Theses of the PhD dissertation

CULTURES OF POLLUTION:
EPIDEMIC DISEASE AND THE BIOPOLITICS OF CONTAGION
IN CONTEMPORARY ANGLOPHONE FICTION

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a, Identifying the aims and the subject of the dissertation
In his monograph on the medico-historical and philosophical concepts of disease, *The Normal and the Pathological*, Georges Canguilhem quotes the legendary French surgeon, René Leriche, when stating that “health is a life lived in the silence of the organs” (91). The research question of the present study has grown out of the implications of this sentence, i.e. from the idea that pathology could, then, be read as the “voice” of the organs, the language of the suffering human body. If disease can be seen (or heard) as the voice of the organs, it is also the biological encryption of cultural messages. My hypothesis is that disease in a wider sense can also be interpreted as a cultural symptom and (retro)diagnosis, and that the culture-specific registers of the diseased body’s representation open up various discourses on embodiment, spatiality, gender, economic processes, and ultimately, biopolitics. Illness as human suffering *par excellence* has been the topic of numerous works of art and literature in Western culture as well as a virulent metaphor of evil and pollution. In her influential essay, *Illness as a Metaphor*, Susan Sontag also claims that the metaphor of the body as a depiction of social and symbolic (dis)order is an age-old trope connecting the notions of disease and suffering: “[o]rder is the oldest concern of political philosophy, and if it is plausible to compare the polis to an organism, then it is plausible to compare civil disorder to an illness” (77). Accordingly, the representation of individual pain and the disruption of the social body appear to be historically interrelated issues, emphasising the cultural inscription and metaphorization of
pathology both on personal and collective levels. In the (first) world then, “[i]llness is not only an individual experience, it is a cultural metaphor. Indeed, next to the ‘bomb’ it may be THE primary metaphor of the late 20\textsuperscript{th} century” (Patton *Sex and Germs* 11). Epidemic as a calamitous subtype of disease especially raises the question of the body vs. polis dichotomy since the suffering, the pain and the symptoms of the somatic body appear to be not only in a metaphorical but also a metonymical relationship with the social body of the polis, posing a disruptive threat. The literary representations of epidemic disease hence constitute a prime field for examining this dilemma simultaneously as the voice of the organs and a cultural-discursive construct. Whenever a supposedly “new” contagious disease appears, it sooner or later sinks into general consciousness, challenging previously unquestioned concepts of purity and pollution in medical, ethical and even aesthetic ways. Contagious diseases are especially saturated, overdetermined cross-sections of various fields of perception and knowledge, since they inevitably function as distorted mirrors of current social risk factors and means of control. Thus, the concept of epidemic disease mobilizes several different discourses, and, from a cultural studies point of view, its representations in literature (as well as film and popular culture) are particularly complex.

Exploring the metaphorical potential of a special kind of diseased body, the contagious corpus and corpse, the chapters will read contemporary Anglophone, mainly British historical novels set in different periods: the Middle Ages, the Early Modern period, the
Victorian era, and the late 20\textsuperscript{th} century: William Owen Roberts’ 
*Pestilence* (1991), Geraldine Brooks’ *Year of Wonders: A Novel of the Plague* (2002); Matthew Kneale’s *Sweet Thames* (1992), Anne Roiphe’s *An Imperfect Lens* (2006); Alan Hollinghurst’s *The Line of Beauty* (2004) and Alfred Corn’s *Part of His Story* (1997). This rather wide time span is counterbalanced by a tight thematic focus: the dissertation will investigate the literary representation of three iconic epidemic diseases in Western culture: plague, cholera, and AIDS. To my present knowledge, no systematic treatment of contagion in contemporary (historical) fiction has been attempted so far, just as there is no monographic study to address similar issues in this or even a comparable body of contemporary historical fiction. However, beyond the theoretical works not directly connected to the topic of epidemic disease, I have relied on other thematically related works, such as Arne De Boever’s *Narrative Care: Biopolitics and the Novel* (2013), Jennifer Cooke’s *Legacies of Plague in Literature, Theory and Film* (2009), an anthology of epidemic-related essays written from a cultural studies point of view entitled *Contagion*, edited by Alison Bashford and Claire Hooker (2002), and Barbara Fass Leavy’s *To Blight with Plague. Studies in a Literary Theme* (1992). The interpretations will not address the cultural iconography of other widespread and symbolically loaded illnesses such as cancer, tuberculosis or syphilis. On the one hand, as opposed to massive, collective outbreaks, these diseases are identified “diseases of individuals” by Susan Sontag (*Illness* 60), and as such, they would require a different approach from markedly large-scale and quickly
moving calamities. On the other hand, the literary treatment of the Romantic myth of consumption, the decadent discourse of “the pox”, and the degenerative logic of cancer have all been widely researched before even in the field of literary studies.

