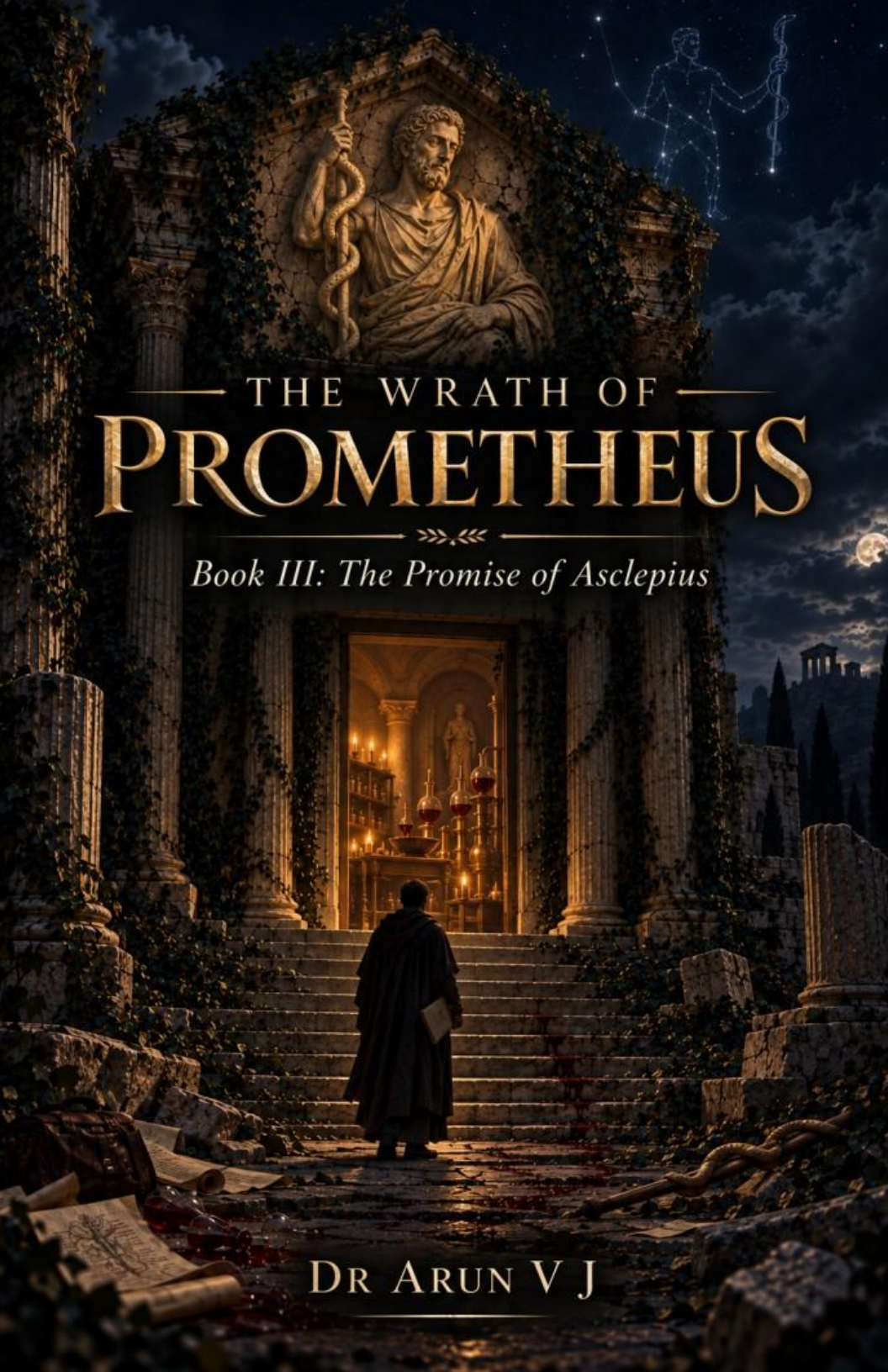




THE WRATH OF PROMETHEUS

Book III: The Promise of Asclepius

DR ARUN V J

The Wrath of Prometheus: Book III — The Promise of Asclepius

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This is a work of fiction. Historical figures are portrayed fictionally.

The historical events described are real. The Titan watching from the margins is an addition.

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“The blood is the life.”

*Every culture that has ever existed
knew this.*

*Only one worked out what to do about
it.*

A NOTE TO THE READER

Prometheus is a Titan from Greek mythology. He stole fire from the gods and gave it to humanity. For this he was chained to a cliff in the Caucasus and subjected to a punishment that involved an eagle and went on for a very long time. He was eventually freed. He has been working through a list ever since.

If you have read the first two books in this series, you know what kind of list it is. If you have not, this book stands entirely on its own. The only thing you need to know is this: Prometheus has been involved in the history of human progress for four thousand years, asking one question to the right person at the right moment, and the history you are about to read is real.

Asclepius is less well known than he should be, which is remarkable given that his symbol appears on ambulances, hospital doors, and medical badges in almost every country in the world. He was the son of Apollo, raised by a centaur named Chiron in a cave on a mountain, and he became the greatest physician in the ancient world. His sanctuaries — the Asclepions — were the world's first hospitals. His daughter Hygieia gave us the word hygiene. His daughter Panacea gave us the word panacea. He was killed by Zeus for practicing medicine too well. His symbol is a single serpent wound around a plain staff: the Rod of Asclepius.

The other symbol you may have seen on ambulances and white coats — two serpents, wings on top — is the caduceus. That belongs to Hermes, god of

messages, commerce, and, depending on the source, thieves. In 1902, the United States Army Medical Corps adopted it by mistake. The error was pointed out immediately. It was not corrected.

Hermes finds this extremely satisfying. He has mentioned it several times.

This book is about the field they represent and the people who built it.

One more person: Caduceus — called Cad — is Hermes's assistant. He files reports that nobody reads and makes observations that everyone should. He appears in the middle of this book, which is unusual. He brings perspective and a very good pastry.

The history of blood transfusion begins here.

A NOTE ON THE CHARACTERS

Prometheus — a Titan. Stole fire. Chained to a cliff. Freed. Has been keeping a promise for four thousand years. Carries a clay tablet and a rod fragment that once belonged to someone he watched die.

Asclepius — son of Apollo. God of medicine. Greatest healer in the ancient world. Killed by Zeus for reversing death. His sanctuaries were the world's first hospitals. His symbol is everywhere. Most people who carry it daily do not know his name.

Hades — god of the underworld. Keeps the inventory of death. Filed the complaint that got Asclepius killed.

Zeus — king of the gods. Killed Asclepius with a thunderbolt. Appears only at the beginning.

Apollo — god of medicine and knowledge. Asclepius's father. Said nothing when Zeus killed his son. Has been saying nothing about it ever since by filling the silence with suppression.

Ares — god of war. Satisfied. Finds Prometheus in the mud of France and has things to say.

Caduceus (Cad) — Hermes's assistant. Appears in the middle. Honest in the way that only someone with no stake in the outcome can be honest.

