Sweet Blood: Diabetes and the Changing Nature of Modern Health

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Every day, millions prick their fingertips, feed blood into a glucose meter, and ritually adjust their diet to stay healthy. This is the diabetic way of life, what many older diabetics in North America call having the “sweet blood.” This has also become a global way of life, affecting more than one in ten people. Sweet Blood: Diabetes and the Changing Nature of Modern Health explores how today’s scourge stems from the way humans have defined, shaped, and been reshaped in turn by their environments. Over the past 150 years, diabetes has embodied numerous fears over health. It has altered relationships between farm and table, influenced diets, intensified obsessions with the quantification of human bodies, bolstered reliance upon technology to prolong life, and reinforced differences between us and the natural world that enfolds us. Diabetes raises difficult questions: are diabetics responsible for their illness through gluttony or sloth, or are genetics, evolution and environment to blame? Why has diabetes afflicted populations unequally, and what are the obligations to address those inequities?

Three main strategies inform the book. First, Sweet Blood investigates how diabetes as a medical condition, an environmental problem, and a way of life has changed over time. Second, Sweet Blood uses case studies to examine the complexity of diabetes at moments when it receives scientific and popular attention. Finally, Sweet Blood is filled with portraits of individuals and places central to the story of diabetes. Characters humble and well-known—from the legendary Jackie Robinson, who died at 53 from diabetic complications, after having broken the color line in baseball; to crusading scientist Theo Colborn, the feminist biologist who raised alarms over endocrine disruptors—propel a narrative that traverses iconic locales: Toronto laboratories, Midwestern cornfields, Chicago tenements, and Appalachian hollows.

The first section focuses on diabetes as an emerging disease of modernity. Physicians in Europe and North America called it “a disease of high civilization” stemming from over-consumption of sugar, racial decline and miscegenation, or the enervating effects of urbanization. Responses to this disease and its mounting prevalence and incidence included the rise of fad diets as well as the expansion of pharmaceutical therapies, notably injectable insulin, which until the early 1980s was made by refining millions of tons of cattle and swine pancreases harvested from industrial slaughterhouses.

Sweet Blood then reframes diabetes as a transmuted disease. Environmental changes and socioeconomic disparities mutually reinforced one another as diabetes morphed from a disease of affluence into a disease of poverty among minorities, notably indigenous peoples, as well as the North American urban and rural underclass. In response to this transmuted disease, these afflicted communities developed their own ideas and strategies to address the rise of diabetes and its complications.

The final section explores the epidemic following WWII and the range of explanations and responses to the global crisis. Earlier debates over diabetes etiology regained force as alternative etiologies emerged to explain diabetes as a transmuted disease linked to socioeconomic status and environmental conditions. By the early twenty-first century, the World Health Organization
was reporting that chronic diseases were overtaking infectious or vector-borne diseases as the leading causes of mortality and morbidity in the global South.

Simply put, Sweet Blood is a history of our modern world, because diabetes raises questions central to the changing nature of modern health.