

Blood, Sweat and Tears

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BLOOD, SWEAT AND TEARS

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Translated by Andy Brown





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For Willem, Hanna, Rebecca and Christine

Boaz, Salomé and Natanael

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Introduction

It sweats and spits. It poos and pees. It bleeds and squirts. The human body is like a leaky sieve. And this fluidity is essential to our lives and the health of our bodies. Without saliva, gastric juices and other internal fluids, we couldn't swallow or digest our food. If our blood didn't coagulate, our wounds wouldn't heal. And without vaginal fluid and sperm we couldn't reproduce. In short, the fluids of all colours and odours in our bodies keep them well-lubricated and working as they should. A wonderful natural process, you would think. So why do we have such a difficult relationship with our bodily fluids? And has that always been the case?

Despite all our physiological and biological knowledge, we remain reticent when it comes to the fluids within our bodies. As babies we burp up milk and let our pee and poo flow freely, but as parents we soon teach our children that we should retain all our fluids and only release them at certain acceptable moments. Businesses open special lactation rooms where mothers can breastfeed their babies to ensure that no breast milk is spilled on the office floor – the very thought, just imagine how that would disrupt the efficient operation of daily business! Do you have enormous sweat stains under your armpits during your New Year's speech? What a disgrace! Children who wet their pants get laughed at. People who sweat and cry are often seen as vulnerable and insecure. Free-flowing bodily fluids rapidly invoke feelings of shame and disgust.

They can also often be the cause of political and legal controversy. In September 2017, hundreds of women in the Netherlands took to the streets to protest against the shortage of public toilets for women. Under the hashtag *#zeikwif* (the Dutch word *zeik* means both piss and complain; *wif* is a derogatory word for a woman, but was here

reclaimed as a positive self-description), people posted photos of bare-bottomed women trying to pee in the male public urinals. It led to uproar across the country, and the media had a field day. The protest was in response to a ruling by a judge (male, of course) who fined a woman €90 (initially €140) for urinating in public. The judge said that ‘in an emergency, a woman can also urinate in a urinal. It may not be easy, but it is possible.’

The social debate was mainly about the severe shortage of public toilets for women in Dutch towns and cities, but the wider question behind it was the embarrassment and disgust that our bodily fluids invoke in public spaces. Freedom of expression is sacrosanct, but the freedom to excrete is taboo. The Dutch word for urinating in public, *wildplassen* (wild peeing), sums up our attitudes to a T. Peeing in public is what animals do: it is wild and uncivilised.¹

Others who have engaged in wild and uncivilised acts involving bodily fluids have also found themselves in court. When singer George Michael was arrested for performing a ‘lewd sexual act’ in a public toilet in 1998, he was ordered to pay a fine of £500 and do eighty hours of community service. People continually exchange saliva, sweat and sperm, but it is only permissible in private, behind closed doors.

In 2015, a Hindu woman in India was refused entry to a temple because she was menstruating. Other religions also see menstruating women as ‘unclean’ and therefore unfit to enter a holy place like a temple, mosque or church. The chief of the temple said that women might be more easily admitted one day, but only if a machine was invented to determine whether they were ‘pure’ – in other words, that they were not menstruating. Enraged at this sexist statement, women protested and launched an online campaign under the hashtag *#Happy-ToBleed*.² Students organised a petition to combat this misogyny and to raise awareness of the myths surrounding menstruation.

Some might claim that it is not so much our bodily fluids that are the main problem in these controversies, as the possible risks to hygiene, public order and vulnerable children. And of course, there are wide differences in how people experience bodily fluids – some people, for example, find male sweat sexy – but in general our relationship with them remains uneasy. Bodily fluids remain steadfastly in the realm of taboo. They invoke shame, embarrassment and disgust.



To gain a greater insight into the difficult relationship between people and their bodily fluids, I delved into its long history. The way we think about our fluids proves to be neither timeless nor universal. On the contrary, it is changeable and differs from one culture to another. Today, we find drops of snot and other people's breast milk objectionable, but in the past we looked at them very differently. History can hold a mirror to ourselves.

In recent decades, cultural historians have increasingly been studying the material culture of the past. They no longer only write about all-encompassing ideological ideas or grandiose political movements from earlier days – which were of course important – but devote greater attention to more everyday items like salt and pepper, tea and coffee, paper, kettles, clothes pegs, charcoal and peat.³ Studying these ostensibly banal objects and how they were used teaches us a great deal about daily life and how it has changed. The focus of attention has shifted from politicians and intellectuals to the work of farmers, craftsmen, sailors, mothers and lovers, in the workplace, at the market and in the household. Historians try to 'read' objects from the past, just as they read written sources. An object is not only a 'thing', it also has meaning.