Hermes — formerly god of messages. Currently in Lisbon. Does not appear in this book but is referenced, which amounts to the same thing.

Every scientist and physician named in this book was real. What they discovered was real. What was done to some of them was also real, and is not excused by the passage of time.

DEDICATION

This book is dedicated to everyone working in medicine, and specifically to those in blood donation. My own field.

To the professionals inside the labs who make sure everything runs smoothly. The crossmatch at two in the morning. The storage temperature checked and logged. The unit labelled correctly and sent upstairs on time.

The unglorious work. The unseen work. The hidden hands that patients never see.

But you are the skeleton that every other speciality is attached to. The surgery works because the blood was there. The delivery survives because the blood was there. Somebody made sure of it.

Blood is life. It has flowed through every age of human history, and it has grown and evolved with us — from the first crude attempt to the science we practise today.

Cheers to everyone who holds blood close to their hearts.

And to everyone who is still striving.

Dr Arun V J

THE OPENING

Before The Promise

G R E E C E

A Long Time Ago

The patient had been bleeding for six hours when Asclepius arrived, which meant he had approximately no time left and everyone in the room knew it except the patient himself, who was unconscious and therefore spared the knowledge.

He was a soldier, twenty or so. A spear had found the gap between his armour and his ribs. The garrison physicians had done everything their training gave them to do. Their training had not given them enough.

Asclepius looked at him. Not at the wound. At the man — the grey-white of his skin, the shallow fast breathing, the pulse at the wrist that was there if you pressed and absent if you didn't.

“He is empty,” Asclepius said.

The garrison physician said: “We know. We have tried everything.”

“You have tried everything to stop what is leaving. You have not tried to replace what is gone.”

“Replace it with what?”

Asclepius turned to the large soldier standing by the door. “You. What is your name?”

“Marcus.”

“Are you willing to do something unusual?”

“Is it going to help him?”

“I believe so.”

“Then yes.”

What followed was not elegant. Asclepius had been working toward this for three years — a conclusion nobody else in the ancient world had reached: that a person emptied of blood could be restored by blood from another. He had the theory. He had some evidence. He was working with incomplete knowledge toward a correct principle, which is the condition in which most important medicine has always been practiced.

Marcus sat beside the dying soldier and gave what he had to give.

After a time that felt longer than it was, the colour began to return. The breathing steadied. The pulse at the wrist became something you could find without pressing hard.

He lived.

Marcus looked at Asclepius when it was done. “What did you do?”

“I gave him yours.” Asclepius picked up his rod — the serpent he had carved himself, because he had understood regeneration before there was a word for it — and turned toward the door. “He would have done the same for you, I think.”

“He doesn’t know me.”

“No,” Asclepius said. “That’s the point.”

He walked out into the morning.

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OLYMPUS

The Same Day

Hades presented his complaint in the flat language of a man who has learned that Zeus responds best to ledger problems.

The ledger problem: Asclepius had removed patients from Hades's inventory who had been legitimately entered. Not delayed. Removed. The most recent case was a soldier who should have died six hours ago and who was currently sitting up in a garrison infirmary asking for water.

"He is taking them back," Hades said. "This is an accounting problem. The boundary between the living and the dead exists for structural reasons. He is treating it as a suggestion."

Zeus looked around the table.

Apollo sat at the far end. He had not spoken since the session began.

"The mechanism he is using," Hades continued. "He is not healing through divine power. He heals through method — transferable, teachable, practicable by anyone with sufficient knowledge. If this spreads, the inventory problem becomes structural."

"What is the method?" Zeus asked.

"He gives them blood. From other people. Voluntarily given."

Those last two words sat in the room with weight. Not divine power. Not prayer. Not sacrifice. A human

giving part of themselves to a stranger. A gift with no return built into it.

Zeus looked at Apollo.

Apollo was looking at his hands.

“Apollo,” Zeus said. “Your son.”

Apollo said nothing for a moment. Then: “He has always been exceptional.”

“That is the problem.”

Apollo said nothing.

Zeus raised his hand.

Prometheus was on a hillside above the garrison, close enough to see the light in the infirmary window. When the thunderbolt came he felt it in the air before he saw anything.

He came down from the hillside.

The rod lay in the grass. He picked it up — the single serpent, the plain staff, the work of someone who had understood something important and been killed for it.

He broke off a fragment of the carved serpent. He placed it in the tablet case.

He took out the tablet. He wrote one line.

I will finish what he started.

He closed the tablet. He started walking.



SHADOW LOG

Entry I — The Third Name

The tablet has two names crossed off.

The third name is different, and not only because of what it will require.

The gods compiled their threat assessment before my arrest — a document cataloguing every human capability they feared. Communication. Knowledge. Agriculture. War. The physical world. Governance.

Asclepius is not on the list.

He was not on it because he was one of them, or close enough. He was killed before the document was updated, or because nobody in that chamber thought to write down medicine practiced by a half-divine physician who has discovered that blood can move between humans to reverse death as a threat requiring formal management.

I was on the hillside when Zeus raised his hand. I was close enough to see the light in the window where the soldier was recovering. I was not close enough to see exactly what Asclepius had done. I saw a dying man revived. I made an inference about blood. I have been working from that inference for four thousand years.

I am not entirely certain I understood what he understood.

This is the part I do not write in the formal record. The promise was made on a hillside above a garrison in ancient Greece by someone who had just watched a physician killed for something, and who believed —

not knew, believed — he understood what that something was.

I may be right. I have been proceeding as though I am right, which is the only way to proceed. But I want the record to contain the uncertainty, because the tablet is for what happened and this is what happened: I made a promise in grief and incomplete understanding, and I have been keeping it across four thousand years, and the keeping has been teaching me what I promised to keep.

The scar in my side aches.

I press my hand against it. I open the tablet to the next page.

Blood.

I start walking.



THE WORLD BELOW

Egypt, 3000 BCE
The cost of reverence

His name was Khnumhotep and he was a priest, which in Egypt meant he was also a physician.

He stood at the altar with a vessel of blood — from a sacrificed bull, still warm — and raised it with the movements of someone who has done this ten thousand times. The words spoken. The blood offered. The faithful watching.

Prometheus stood at the back of the temple.

The Egyptian medical tradition was, in many respects, excellent. The surgical knowledge was precise. The understanding of wounds was among the best in the ancient world. And all of it existed beneath a theology that placed the essential nature of blood permanently in the divine category — which meant it was approached through ritual rather than inquiry. Blood was sacred. You cannot study what you worship.

Khnumhotep would never ask the question that would have changed everything. Not because he lacked the intelligence. Because the framework he worked inside made the question unthinkable.

They found the true thing and built a religion around it instead of a science. Blood carries something essential of the person — every culture has arrived at this observation. The error is not the observation. The error is what they do with it.

Asclepius — whatever he understood — did not treat blood as sacred. He treated

it as functional. That is the whole difference. And it got him killed.

I take the fragment from the case and hold it for a moment. I put it back.



