



Bitter pill

A WORLD OF RESISTANCE:
INDIA AND THE GLOBAL
ANTIBIOTIC CRISIS

By Assa Doron and Alex Broom.
Belknap, ₹699

The discovery of antibiotics is seen as one of medicine's singular triumphs. But it has also unleashed Frankenstein's monster — superbugs created through the misuse of antibiotics — and antimicrobial resistance is now serious threat. Assa Doron and Alex Broom show how the AMR crisis is embedded in everyday life. They situate India — with its uneven healthcare systems, poor sanitation, overcrowded hospitals, weak environmental regulations, a profit-driven pharmaceutical industry and institutional complicity — at the centre of the problem whose repercussions extend far beyond national borders.

The book traces the history of antibiotics from the penicillin moment — the “wonder drug” that tilted the Second World War in favour of the Allied forces — to India's “Penicillin Party” of 1955 after which the country emerged as the leading producer and consumer of antibiotics. Today, Indians pop the “everything drug” for nearly every ailment. The authors combine archival material, drug scandals, and extensive fieldwork across pharmacies and agricultural sites to show how deeply antibiotics have become woven into systems. A pharmacist at the Delhi airport dispensing a cocktail of “amoxicillin and potassium clavulanate” without a prescription or a farmer relying on medicated feed are examples of this insidious and curated structure of necessity. Drug-resistant TB and antibiotic-resistant sepsis among newborns are signs of the collapsing equilibrium between humans and microbes. The discussion on how AMR intersects with class and gender divisions is illuminating, as is the documentation of the circulation of antibiotics through roadside pharmacies, overstretched clinics, and poultry chains.

The book refuses to place faith solely in newer drugs or responsible consumption; instead, it advocates a rethinking of the public health infrastructure through improved sanitation, sustainable agriculture and equitable healthcare access. At times, it is weighed down by its academic framing and a recurring emphasis on structural inequalities. The repetitions perhaps mirror the crisis's acuteness.

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