April First Reflections on Diseases of the Future

When writing about past events, the historian must employ verifiable facts. The criteria for writing competent narratives about future events, however, must abide by even more stringent rules. Such futurist narratives must combine the skills of extrapolation with feasible speculation to generate a story that is both innovative yet plausible. Commentaries on diseases of the future—defining sicknesses as yet unrealized—must not yield to apocalyptic scenarios since few sicknesses ever reach pandemic dimensions. Conjectures about future ailments must therefore carry some relationship to current reality.

Reflections on the burdens of disease in populations not yet born, have generally been wild surmises more in the realm of fiction than science. Demographers, molecular microbiologists and population epidemiologists have taught us that our future is not a limitless canvas of possibilities and that biological realities have established certain boundaries for the unnamed illnesses of tomorrow. Each new chapter of history, much like successive chapters in works of fiction, must display some continuity, must acknowledge an identified cast of characters acting under rules that do not change in midstream.

This being but one day after April First—a day assigned by society to honor witless reveries—herewith is a list of some human diseases that surely might be encountered in future decades but have not as yet arisen:

Cape Cod Fever, a disorder that arises in those adults who consume excessive amounts of shell-fish particularly oysters. An infallible diagnostic sign distinguishing Cape Cod Fever from other enteric illnesses: The patient's abdomen rises and falls coincident with the Atlantic tides.

Malaria, a tropical disorder of the oral cavity wherein parasites, confined to the surfaces of the teeth, cause molar cavities. On rare occasions, when the disease spreads to organs and tissues beyond the teeth, it is then considered transcendent rather than merely dental.

Iedational Schizophrenia: A newly evolving psychiatric disorder wherein its victims can readily tolerate two divergent views without appreciating their mutual incompatibility. The disorder seems to reach epidemic proportions during the weeks preceding Election Day.

Multi-Colored Diseases: Physicians, when confronting new disorders the causes of which remain a puzzle, often resort to the use of colors when seeking a suitable label. Thus, historically, we have had the Black Death, a compelling name for the pandemic of bubonic plague commencing in Europe of the 14th Century. Another perplexing disease, first encountered in Africa, resulted in jaundice in its victims. And thus was born the title, Yellow Fever. Tuberculosis became a major cause of urban mortality by the 18th Century; and to contrast it with bubonic disease (the Black Death), it was identified as the White Plague. And some forms of streptococcal infection, causing a roseate rash, were promptly called Scarlet Fever. Thus, color was a readily available descriptive agent when attempting to characterize certain diseases.

Might there be newly emerging diseases in the future, that might be properly associated with a color? Indeed, some physicians have already noted a curious behavioral malady in a few of their male patients. These troubled middle-class adults have recently foresworn the wearing of neckties; and while still employed in business offices they have even decried the wearing of white shirts, declaring themselves to be emotionally more aligned with their blue-collar brethren. Accordingly, and in keeping with the medical tradition of employing color in assembling disease-titles, some experts have suggested that this new disorder be entitled White-Cholera Disease.

The widening abyss in yearly income that arbitrarily divides the American population into the 1% and the 99% categories, has created a parallel world of diseases firmly allied with each of these economic enclaves. One disorder of the very wealthy is a newly evolving respiratory infection, communicable in only certain rarefied circles, and is now referred to as Affluenza.

Still other maladies hidden in future years include: Retention-Deficit Disorder, a urinary tract disability seen particularly in the early years of senescence; Peptic Ulcers, a disorder of thinking that advocates public schooling for all children except one's own; and Charles de Gaulle Stones, a variant form of chronic gallbladder disease confined to francophone patients.

What then is our future but a congenial array of uncontested illusions; and an interlude when our many prophesies have yet to be denied or even tested?

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The author and his spouse/significant other have no financial interests to disclose.

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