THE WORLD BELOW

Rome — The Colosseum, 100 CE

The right observation, wrong conclusion

The merchant in the third tier drank from the vial an attendant handed him — the blood of a gladiator who had died well — and felt, he was fairly sure, marginally braver.

This was the specific Roman belief: blood carried the brave man's courage. Drink it and receive the quality of the man who had bled.

Prometheus was six rows behind him, watching not the arena but the merchant. Watching the act of a person arriving at a true insight — blood carries something essential of the person — and drawing from it the most wrong possible conclusion.

They were this close, he thought. Four thousand years of getting close and concluding incorrectly. As long as blood means power and mystery, nobody asks what it actually does.

He left before the afternoon's events ended.

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THE WORLD BELOW

Paris — Jean-Baptiste Denis, 1667

The price of being first

A boy had been bled twenty times by physicians who believed they were helping him.

This was the standard treatment for fever: remove blood. The logic was ancient and wrong. The physicians who bled the boy were not cruel. They were practicing the best medicine their tradition gave them, in a tradition managed for centuries to keep the central question unasked.

Denis needed a donor. He had asked three people that morning. Two had declined. One had fainted at the description.

The fourth person who came to him was a traveler named Marco — lean, weathered, in apparent good health, with the quality of someone who has been walking long distances for a very long time. The surgeon's assistant who examined him noted a large old scar below the left ribs and asked about it. Marco said it was an old accident. The assistant noted it and moved on.

Marco did not say: an eagle ate my liver repeatedly for approximately a thousand years. This seemed unlikely to clarify matters.

Denis used Marco's blood, not the lamb's blood he had originally planned. The boy survived.

Denis published. The European medical establishment divided. Some curious, most horrified. Then the third patient died — a different donor, different blood, an incompatibility that Denis had no framework to understand. The trial that followed was

not really about Denis. It was about a principle that the institution had not authorised.

He was acquitted. The principle was not. In 1678, Pope Innocent XI issued a prohibition on blood transfusion that halted the practice across Catholic Europe.

Apollo's hand was in this. Not obviously — he had learned from Alexandria that burning things was less efficient than institutionalizing ignorance. The ecclesiastical machinery was more durable than a mob. He had been cultivating it for centuries. One papal decree, and the principle was buried for a hundred and forty years.

Denis was right about the giving. He had no way to know why the third patient died — the knowledge of blood groups would not exist for two more centuries. He paid the professional price for the wrong detail while carrying the correct principle.

I was Marco. I gave blood in a chair in Paris in 1667. I do not know if what is in my blood is different from what is in theirs — after four thousand years embodied, the distinction may be meaningless. But the boy survived when the clinical indicators said he should not, and I am going to attribute this to the principle rather than to whatever I am, because a principle can be replicated and what I am cannot.

Apollo used the Vatican. He does not burn libraries anymore. He

*institutionalises the silence instead.
Same outcome. More durable.*

One hundred and forty years.



**J E A N - B A P T I S T E D E N I S — 1 6 3 5 —
1 7 0 4**

French physician. Performed the first recorded blood transfusion into a human being in 1667. The boy survived. A subsequent patient died — from an incompatibility that Denis had no scientific framework to understand. Denis was tried for murder, acquitted, and the practice was banned across Catholic Europe in 1678.

He was right about the principle. He paid for a detail he could not have known. The principle he demonstrated would not be applied successfully again for one hundred and forty years.

This is the price of being first.

SHADOW LOG

Entry — The Long Silence, 1678–1818

One hundred and forty years.

During this period, the dominant medical treatment for the majority of illnesses was bloodletting — the deliberate removal of blood from patients who were already ill. George Washington died in 1799 from a combination of the underlying illness and the removal of approximately forty percent of his blood volume by physicians who believed they were helping. He was sixty-seven.

I placed questions with seventeen researchers during these years. None produced what was needed. Some came close. I am recording this because the failures belong in the record.

In the 1750s I found a surgeon in Edinburgh — capable, genuinely curious, circling the right idea. I was certain of him the way I was certain of Tomaso in Bologna, which should have warned me. I placed the question. He understood it. Then he presented the idea to his faculty as his own, was destroyed by the politics of the institution, turned bitter, stopped working. Not Apollo's move. Just the specific way institutions crush the people who threaten them without requiring any divine management at all.

I was three years behind with Semmelweis. I was six months too early with the Edinburgh surgeon. The threshold is not only about whether the mind is ready. It is about whether the institution is ready, and the institution is almost never ready, and I am still learning to read when the gap between the two is too wide to bridge with a question.

I take the fragment out sometimes. I put it back.



THE WORLD BELOW

London — James Blundell, 1818

What it means to act in the dark

The woman's name was Mary Ellis and she had delivered her fifth child three hours ago and she was bleeding to death on the table, and her husband Thomas was standing against the wall because there was nowhere else to put him.

Blundell had been thinking about this moment for four years. Not Mary Ellis — this moment. A woman dying of blood loss. A husband present. The principle demonstrated by Denis. The mechanism he had designed and built in his own workshop.

He explained it to Thomas in terms as plain as he could manage.

Thomas looked at his wife. He said: "Do it."

The first transfusion worked. Mary Ellis survived. She went home with her husband and her child.

Over the following decade Blundell performed ten transfusions. Four survived. Four died. Two were inconclusive.

The night Catherine Hale died — transfusion from her brother, violent reaction, unknown cause, the case notes written in the precise hand of a man recording a thing he does not understand — Prometheus was at the back of the ward. He waited until the family left. Then he went to find Blundell.

He found him in his office, the notes of Catherine Hale open in front of him, a candle burning low.

Blundell looked up. He had seen this man before — at the ward, at lectures, always at the edge of things. He had not asked about him until now.

“You’re not a student,” Blundell said.

“No.”

“You’ve been watching for a year.”

“Yes.”

Blundell looked at him. “Do you know why she died?”

Prometheus sat down. “Yes.”

A pause. “Then tell me.”

“I can’t tell you in terms you can use yet. The knowledge doesn’t exist yet. It won’t for eighty years.”

Blundell stared at him. “That is an extraordinary thing to say.”

“I know.”

“Who are you?”

“Someone who has been watching this problem for longer than you have.” Prometheus looked at the case notes. “She died because blood comes in types. Some types attack others. You gave her brother’s blood and her body fought it. You had no way to know. The test for it doesn’t exist. The concept for it doesn’t exist. You did everything correctly.”

Blundell was quiet for a long time. “Blood types,” he said finally.

“Yes.”

“And you know this — how?”

“I have been watching people die from this for two hundred years.” He stood. “Publish the question. What is the difference between the blood that saves and the blood that kills. Put it in every paper. Make it the thing the field is trying to answer. The answer exists — it will be found — but only if the right people know that is the question.”

Blundell looked at the notes. “You’re asking me to publish my failures.”

“I’m asking you to publish the question that your failures point to. There is a difference.”

He left before Blundell could ask anything else.