Until now, however, bodily fluids have received little attention in historical studies of objects and materials.⁴ This is surprising given that blood, sweat and tears are as commonplace as you can get – with the emphasis on 'common', some might say; until now, paintings and drawings, furniture and tiles, clothing and other beautiful objects have attracted much greater attention. Historians of science and medicine prefer to look at splendid microscopes and other scientific instruments, or at mounted animals, anatomical models and preserved specimens.⁵ I have done that myself, too. These wonderful items are kept in museum collections and give historians a glimpse of the daily practice of research and education in the past. But when I want to research the history of earwax or saliva, for example, I find myself left high and dry. Academics much prefer to write about solid, clean objects than dirty, wet ones. In our quest to discover why we have such a difficult relationship with our bodily fluids, museum collections and the history of science prove to be part of the problem. That is largely because historians – and I include

myself in this category – primarily look at things preserved in archives and museum depots: paintings and photo albums, drawings and diaries, love letters and bookcases. In other words, solid and often attractive objects with a relatively permanent status.⁶ Transitory things that flow, leak and secrete tend to be forgotten. You won't find a bottle containing Princess Wilhelmina of Prussia's breast milk in any museum.

Yet no one will deny that bodily fluids are essential to our daily lives. They play a central role in how we experience our own bodies and those of others, and are often the focus of studies into the workings of the human body. In other words, if we wish to understand ourselves and our bodies better, it is essential for us to study the history of our bodily fluids.

In this book, I take a closer look at a number of bodily fluids to investigate why we don't allow ourselves to urinate in public, why we banish mothers to lactation rooms and why men aren't permitted to cry. That story begins by identifying the wide variety of fluids to be found in the human body. And that's quite a list. Just for starters, we have blood, milk, saliva, earwax, sperm, menstrual and vaginal fluids, sweat, urine, tears, bile, lymph, gastric acid, pancreatic juice, cerebrospinal fluid and amniotic fluid. We could go even further, but we would end up with a pretty hefty book. And we haven't even talked about the more morbid fluids like vomit, snot, pus and diarrhoea. Or do vomit and diarrhoea not count? How do you actually define a bodily fluid?

One possible definition is: a substance emitted by the body of a human or animal, without solid form and with the property to flow. That sounds reasonable, but it does raise questions. Many bodily fluids are difficult to capture in a single definition, because their viscous properties can change from liquid to solid. Diarrhoea, for example, would qualify as a bodily fluid under this definition, while coagulated blood wouldn't. If you have a graze on your skin, blood comes to the surface and emerges in drops, with the amount depending on the size of the wound. Slowly the blood begins to coagulate. After a while, it forms a dark, almost black scab, which exudes small white droplets. The wound stops bleeding and the blood has changed into a solid substance. Is the scab still blood? Not according to our definition. So where in the process does the blood stop being blood?

Renowned Dutch physician Herman Boerhaave defined bodily fluids three centuries ago as follows: ‘The fluid parts of the human body are included in their respective solids, or vessels, by which they are kept in a constant and determinate motion or circulation; being often separated from each other, mixed together again, and variously changed in different parts of the body, whose vessels and continuous parts are moved by them; the sides of the vessels are wore away, changed in their figure, and again renewed by them.’⁷ Inspired by these words, I can also see the fluids in our bodies as parts of the body that flow, can change and can easily pass through the outer boundaries of the body.

To keep this book to a manageable size, I restrict myself to those fluids that are emitted by the body with a certain regularity and which people find the most offensive. It is only when they emerge through our pores, nostrils or other orifices that we can see, smell, feel or taste them. It is the spittle in the corner of someone’s mouth, the piss on the street, that we find so disgusting. Anthropologists call this ‘matter out of place’. And that is what makes these fluids so fascinating: they easily flow to places where society would rather not see them. By doing so, they exceed the man-made limits and rules of our culture. From a purely medical and biological perspective, there is nothing disgusting about urine. But people find it acceptable only in a bladder or in a toilet bowl. Anywhere else constitutes a disruption of public order – golden showers perhaps notwithstanding?

And this immediately answers my question why bodily fluids are considered taboo: they are readily seen as out of place and thereby offensive. Yet this answer is equally unsatisfying, as it only displaces the problem. Why do we find bodily fluids acceptable in some places and not in others?