Beside adopting a trans-historical approach to interpret universal human attitudes like xenophobia, othering and stigmatization within an urban scenario, the dissertation also provides a double perspective on the diseases in question, as each chapter is devoted to the reading of two novels about the same epidemic, most of them rooted in British historical heritage—even though the authors themselves are not exclusively British, since Welsh (Wiliam Owen Roberts), Australian (Geraldine Brooks), and American (Alfred Corn, Ann Roiphe) authors are also featured. Thus, rather than the writers’ nationality, the main criterion of inclusion have been the themes and settings of the works. For all the individual differences, this study takes London as its constant spatial-cultural variable, for it is the setting of three out of the six novels; also, the British capital has been an icon of urban culture as such: “throughout its long history, the ‘London’ novel—from Defoe to Dickens to Stoker to Ali—has always been a ‘world’ novel of this ‘world city’” (Wall, Cynthia 342). London is thus a historically loaded space in any representation of large-scale epidemics and also a meta-representation of urban space, the modern polis and body politic itself. Moreover, in four of the novels discussed in the dissertation, there is a marked East–West dichotomy, the East being—in the eyes of the Europeans—the perennial source of polluting invasion,
whether the stories are set in Wales and Cairo (Pestilence), the Derbyshire village of Eyam and Oran (Year of Wonders), London and Alexandria (An Imperfect Lens), or London and New York (Part of His Story).

From my point of view, the single most important feature that links the chosen works is their attempt to encompass the bodily and spatial contexts of epidemics. It could also be argued that questions of somato-spatial threats are especially central in the case of British literature, where the image and establishing fantasy of the self-enclosed island and the mentality of defensive insularity have long been tied up with the threat of contagious and/or colonial invasion, as Shakespeare’s John of Gaunt puts it, famously calling England a “fortress built by nature for herself / Against infection and the hand of war” (Richard II 2.1.43–44).

b, An outline of the employed methods
Disease, especially contagious disease, necessarily entails the crisis not only of the relationship between subjectivity and embodiment, but also the borderline between individual bodies, the transgression of bodily and symbolic boundaries within the social body. These issues can only be discussed using a multi-disciplinary approach, one that draws upon the relevant insights of biopolitics, supported by certain notions from the fields of psychoanalysis, gender studies and anthropology. The theoretical background of the dissertation is also informed by the field of the medical humanities, defined as the
“socially interpretative dimension of modern medicine (Ferber 2), where textuality, materiality, and history play equally important roles. The broadest theoretical background of the dissertation, however, is that of cultural studies, with a marked Foucauldian slant. The central notions discussed here, contagion and pollution, inevitably challenge the seemingly pre-established meanings of normality and pathology. Within the broader context of cultural studies, the theoretical underpinnings of the introduction and the later close readings are provided by, among others, Julia Kristeva’s psychoanalytic theory of the abject in *The Powers of Horror*, Mary Douglas’s anthropological approach to pollution and margins (*Purity and Danger, Implicit Meanings*), Michel Foucault’s ideas on power (*Discipline and Punish*), and Susan Sontag’s essays on the metaphors of illness in *Illness as a Metaphor* and *AIDS and Its Metaphors*. I will initiate a dialogue between these diverse theories of transgression, filth, othering, abjection and biopolitical power in my attempt to understand the dynamics of epidemics as disruptions of symbolic systems as dramatised in the chosen texts that explore the historically changing and culturally constructed notions of abnormality and pollution.