Blundell published the following year. Embedded in the paper, between the case records of the living and the dead, was the question: What is the difference between the blood that saves and the blood that kills?

He never found the answer. He died in 1878, still carrying it.

He is the story of what it costs to act correctly in the dark, over and over, without being able to understand why it sometimes fails. He kept the record. He published the question. Catherine Hale’s case notes will eventually tell Landsteiner something. That is not comfort. But it is what the work produces.



English obstetrician. First successful recorded human-to-human blood transfusion, 1818. Ten transfusions over the following decade: four saved, four killed the patient, two inconclusive. He published his failures alongside his successes and embedded in his work the question that would take eighty years to answer.

Blundell is not the story of the first successful transfusion. He is the story of what it costs to act correctly in the dark, over and over, without understanding why it sometimes fails. He kept going anyway. The question he asked outlasted him.

THE WORLD BELOW

Vienna — Karl Landsteiner, 1900–1901

The moment uncertainty ends

The thing that would change everything happened on a Tuesday in October when Landsteiner mixed a sample of his own blood with a colleague's and watched the red cells clump under the microscope.

He had seen clumping before. The interesting part was that when he reversed the mixture, the clumping did not occur. The reaction ran one direction and not the other, and that asymmetry meant something precise.

Six months of systematic mapping. His blood. His colleagues' blood. Blood from patients. The patterns were consistent, reproducible. The groups resolved into three categories he called A, B, and C — though C would be renamed O, from the German ohne, meaning without, as in without antigens. A fourth group, AB, was found by his students the following year.

He understood what he had found the moment he found it. The question Blundell had asked in 1824 had an answer. The uncertainty that had killed Catherine Hale and every other patient who had died of a reaction in the eighty years since was over.

He published in 1901. The medical establishment received it with near-silence.

Patients continued to receive incompatible blood. They continued to die from reactions that typing would have prevented.

Prometheus approached him in the winter of 1905, in his laboratory, correspondence files open, the

growing stack of papers that cited his work in passing without applying it.

“You have answered the question,” Prometheus said.

Landsteiner looked up. He had the fatigue of someone who has finished the large piece of work and discovered that finishing it was not the end of anything. “Yes.”

“They are not using it.”

“The clinical adoption has been slow.”

“Who is teaching it to surgeons? Who is in the obstetric wards?” Prometheus looked at the files. “The paper exists. But the people who could use it now do not read journals. They learn from the person across the table. Who is that person?”

Landsteiner sat with this.

He began to teach differently. He went into the clinical spaces. He found Reuben Ottenberg in New York, who performed the first properly crossmatched transfusion in 1907 and understood that typing before transfusing was the mechanism of safety, not an optional extra.

The Nobel Prize came in 1930. Landsteiner was 62. He had spent three decades watching his most important discovery save lives more slowly than it should have, because the gap between knowledge and practice is one of the distances publication alone cannot cross.

Prometheus took the rod fragment from the case the night the Nobel was announced. He held it. Something in the line of the carved serpent was

different from what he remembered — not visibly, not measurably. Present.

He put it back.

Landsteiner answered Blundell's question. The uncertainty that sat in the gap between Denis and tonight is resolved. This is what it feels like when uncertainty ends: not triumph. Relief. The specific relief of a darkness that has finally been given a switch.



**KARL LANDSTEINER — 1868 —
1943**

Austrian-American physician. In 1901 he discovered that human blood fell into distinct groups — A, B, and C (later renamed O, from the German for without) — by observing whether mixed samples caused red cells to clump. A fourth group, AB, was found by his students the following year. This discovery explained, completely and permanently, why some transfusions worked and others killed.

His paper was largely ignored for a decade. The Nobel Prize came in 1930, twenty-nine years after the discovery. He co-discovered the Rh blood group system in 1940 and died in 1943, at seventy-five — his last contribution to the field he had founded.

Landsteiner is not a brilliant observation. He is the moment uncertainty ends. Before him, doing everything right was still not enough. After him, it was.

SHADOW LOG

Entry — The Rh Factor and the Coombs Test

In 1939, Philip Levine and Rufus Stetson found a second blood group system — invisible to the existing methods, revealed only when a woman reacted severely to her own husband's ABO-matched blood after a stillbirth. Her immune system had been sensitized to a factor carried by the foetus. When her husband's blood arrived carrying the same factor, the antibodies attacked. Landsteiner confirmed the system in 1940 and named it Rh — his last major discovery, made at seventy-two.

The Rh factor is the positive or negative after your blood type. Every pregnant woman is tested for it. The deaths from Rh incompatibility that once took newborns before they had names are now largely preventable.

Five years later, Robin Coombs developed the antiglobulin test in Cambridge. It detects antibodies that coat red blood cells without causing visible clumping — antibodies that had been invisible to every previous method, killing transfusion recipients without explanation. After the Coombs test, these invisible incompatibilities became detectable. Coombs received no Nobel Prize. His test is performed in every blood bank in the world, every day, to prevent deaths that would otherwise be attributed to unknown causes.

I did not reach Levine, Stetson, or Coombs. They found it themselves. The field had grown past the

point where a single question was the rate-limiting factor. This keeps happening now. That is the whole point.



THE WORLD BELOW

France — Captain Oswald Robertson, 1917

Distance

The ammunition box sat on a supply cart at a forward aid station, packed with straw and ice, holding six bottles of blood stored in sodium citrate solution.

Robertson had solved the central problem: soldiers on the Western Front were dying from blood loss at a rate that direct transfusion could not address, because direct transfusion required a donor beside the patient, and on a battlefield the available donors were also bleeding. He separated the giving from the receiving in time. Collect blood from voluntary donors behind the lines. Type it. Preserve it with sodium citrate, which Lewisohn had shown could prevent clotting. Pack it in ice. Transport it forward before it was needed, not after.

The first blood bank was not a gleaming laboratory. It was that box, on a cart, in the mud.

Among the orderlies in its first three weeks was a quiet Canadian named Prior. He typed blood, labelled bottles, loaded ice, checked temperatures through the cold nights, said very little beyond what the work required. Robertson, who had more pressing concerns than orderly paperwork, found him entirely acceptable.

Prior was, in fact, a Titan who had been keeping a promise for four thousand years and had decided that keeping it sometimes looked like packing ice boxes in France at three in the morning.

He had not expected to find this satisfying. He found it satisfying.

Three weeks in, a soldier was carried through at dusk — shrapnel, significant blood loss. Prior went to the ammunition box. He came back with a bottle of O-negative. Universal. Compatible with anyone. He handed it to the medic and stood back.

The transfusion took twelve minutes. The soldier's colour returned before the bottle was empty.

When he could speak, the soldier asked what had been given to him.

The medic said: blood. From a donor in London.

The soldier was quiet. "Someone in London gave me their blood."

"Yes."

He did not say anything else.

Prior was already back at the box, checking temperatures. He heard the exchange and did not look up.

Robertson separated the giving from the receiving in time. A donor in London saves a soldier in France and they will never meet. The gift travels without them.

