroes [Ibn-Rushd] as he became known in the West and of Avicenna who was Ibn-Sina” (1986, 20). Ibn-Sina, Zuberi continues, “is so deeply steeped in Aristotelianism that he became the Aristotle for the whole world for centuries” (19).

Islam as a religion can hence be understood in its etymological sense of “returning,” “revising,” and “linking” revealed religions with Greek philosophy. It was physician-philosopher-theologians of the medieval Islamic world who fermented and linked Greek philosophy with the Latin West. Islamic science concocted and transmuted Greek thought, contending with its contradictory claims and the challenge it posed to Islam as a revealed religion. These contradictions become apparent in the “boundary work” that contended with the lines drawn between science, philosophy, and theology as well as within acts of teaching and translation that attempted to transpose irreconcilable thought systems across linguistic boundaries.

Islam is, hence, far from a self-contained category opposing the West: a virus or a plague attacking it from the outside. Rather, Islam is the swallowed-within of the West itself, to which, the West continuously returns/reacts in an autoimmune fashion. As Derrida writes in “Faith and Knowledge,” “The surge <*déferlement*> of ‘Islam’ will be neither understood nor answered as long as the exterior of this borderline place have not been called into question; as long as one settles for an internal explanation (interior to the history of faith, of religions, of languages or cultures as such), as long as one does not define the passageway between this interior and all the apparently exterior dimensions (technoscientific, tele-biotechnological, which is to say also political and socioeconomic etc.)” (1998, 20). What needs to be examined, as Derrida notes here, is the borderline or passageway that separates “Islam” from the West (and the rest). For it is these borderlines—these predefined interiorities vs. exteriorities—that result in the “American organism” seeing its own tissues as “other” to itself. It is indeed this

resistance to accepting the historical linkage between science and religion, faith and knowledge, and Islam and the West that causes an autoimmune reaction, preventing the West from seeing Islamic thought as one of the basis of its own ontological formation.

Notes

¹ Timár (2015) argues that Derrida bases his understanding of autoimmunity on medical definitions of AIDS, writing, "HIV (the human immunodeficiency virus) is *not* like deconstruction, and *cannot* be used as a political metaphor. However, AIDS stands in an uneasy, almost spectral relationship with autoimmune diseases. For whereas in autoimmune diseases the immune system destroys the body's own organs, during HIV infection, the immune system destroys itself, and becomes entangled in the process that inevitably leads to its total destruction. Thus, Derrida's definition of autoimmunity echoes, in fact, the medical definitions of AIDS, but unlike AIDS, autoimmunity becomes a political concept in Derrida's thinking" (3).

² Al-Razi's treatise was translated from the Arabic and appended to Richard Mead, *Discourse on the Smallpox and Measles* (London: J. Bradley, 1747), 122–23, consulted at the William Osler Library of Medicine, McGill University.

³ Jacquart and Thomasset write, "the semen (virus) is the humour that flows from the sexual organs of the man (*vir*)" (1985, 13).

⁴ The diagram is reproduced in Pormann and Savage-Smith 2007, 14.

⁵ See Mahdi, who writes, "Alfarabi relates that the church authorities had forbidden the study of various books of [of Aristotle's]" (2001, 53). Also see Mahdi's discussion of the maneuvers through which Aristotle was made palatable to theologians (2001, 34–37).

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