This phenomenological understanding of the past in the present will be complemented by reliance on biopolitical philosophy, which is one of the most dynamic fields of the humanities nowadays. As it is a field that is still in the making, its object is not easily defined. Thomas Lemke, for instance, defines it the following way: “the meaning of biopolitics lies in its ability to make visible the
always contingent, always precarious difference between politics and life, culture and nature, between the realm of the intangible and unquestioned, on the one hand, and the sphere of moral and legal action, on the other” (31). Monica Casper and Lisa Jean Moore’s definition of biopolitics, on the other hand, explicitly identifies the field with social surveillance processes:

[0]n a broader scale, biopolitics is defined as the social practices and institutions established to regulate a population’s quality (and quantity) of life. Disciplinary power and biopower, which together can be understood as biopolitics, operate together to normalize individuals by coercing them, often by subtle mechanisms, to conform to standards and, in so doing, to create self-regulating pliant bodies and populations. (*Missing Bodies* 7)

Giorgio Agamben (along with the theories of Antonio Negri and Michael Hardt on colonisation and Slavoj Žižek’s writings on consumer culture) has become one of the most influential thinkers working in the wake of the generation that included Foucault, the already quoted Gilles Deleuze and Jacques Derrida, whose theory of the *pharmakos* will be elaborated on. Agamben’s most important claim in his work *Homo Sacer* is that sovereign power as such is born from and maintained by the creation of the so-called biopolitical body: “[i]t can even be said that the production of a biopolitical body is the original activity of sovereign power” (6). Agamben introduces
various notions of life in his works to be relied on later, the first two being \textit{zoe} and \textit{bios}:

[t]he Greeks had no single term to express what we mean by the word 'life'. They used two terms that, although traceable to a common etymological root, are semantically and morphologically distinct: \textit{zoē}, which expressed the simple fact of living common to all living beings (animals, men, or gods), and \textit{bios}, which indicated the form or way of living proper to an individual or a group. (2)

This theory of life/lives will be applied in the dissertation with relation to contagion and pollution, claiming that outbreaks of epidemics and their handling by authorities often reduces people to the level of bios, and at the same time such situations (states of exception or emergency) are also habitually utilized to create more controlled forms of bios. In order to apply this general biopolitical framework to the novels, however, a brief specification of the theoretical terminology is needed.

\textbf{c, The results of the dissertation}

According to Agamben’s reading of Michel Foucault, a particular society's “threshold of biological modernity” is situated at the point at which the species and the individual as a simple living body become what is at stake in a society's political strategies (\textit{Homo}
Sacer 3); while Roberto Esposito argues that modernity is made possible by the institutionalization of centrally controlled survival mechanisms: “[o]ne might come to affirm that it wasn’t modernity that raised the question of the self-preservation of life, but that self-preservation is itself raised in modernity’s own being [essere], which is to say it invents modernity as a historical and categorical apparatus able to cope with it” (Bíos 55). The shift towards this cultural-historical moment of modernity, the realization of individual survival in the face of collective calamities is precisely what is explored in the first two novels examined in the dissertation, Pestilence and Year of Wonders, which both feature plague as an epidemic that has greatly contributed to the establishing of the modern boundaries of the individual and the state. The texts problematize the integrity of the social body, the skin being the locus and metaphor for the clash of pre-modern and modern methods of surveillance as well as “the emergence of Western guilt culture” (Cantor 211). Medieval plague also initiated new systems of economic production, while early modern outbreaks contributed to the birth of the masculinized medical profession. Enclosed spaces—be it a quarantined country, a city, a village or a house as well as the people who are managing the bodies in these spaces—tell about the historical constructedness and eventual claustrophobic unmaintainability of cultural boundaries. Whether it is referred to as the plague, Black Death or pestilence, this epidemic has remained strongly resonant and value-laden trope in the last six centuries, resurfacing at the time of any kind of epidemic calamity.
I read *Pestilence* as a novel which depicts the shift from pre-modern to modern notions of the body, narrative, state and economy. By interpreting the novel from a somatic and a spatial point of view, the relativization and cultural constructedness of “purity”, “coherence”, “civilization” and “welfare” emerge. The metaphors of bodily filth (the grotesque, carnivalistic body, excrement, the figure of the leper, sexuality and the plague itself) along with the text’s fragmented, episodemic structure and satirical style underline the epistemological distance between the reader’s 21st-century and the novel’s 14th-century points of view. The dichotomization of the spaces of East and West, Continental and Muslim readings of plague as well as the feudal and capitalistic systems of production initiate the modern notions of the subject as a biopolitical agent. *Year of Wonders*, on the other hand, builds on the early modern views on subjectivity, taxonomizing it further by grasping the competing ideologies of the protestant Anglican church and the fledgling, internally divided medical establishment. The spatial control device of the quarantine and the cunning woman’s—a liminal figure between the female witch and the male doctor—treatment of plagued bodies outline the biopolitical structures of the ensuing era of the Enlightenment, leading up to (dis)infected 19th-century cholera scenarios.