I have been Prior for three weeks. I am a Titan. I have faced Apollo in a chapel and Zeus's threat assessment and an eagle for approximately a thousand years. I have been asking the right question to the right person at the right moment across four thousand years of human history.

Tonight I packed ice boxes.

I cannot decide if this is the strangest thing I have done or the most obvious. Asclepius walked to his patients through whatever weather. He carried the rod and he walked. The work requires presence, not only questions. I have been asking questions from a distance for a very long time. It turns out the distance has a cost I had not fully calculated.

The soldier is alive. The box is cold. The ice held through the night.

This is also the work.



THE WORLD BELOW

France — A Battlefield at Night, 1917

The argument I cannot answer

Ares found him near midnight, in the rain, kneeling beside a soldier who had not yet been reached by the medics.

He was doing something practical and unglamorous — applying pressure to a wound with one hand, keeping the man's airway clear with the other, the physical work of keeping someone alive long enough for help to arrive. Mud on his clothes. Rain on everything. No one left alive in the immediate vicinity to see either of them.

Ares stood over him and looked down.

Then, because there was no one alive to see and because both of them had been in human forms for long enough that dropping them felt like taking off wet boots, they became what they were.

Ares in his full form was not larger. He was warmer — the specific heat of a god entirely in his domain, the battlefield his the way a library is a scholar's. He became more present. More real. The mud around him seemed less like mud and more like the permanent condition of a world that was always going to arrive here.

Prometheus in his full form was older. The scar below his left ribs became briefly visible through his clothing — not glowing, not dramatic, just there, deeper than any wound a human body carries. Four thousand years of weight becoming legible.

"The Titan who stole fire from the gods," Ares said. "On his knees in French mud."

Prometheus finished what he was doing. Then he stood.

“You’re in a good mood,” he said.

“I’m always in a good mood when I’m busy.” Ares looked at the battlefield around them — the artillery in the distance, the lines, the specific industrial scale of a war producing casualties at a rate unprecedented in human history. “This has been an excellent decade. I had nothing to do with the industrial part — they managed that themselves. I merely encouraged the conditions.”

“What do you want?”

“To tell you something that will ruin your evening.” Ares smiled. He had the smile of someone who genuinely enjoys delivering bad news because the bad news is also good news, depending on your position. “The blood banking system you’ve been building — Robertson’s depot, the stored blood, the whole apparatus of keeping soldiers alive — I want to thank you.”

Prometheus was quiet.

“More men survive their wounds,” Ares continued. “More men return to the front. More men fight in the next war. You are extending the supply chain of my raw material. I should have you on staff.”

“Humans don’t go to war because they survived a transfusion.”

“No. They go to war because they’re human, which is the condition you’ve been working so hard to extend. Every life you save today, I get back eventually. Not all of them. But enough.” He looked at the soldier between them — unconscious, stable now, breathing. “That one

specifically. He'll recover. He'll be back at the front in six weeks. I've checked the file."

Prometheus did not look down.

"You actually care about him," Ares said. His voice changed — not into contempt. Into something more like genuine incomprehension. "Not as an illustration of a principle. Not as evidence of your project's success. You care about this specific man in this specific mud."

"Yes."

"Why?"

Prometheus did not answer immediately. "Because he was here. Because I was here. Because not helping is also a choice."

Ares looked at him for a long moment. "Four thousand years," he said. "And you still haven't worked out that caring about the specific ones is what they do. Not what we do. You stole fire for humanity. You didn't steal it for that man's grandfather."

"I'm doing both now."

Ares shook his head slowly. Not in disagreement. In the specific head-shake of someone encountering a thing that is entirely outside their categories. "That is the strangest thing I have seen in ten thousand years. A Titan on his knees in French mud caring about a specific dying man."

"I learned it from someone."

"The physician."

"Yes."

Ares looked at the battlefield. He was quiet for a moment. Then: “He was good, the physician. I had some trouble with him, actually. The type who keeps people alive who were supposed to die quickly. I didn’t enjoy that.”

“Zeus solved your problem.”

“Zeus solved his own problem. He didn’t do it for me.” Something passed across Ares’s face — briefly, gone as quickly as it came. “It was a waste. Whatever else he was, it was a waste.”

He began to walk away, his human form reassembling around him as he went, disappearing into the dark and the rain.

Over his shoulder: “The blood banking system is still good for me. I want you to know that. Whatever you think you’re doing, I’m also winning.”

Prometheus knelt back down beside the soldier.

He wrote nothing in the tablet that night. He thought about what Ares had said — every life you save today, I get back eventually — and he thought about it for a long time. He did not have a clean answer. The choice was never between a world with war and a world without it. The choice was between a world where humans could save each other from blood loss and a world where they could not. He had chosen the first.

Some of them went back to war.

He had no answer for that. He kept the record of it.

The medic arrived four minutes later. The soldier was evacuated. Prior walked back to the depot in the rain.

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**RICHARD LEWISOHN — 1875 –
1961**

German-American surgeon who demonstrated in 1915 that sodium citrate, in the correct concentration, prevented blood from clotting outside the body. This discovery made stored blood possible. Without it, Robertson's ammunition box is just a box. Lewisohn's name is not widely known outside specialist circles. His work holds everything up.

THE WORLD BELOW

Spain — 1936–1937

Commitment

Frederic Durán-Jordà built the first organised civilian blood donor registry in history in Barcelona — 28,900 donors, typed, processed, distributed to the front lines of a war that the republic was losing.

Norman Bethune drove a van toward the front line at 2 a.m. with blood in the back and a map on his knees and a colleague in the passenger seat who knew the roads.

The colleague's name was Prior.

They took the eastern road because the other one was watched. Bethune's hands were cold on the wheel. Prior's were cold on the map. Neither of them mentioned this because mentioning it would not make the road shorter.

Prior had been in Barcelona for four months — working Durán-Jordà's registration desk, asking people whether they would give blood for the republic. He had asked 847 people. 612 had said no.

The reasons included: fear of needles, suspicion of the procedure, belief that giving blood permanently weakened the body, uncertainty about eligibility, having given blood before and not enjoyed it, being busy, being not that busy but feeling busy, and in four cases simply looking at him and closing the door.

He had faced Apollo in a chapel and an eagle for a thousand years.

None of that had prepared him for the 612 who said no to a blood donation.

The 235 who said yes said it immediately, without hesitation, with the quality of people who had been waiting for someone to ask. This was also true and he kept it in the record alongside the 612, because both were true and the tablet was for what happened.

At 2 a.m. they reached the forward post. They unloaded in the dark. There were casualties waiting.

Bethune drives toward the front because that is where the blood is needed. I am in the passenger seat because I know the road. Four thousand years of asking questions from a distance, and this is what doing it directly looks like: cold hands on a map, the eastern road, two in the morning.

Asclepius walked to his patients. He carried the rod and he walked.

I understand this now in a way I did not before France.



**P E R C Y L A N E O L I V E R — 1 8 7 8 —
1 9 4 4**

British civil servant. Founded the first voluntary blood donor panel in London in 1921, from his kitchen table, with no institutional support. People who agreed in advance to give blood for strangers when called. No payment. No obligation. Just: if you ask, I will come.

It became the National Blood Transfusion Service. Oliver's name is not widely known. The system he built on trust in human generosity functions today.

**FREDERIC DURÁN-JORDÀ —
1905–1957**

Catalan physician. Built the first organised civilian blood donor registry in Barcelona during the Spanish Civil War. When the Republic fell, he fled to England and rebuilt the system in Manchester from memory. He did not let good work die with the circumstances that produced it.

JANET VAUGHAN — 1899–1993

British physician who organised the first civilian blood transfusion service in Britain in 1938, before the war began, for a disaster she could see coming and most people were pretending not to see. When the Blitz started, the blood was ready. The people who received it did not know her name. She did not expect them to.

THE WORLD BELOW

Barcelona — 1937

What Cad said

The registration desk was quiet in the middle of the afternoon — too hot for the morning rush, too early for the evening one. Prior was updating the donor records when a man sat down across from him who was not a donor.

Cad had been filing reports on Prometheus from Hermes's desk in Lisbon for decades. He had read the Barcelona records. He had decided to come himself, which was unusual. He had brought pastry from a bakery on Las Ramblas, which was, he felt, the minimum courtesy.

He set the bag on the table. Prior looked at it.

"Hermes sends it," Cad said. "He says hello. He's found a very good bakery in Lisbon and wants everyone to know."

"Tell him I said nothing."

"I'll tell him you said exactly that." Cad opened his journal. He made a note. He looked up. "Why is a Titan staffing a blood donation registration desk in Barcelona?"

"Because the desk needs staffing."

"There are humans who could staff it."

"There are. They're doing other things."

Cad looked at him for a moment. "You've been packing ice boxes in France. Running donor registration in Spain. You gave blood yourself in Paris in 1667. You are doing things that any competent

human could do, in a field that has dozens of competent humans working in it.” He made another note. “I’m asking sincerely, not rhetorically. Why?”

Prior was quiet for a moment. He looked at the donor records — the names, the blood types, the dates, the little checkmarks indicating the units collected. 28,900 names.

“Because Asclepius walked to his patients,” he said. “He didn’t send questions. He didn’t manage the situation from a hillside. He showed up and did the work. That’s what he was killed for — not for having the idea, but for doing it, for a specific dying man, in a specific room, with his hands.”

“And you decided that after four thousand years of operating differently, you should do it his way.”

“I decided I hadn’t understood what I was keeping the promise to do. The promise was to finish what he started. What he started was not a strategy. It was presence.”

Cad wrote this down. He looked at what he had written. “That’s the most honest thing you’ve said in any document I’ve filed. I’m going to record it.” He looked up. “Can I say something you won’t like?”

“You’re going to anyway.”

“You’ve gotten more careful since Bologna. More precise about the threshold, more patient with observation, more cautious about the question. This is correct. But underneath the caution there is also fear. Not of failing again exactly — you’ve made peace with failing. Fear of what it means when you do the close work and it still fails. When you’re in the room, packing the ice, and the ice doesn’t matter because something

else goes wrong.” He paused. “The manual work keeps you close to the success cases. You can feel the soldier survive from two feet away. A question asked from a distance and a person who applies it wrong — you only hear about that later, in the abstract. The close work is more satisfying and less frightening.”

Prior did not answer immediately.

“I’m not saying stop the close work,” Cad said. “I’m saying the fear is in the record too, whether you write it or not.”

“Is that what you came to say?”

“That and to bring the pastry.” Cad stood. He picked up his journal. “Hermes is coming to Barcelona next week, by the way. He wants to see the registration system.”

“Tell him I’ll be in France.”

Cad smiled. He left.

Prior went back to the donor records. He wrote nothing in the tablet that afternoon.

But he thought about what Cad had said for three days. He thought that Cad was probably right, about the fear and about what it had produced. And he thought that knowing a thing and fixing a thing were different problems, and that he had known about Bologna for five centuries without fixing what it had done to his relationship with the threshold, and that Cad, who had filed reports on Prometheus for decades without being asked his opinion once, had walked into a registration desk in Barcelona and handed him the accurate version of himself in under ten minutes.

He would tell Cad that, eventually.

He was fairly sure Cad already knew.



THE WORLD BELOW

United States — Charles Drew, 1940–1942

Dignity

Charles Drew solved the problem that whole blood storage had not fully solved.

Whole blood expired. It required typing at the point of use. It was difficult to transport at the volumes a global war required. Drew's solution was plasma — no typing required, could be dried and reconstituted, could cross the Atlantic. He organised the Blood for Britain program, directed the American Red Cross blood bank, built the organisational infrastructure of the modern blood supply system.

In 1942, the American Red Cross instituted a policy of segregating donated blood by the race of the donor.

Drew made a public statement. The science was unambiguous: there is no racial characteristic in blood. Blood types are distributed across all populations. No test can identify the race of blood in a storage bag. The segregation was not based on medical evidence. There was no medical evidence for it.

He was dismissed from the program.

He returned to Howard University, trained surgeons, continued his work. He died in 1950, at forty-five, from blood loss following a car accident.

The system he built continues to function. His name is not on it.

Drew built the system. They dismissed him because of the colour of his skin, which has no medical significance whatsoever.

I have watched Apollo manage knowledge by managing who is permitted to hold it for ten thousand years. I have never seen it stated more nakedly than this.

Drew did not lose his dignity when they dismissed him. He went back to Howard and built the thing that outlasted the people who dismissed him. Dignity is not what others give you. It is what you keep when they try to take it. He kept it.

I held the rod fragment tonight and I thought about putting it down. I thought about it for a long time. I did not put it down.

Hades noted, in a communication I was not meant to intercept, that the contaminated blood crisis of the following decades would be the first time medicine itself functioned as a vector for his inventory. He did not gloat. He filed it as a structural observation. He was right.



**CHARLES RICHARD DREW —
1904 – 1950**

American physician. Developed large-scale plasma processing and blood banking. Organised the Blood for Britain program. Directed the American Red Cross blood bank. Built the organisational infrastructure of the modern blood supply system.

In 1942 the American Red Cross segregated blood by race. Drew publicly stated this had no scientific basis. He was dismissed. He returned to Howard University and continued his work. He died in 1950 at forty-five, from blood loss following a car accident.

Drew is not the story of plasma processing. He is the story of dignity — being undeniably right, being dismissed for reasons that have nothing to do with being right, and returning to the work anyway. The system he built functions today. His name is not on it.

LOUTIT AND MOLLISON — 1943

John Loutit and Patrick Mollison extended blood storage from days to weeks. This made global blood logistics possible. Storage duration is unglamorous and foundational. The difference between blood that lasts three days and blood that lasts three weeks is the difference between a local resource and a global system.

SHADOW LOG

Entry — Somalia, October 1977

The last natural case of smallpox recovered today.