When representing Victorian cholera, Matthew Kneale’s novel demonstrates the infiltration of the cultural and spatial turns into the humanities, its putrefying London disclosing a desire of contemporary writing to purify our obsessive heritage of the
Victorian era as a dark double and neat predecessor of 21st-century biopolitics. Although Roland Barthes claims in *Sade/Fourier/Loyola* that “shit has no odour when written” (137), the novel still manages to recreate a formative historical moment both for our senses and intellect. Similarly, *An Imperfect Lens* uses a colonial setting to pose questions about 19th-century images of political and medical authority in the face of a sanitary disaster, featuring not the vast sewage system but the tiny microscope lens and the molecularization of life as its central spatial metaphor, revealing the mysteriousness of the age-old and invisible cholera bacillus of mythical, oriental proportions. The colonial language of epidemiology can also be read today as a landmark of globalized security fears: “[n]othing can bring back the hygienic shields of colonial boundaries. The age of globalization is the age of universal contagion”, argue Hardt and Negri in *Empire* (136). The very fact that cholera is an exclusively human infection, and neither quarantine nor vaccines can be used against it (Bollet 91-95) makes it an essentially uncontainable disease, a fertile source of fiction even today, as the number of postcolonial novels featuring it as a symbol of the Other’s invasive threat shows. The two novels in a broader sense pose the question how 21st-century cultural spaces have been created in connection with public health. By their panoramic and microscopic perspectives, *Sweet Thames* and *An Imperfect Lens* recreate and review entrenched cultural distinctions both of the episteme of 18th-century Enlightenment (miasmatic explanations) and 20th-century AIDS-stigmatization (risky lifestyles), since cholera “was considered a filth
disease, believed to occur chiefly in crowded and unhygienic living conditions, such as those of the poor or the common foot soldier. And like AIDS, cholera was blamed on its victims. (Cohen *Embodied* 42). Thus, 19th-century notions of temperance and cleanliness bear close resemblance to contemporary conceptions of hygienic sexual mores and often ageist ideas of wellness. The sanitary, racial, and sexual crises depicted in the texts raise current questions of what is still deemed to be symbolically rejected and materially ejected from the social and the individual body. The question of the boundary between public and private spaces also lurks behind Kristeva’s point: “[i]t is thus not the lack of cleanliness or health that causes abjection but what disturbs identity, system, order” (*Powers of Horror* 4)—be it civic, personal colonial, or national (b)order.

For Ben Highmore, one of the major achievements of de Certeau’s treatment of cultural continuity is that “such history will work to unsettle the notion of centre and margin” (147), and this argument also seems to apply to neo-Victorian and historical novels like Matthew Kneale’s *Sweet Thames* and Anne Roiphe’s *An Imperfect Lens*. By the use of ubiquitous spatial metaphors and the vertical stratification of the spatial hierarchy of urban structures, the novels construct a low-angle perspective of a period of European cultural history where the underground inspace of the sewage system and the upsurge of contagion are written onto the social bodies of metropolitan London and colonial Alexandria. When epidemiology and especially the fight against cholera showed that “medicine becomes a central strut in the foundations of modern statism”
(During 50) and created the basis of present-day biopolitical practices within public health. Metropolitan and colonial filth thus seem to be equally overwhelming and symbolically revealing of the culturally constructed notions of cleanliness.