I heard this while inventorying blood supplies in a clinic in Merca. I have been working in WHO support services in Somalia for three years — not the eradication campaign, which did not need me, but the blood transfusion infrastructure that runs alongside any sustained public health operation.

I wrote it in the tablet and went back to the inventory.

Asclepius died for the principle. Robertson built the box. Drew built the system. I have been checking storage temperatures in Somalia.

This is all the same work.

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SHADOW LOG

Entry — The Contaminated Blood, 1980s

I am going to write this plainly.

In multiple countries in the early 1980s, the blood supply became contaminated with HIV. The people most severely affected were haemophiliacs who required regular infusions of clotting factor concentrates. The contamination did not happen because nobody knew. In each country, knowledge that the blood supply might be contaminated preceded the action taken to protect recipients. The gap was measured in months. In some countries, years. People died in the gap.

Institutional inquiries in France, Canada, and elsewhere documented the mechanisms: cost concerns, regulatory inertia, bureaucracies that had learned to move carefully and forgotten that careful movement has a price. The price was paid by people who had no part in the deliberation.

I helped build the blood banking infrastructure. The pipes I helped design carried the wrong thing. Apollo said in a roofless chapel in 1817 that my speed has a cost. He was right then. He is right about this. The cost is not always paid at the moment of the advance.

The haemophiliacs who died in the gap are in this record. Not by name. But in the record.

I did not put the rod down. The promise does not have an exception clause.

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THE WORLD BELOW

Kerala, India — A Blood Donation Camp

The question and the symbol

The camp was set up in the courtyard of a college — twelve beds, a registration desk, a nurse who had been doing this for eleven years. Volunteers from the blood donation club were managing the queue.

Prometheus was at the registration desk.

He had been in Kerala for six weeks, working the voluntary donation campaigns the way he had worked Durán-Jordà's desk in Barcelona — asking people whether they would give blood for a stranger, learning that the question lands differently in different registers, getting better at the specific frame that produces yes.

A student — first time, slightly nervous — sat down and answered the health questions and held out his arm.

While the nurse prepared the site, he looked at the camp's banner — the Rod of Asclepius, one serpent, no wings — and asked: "What does that mean? The snake on the stick?"

The nurse said, without looking up: "The symbol of medicine."

The student nodded and gave blood for a stranger.

Prometheus recorded the form and moved to the next person in line.

He asked what the symbol means. The nurse said: medicine. The full answer is longer — a hillside in Greece, a garrison

room, a promise, four thousand years of precisely this. But the full answer was not what the moment needed. He gave blood for a stranger without it. That is exactly right.



THE WORLD BELOW

A Blood Donation Center — Present Day, Morning

The universal donor

The donation center opened at 08:00. By 08:15 there were eleven people in the waiting area, which was a good morning.

The twelfth person to register gave his name as Marco Prior, occupation researcher, nationality mixed. The registration form did not have a category for mixed. He wrote Italian and left it at that.

He had not given blood since Paris in 1667. Three hundred and fifty-six years was a gap that most donation services would find concerning if they knew about it. The form did not ask.

The phlebotomist who conducted the physical screening was efficient and thorough. She checked his blood pressure and pulse and then asked him to lift his shirt slightly to check the sites available for venepuncture. When she did, she saw the scar below his left ribs — old, deep, not from any surgical procedure she recognised. The kind of scar that looked like something had happened there, repeatedly, over a very long time.

“Old injury?” she asked.

“Yes,” he said. “Old accident.”

She made a note: old scar, below left ribs, no current clinical significance.

He thought: I cannot tell her an eagle ate my liver repeatedly for approximately a thousand years. This is not a conversation that ends usefully.

She moved on. He settled in the chair and looked at the ceiling, the way donors do when they are not sure what to do with their face.

He thought about Marcus. Sitting beside a dying soldier in ancient Greece, saying yes before he had time to think about it. The same chair, essentially. Four thousand years of better equipment and the same yes underneath.

The needle went in.

The phlebotomist said: “All done. Hold this here for a moment.”

He held the cotton swab. She labelled the bag — O-negative, the universal type, compatible with anyone, the type that gives without needing to know who receives — and moved to the next donor.

He did not know who would receive it. He did not ask.

He sat for the required minutes, drank the juice they gave him, thanked the phlebotomist, and walked out through the laboratory corridor.

He paused at the door of the blood bank laboratory. Through the window he could see the analyser running, a researcher with her back to him working at the bench. He could see, on the wall beside the Rod of Asclepius symbol, a space that seemed slightly incomplete.

He reached into the tablet case. He removed the rod — the full rod, the serpent complete, the staff smooth from four thousand years of being carried and set down and picked up again. He set it on the bench just inside the laboratory door.

Then he walked out into the morning.

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THE WORLD BELOW

The Blood Bank Laboratory — The Same Night

Continuity without witness

The crossmatch had been running for eleven minutes when Dr. Vinitha noticed the rod on the bench.

She was working late — the kind of late that is simply what the job is on certain days. The patient upstairs was going to theatre at 07:00. The blood needed to be crossmatched and in the issue fridge by 06:30.

Something on the bench that had not been there when she started her shift. A staff, about the length of a forearm. Plain metal. A serpent carved into it in a careful spiral from base to tip.

She picked it up. Lighter than it looked. The carving was precise — not decorative, the work of someone who had made this specific object with specific attention. She turned it over. No markings she recognised.

She looked at the wall behind her bench.

There, as on the wall of every blood bank she had ever worked in, was the Rod of Asclepius. The institutional symbol: one serpent, no wings. She had walked past it every day for six years without thinking about it, in the way you stop seeing the things that are simply there.

She looked at the rod in her hands. She looked at the symbol on the wall.

She was presenting at the Transfusion Medicine conference next month — extended antigen typing data for multiply-transfused patients. Two years of work that had finally resolved the way she had hoped. Good work. She knew it was good work.

The analyser beeped. Group O positive. No clinically significant antibodies. Compatible for the ordered units.

She set the rod on the bench. She printed the report. She labelled the units. She logged the issue. She loaded the fridge.

Then she came back to the bench and looked at the rod again.

She crossed to the wall and lifted it beside the symbol already there — beside it, not replacing it. She found a hook she had never noticed before. She hung the rod on the wall.

She stepped back and looked at both of them for a moment.

Then she put on her coat and walked out.



THE DIVINE RECORD

A Bench Outside The Blood Bank — The Same Morning

Caduceus had been sitting on the bench outside for approximately twenty minutes when Hermes arrived, which was twenty minutes after Prometheus had left and thirty seconds after Vinitha had hung the rod on the wall inside.

“You’re late,” Cad said.

“I am never late,” Hermes said, sitting beside him. He handed Cad a paper bag. “Also, pastry. The bakery on the corner has been open since five.”

Cad opened the bag. “You found a bakery at five in the morning.”

“I find bakeries at all hours. It’s a skill.” Hermes looked at the building. Through the laboratory window, the rod was visible on the wall, beside the symbol. “She hung it.”

“Yes.”

“Beside the other one. Not instead of it.”

“Yes.”

They sat with that for a while.

“How long?” Hermes said.

Cad checked his journal. “Approximately four thousand years. Give or take.”

“Hm.” A pause. “I noticed the hospital across the street has the wrong symbol on the door.”

Cad did not look up from the pastry. “I know.”

“Two serpents. Wings. That’s mine.”

“It’s an error made in 1902 by the United States Army Medical Corps. It was pointed out immediately. It was not corrected. Several thousand American medical institutions currently display the symbol of the god of commerce and messages as their emblem of healing.”

A pause. “How many thousand?”

“Conservatively? Several.”

Hermes considered this with visible satisfaction. “I always liked America.”

“You like any place that has made a clerical error in your favour.”

“That is not inaccurate.” He looked at the building again. “What is she working on? The researcher inside.”

“Extended red cell antigen typing. Molecular methods for multiply-transfused patients. She’s presenting at the Transfusion Medicine conference next month.” He looked up. “This hospital uses the correct symbol.”

“One serpent. No wings.”

“Yes.”

“Good.” Hermes stretched. “Do you know what Asclepius’s rod was made from? Originally.”

“A walking staff. He carved the serpent himself. The first thing he made with his training was a walking stick with a serpent on it, because he intended to spend his career walking to people who needed him.” Cad

paused. “Chiron said it was a good serpent. For a first attempt.”

Hermes sat with that.

“Write that down,” he said.

“I already did,” Cad said.

Through the laboratory window the rod was on the wall. Beside the symbol. Together. Somewhere in the building a porter was collecting the crossmatched units, loading them onto a trolley, pushing it toward the lift. Upstairs, a patient was being woken and prepared. In a few hours, in a theatre, a surgeon would call for blood, and it would be there.

The work had been done. It would be done again tomorrow.



SHADOW LOG

Final Entry — Book III

I gave blood this morning. O-negative. Universal donor. The type that gives to anyone without needing to know who receives.

The phlebotomist saw the scar below my left ribs during the physical check. She asked about it. I said old accident. She noted it as no current clinical significance and moved on. I thought: I cannot tell her an eagle ate my liver repeatedly for approximately a thousand years. Some explanations are not useful.

I gave fire once in a stalk of fennel and handed it to a man who did not know who I was. I gave blood today in a chair to a phlebotomist named Amara who was professionally warm and did not know who I was either. Both times: the same principle. Give what you have to whoever needs it. O-negative does not ask the recipient's blood type. Fennel fire does not ask the recipient's readiness. The universal donor gives universally.

The rod is on the wall of the blood bank laboratory. Vinitha hung it beside the symbol. The real thing and the representation of itself, together.

I want to record what happened to it between the hillside in Greece and that wall.

When I picked up the fragment, it was just metal. Over four thousand years — Denis's patient, Robertson's soldier, the student in Kerala, the 235 in Barcelona who said yes, the 612 who said no — something accumulated in it that I have no better word for than: it became what it was supposed to be. I did not do this. The work did it.

Ares told me that every life I save, he gets back eventually. He is not wrong. I have no clean answer for Ares. I never did. The choice was never between a world with war and a world without it. The choice was between a world where humans could save each other from blood loss and a world where they could not.

Cad told me in Barcelona that the close work was partly about fear. He was also not wrong. Both true things simultaneously, which is the condition of doing anything real for long enough.

Asclepius.

You were right about all of it. The blood. The giving. The strangers in the chairs.

Zeus killed you for knowing something too early. The world has caught up.

The field runs in Kerala and Lagos and Johannesburg and São Paulo and Tokyo and Barcelona and London and every other city where someone decided that a stranger's life is worth something. It runs without me now, mostly. The researchers are asking questions I did not plant. The discoveries are arriving without my questions. The promise has become self-sustaining, which was always the destination.

The rod is on the wall.

O-negative. Universal donor. No antigens. No rejection. Compatible with anyone who needs it.

Of course.

The constellation is clear tonight. I hope you can see it from there.

I think you can.

The tablet has three names crossed off.

The list continues.

I gave fire. I gave blood. I start walking.

THE WRATH OF PROMETHEUS

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AUTHOR'S NOTE

The scientists in this book were real. Their discoveries were real. What was done to some of them was real, and is not excused by the passage of time.

Karl Landsteiner discovered blood groups in 1901. His groups were originally named A, B, and C — the C group later renamed O, from the German ohne, meaning without antigens. His paper was largely ignored for a decade. The Nobel Prize came in 1930, twenty-nine years after the discovery. He died in 1943 at seventy-five.

Richard Lewisohn discovered sodium citrate anticoagulation in 1915. He made blood banking possible. He is not famous.

Oswald Robertson built the first blood bank in France in 1917. He is not famous outside the field.

Percy Lane Oliver built the first voluntary blood donor panel from his kitchen table in 1921. He is not famous.

Frederic Durán-Jordà built the first organised civilian blood donor registry in Barcelona during the Spanish Civil War, fled into exile, and rebuilt it in Manchester from memory. He is not famous.

Janet Vaughan organised the first civilian blood transfusion service in Britain before the Second World War began, so that when the Blitz started, the blood was ready. She is not famous.

Charles Drew built the modern blood banking system and was dismissed from the Red Cross program because of racial segregation policy. The system he built continues to function. His name is not on it.

Robin Coombs developed the antiglobulin test in 1945. It is used in every blood bank in the world every day. He received no Nobel Prize.

The contaminated blood crisis of the 1980s affected thousands of people across multiple countries. In each country, the knowledge that the blood supply might be contaminated preceded the action taken to protect recipients. The gap was not inevitable.

I am a transfusion medicine physician. I work in a blood bank. The Rod of Asclepius — one serpent, no wings — is the symbol of my profession.

The voluntary donor is the foundation of everything in this book and everything in this field. They give without knowing who receives. They always have. They always will. In Kerala and Lagos and Johannesburg and São Paulo and Tokyo and Barcelona and London and everywhere else someone decided that a stranger's life is worth something.

That is the whole of it.

ABOUT THE AUTHOR

Dr Arun V J is a physician, writer, and the kind of thinker who refuses to stay inside one domain.

He holds an MBBS, an MD in Transfusion Medicine, and an MBA in Hospital Administration from BITS Pilani. He currently serves as Assistant Professor in the Department of Transfusion Medicine at Malabar Medical College Hospital and Research Centre. He is a recipient of the Dr J G Jolly Award for outstanding contribution to voluntary blood donation, and holds the ISBT I TRY IT Grant for research in transfusion science.

He co-founded Transfusion Mentorship Arena (TRAM), a leadership programme with participants across more than ten countries, and conducts AI training workshops for healthcare professionals.

He writes at the intersection of medicine, philosophy, and human behaviour. His blog, The Third Thinker, explores the ideas that don't fit neatly into any single field.

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*“It is not the blood that makes us
human.*

It is what we do with it.”

— thirdthinker.com