Last but not least, Alan Hollinghurst’s *The Line of Beauty* and Alfred Corn’s *Part of His Story* represent the early days of the AIDS epidemic in a London setting, using gay male aesthete protagonists to showcase the isolation and social death of the AIDS victim, various strategies of distancing the experience by means of national, class and sexual othering. Without any direct political involvement, these are essentially stories of loneliness and loss, depicting the (representational) work of mourning. In *The Line of Beauty*, Nick Guest is interpreted as a pharmakos figure who challenges and at the same time sacrificially saves the elite’s immunity, while his aestheticism and decadence cannot save him from the dangers of excommunication and contagion. *Part of His Story*, on the other hand, portrays AIDS as a his/story, a personal and (by now) historicized calamity, where the city of London becomes an individualized memorial for the American traveller writing his own narrative as a work of mourning—as it turns out, for himself as well.

AIDS today in the era of the “Post-AIDS” (Barbour *Meddling with Mythology* 3) is no longer viewed as an apocalyptic threat, but rather as yet another chronic disease. The body of AIDS is essentially conceived of today as an immunological body with risky boundaries, fitting the representational history of the precarious, increasingly medicalized human subject:
[t]he bacteriological body had been static before and after the assault by germs; the endocrinological body ran hot and cold, oily and dry, not coincidentally (in the first anxious post-war years when endocrinology briefly had its heyday) mapping the gendered tropes of emotionality. The immunological body was more gracefully fluid and fragile, like a dancer in a delicately balanced environment in which it was placed almost without boundaries. (Patton, Cindy 59)

Historically, the AIDS epidemic seems to be inseparable from the culturally and medically changing notions of the boundaries of the self as well as the emergence of the culture of security, that is, political immunity: “AIDS might simply not have been organisable into a coherent nosology at an earlier historical moment. […] in the absence of a concept of the immune system developed during the 1960s and 1970s, as opposed to the earlier and simpler concept of immunity, the disease ‘AIDS’ would have been difficult to conceptualise” (Waldby 55). On the whole, “the HIV infected are subjects who publicly bear witness to the mortality of us all, and to the inability of medicine to find a cure for this ultimate encroachment of nature upon culture. HIV infection involves a permanent and indissoluble form of lethal hybridity, where virus and host cannot be functionally separated” (2). The AIDS pandemic can also be interpreted as a foreshadowing of future tendencies in the symbolic and medical treatment of mass calamities, the transformation of the
private sphere and emerging “neo-celibacy” (Sontag *Illness* 165): “cultural and political responses to AIDS, which are at once a throwback to medieval notions of sin and disease, and a confrontation with a cybernetic future of slow viruses and technologized sex” (Patton, Cindy 5). In a welfare society, cultural expectations include an individual power position between choice and chance, and falling a victim to AIDS is something against cultural orthodoxy in itself, that results in the loss of the integrity and continuity of the self.
The dissertation’s structure

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d, The author’s publications published in the field of the dissertation and the author’s other publications
List of publications related to the dissertation

Hungarian book chapters (2)
1. Ureczy, E. A feladás híromlása: Elhagytott terek és testek Kocsis Ágnes Fél Adrien női filmjeiben.


Foreign language international book chapters (3)
3. Ureczy, E. Cleanliness as godliness: cholera and victorian spasces of filth in Matthew Kneale's Sweet Thames.

4. Ureczy, E. Post-bodies in Hungarian cinema: forgotten bodies and spaces in Ágnes Kocsis' Fél Adrien.

5. Ureczy, E. The problem that has a masculine name: shell shock and the traumatic memory of the great war in Pat Barker's Regeneration.
17. Ureczky, E. Kétbé költés: Az ikerág nagyjából narratív és interakptive című Bruce Chatwin's On the 
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Informations/educational articles (1)

Kultor.hu 02, [8], 2017.

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