
Expelling the Plague: The Health Office and the Implementation of Quarantine in Dubrovnik, 1377–1533 by Zlata Blažina-Tomić and Vesna Blažina

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Based on remarkably rich and previously untapped archival material, *Expelling the Plague* reconstructs the development of plague-measures in Dubrovnik (also known as Ragusa) between 1377 and 1533. A vibrant city-state and hub of Mediterranean trade in modern day Croatia, its centrality made this port vulnerable to plague. In the decades following the pandemic of 1347–1350, the city soon recognized the disease as a reoccurring threat to its existence and was exceptionally early in employing preventative measures. In fact, as the book's cover advertises, it was 'the first city in the world to develop and implement quarantine legislation, and in 1390 it established the earliest recorded permanent Health Office'.

The health-officials are the main characters of this story as well as the producers of the book's most important source. At the monograph's core is the *Libro deli Signori Chazamorbi*, a manuscript containing the health-officials' administration of traders' arrivals and trials for offenders. The initial transcription was made by Dubrovnik's archivist Zdravko Sundrica (1915–1995), to whom the book is dedicated. Now Zlata Blažina-Tomić and Vesna Blažina have used this fascinating source to uncover in detail Ragusa's history of plague. This study is a contribution to the (social) histories of medicine, science, and public health; but the source-material and analysis are also relevant to a wider range of scholars, including those of urban institutional history and Mediterranean trade and exchange. The authors are in clear dialogue with historians of plague in Renaissance Italy and their in-depth study not only offers a wealth of information from another geographical area but also contrasts recent work on plague-measures in Italy with a more positive interpretation of the health-officials' impact and motivation.

The first chapter gives the necessary introduction to Dubrovnik's political organization, physical layout, and socio-economic and cultural achievements. In the spirit of the city's main chroniclers, the authors describe Dubrovnik as a Catholic, proud, and peace-loving republic ruled by patricians, a city that successfully maintained its dominance in international trade during the late medieval and early modern periods. The aristocracy protected their boundaries by strict rules of inheritance and a political monopoly. Fear of factionalism contributed to a governmental organization with continuously rotating offices divided among several governmental bodies: a rector, senate, major council, and a minor council. Commoners had very little political involvement but some organization through confraternities.

The second chapter recapitulates the state of the art regarding plague-pathology and current historiographical debates. Blažina-Tomić and Blažina argue that the focus on multi-causal narratives has pushed the impact of human interventions as a factor in development of epidemics to the background. In addition, they critique the image of Italy as a forerunner in combatting plague and public health, an image presented most influentially by Carlo Cipolla [1981] and Samuel Cohn [2010]. *Expelling the Plague* offers a different perspective on both these issues by shifting away from the Italian peninsula across the Adriatic Sea and by putting a strong focus on the state's health-practices.

Chapter 3 draws the broader horizon of Dubrovnik's health-culture. The state took on an active role in stimulating healthcare and urban sanitation. Administrators recruited both local and foreign (Italian) physicians, who were high salaried employees—learned *doctores* who earned up to 400 ducats per year. They were, therefore, prestigious citizens who could also be dispatched as diplomats and sent out to treat noblemen. Moreover, native Ragusans studied medicine with state support in Bologna. Examples of accomplished 16th-century Ragusan physicians are Donato Muzi, a reformer of classical medicine, and Mariano Santo, an innovative surgeon who developed a treatment for bladder-stones. The exposition of Dubrovnik's health-culture indicates that public health was a central component of the Republic's conception of 'the common good'. The task of protecting this common good featured prominently in the Christian-republican identity of Ragusa's ruling class and offered a motive to combat plague actively.

Strikingly, city-physicians were not expected to take on heroic roles during plague-epidemics. As the authors explain, because physicians were unable to cure it, plague was regarded as outside of their jurisdiction. Their requests to leave during epidemics, along with the majority of patricians, were often accepted. Plague was in that respect ‘more like an earthquake’ than a disease. Thus, the duty of caring for plague-patients was placed in the hands of plague-doctors (*medici pestis*), barbers, and priests within the quarantined areas.

Chapter 4 describes the development of Ragusa’s health office from the late 14th to the early 16th century. In 1377, urban administrators introduced quarantine-legislation and in 1390 appointed the first plague-officials. From 1397 on, these so-called *chazamorbi* became a permanent office with special and larger jurisdictions during epidemics. The permanence of the health-office was rather logical. Plague occurred in many areas from which tradesmen called at Dubrovnik’s port, thus trade demanded continuous monitoring. Health-officials did not receive medical training but were experienced patrician urban administrators. They were instructed to protect international trade—the city’s main source of income—as well as the health of the urban community. The health-officials believed in the communicable nature of the disease and their policy focused on isolating infected people and items. This is also reflected by the common use of the word ‘infectione’ rather than ‘miasma’ or corrupt air: while the latter concept was central in medical discourses on plague, it was not used in Dubrovnik’s urban sources.

The book’s core source, the *Libro deli Signori Chazamorbi*, documented (*arecto*) arrivals of people and goods and noted down traders’ oaths. The *Libro*’s other part (*atergo*) recorded trials for plague-related offenses. The manuscript contains 1,551 arrivals from 224 different places of origin, noted between 1500 and 1530. The health-office demanded that merchants declare under oath that they had not been in pestiferous places. If traders were coming from suspected areas, they were confined to quarantine. Punishment followed false declarations. The *chazamorbi* interrogated merchants about other merchants and relied on international intelligence networks. In the years leading up to the epidemic of 1527, more stringent supervision led to increased registration of tradesmen.

This brings us to the heart of the book: the severe epidemic of 1526–1527 [chs 6–9]. Measures against the spread of plague included issuing quarantine, burning victims’ belongings (sometimes entire houses), and confining healthy

citizens within their homes. The city hired plague-doctors, sometimes at their own initiative; and expenditure on support, including the distribution of food, added up to 40,000 ducats. A gap in urban administration during the height of the epidemic suggests a high level of social disruption. Moreover, the health-officials were not most active nor was their authority as pervasive during the worst months, but rather before and in the epidemic's aftermath. When plague hit the city hard in 1527, the health-office's usual tasks of monitoring traders were then pushed to the background. After the epidemic, Dubrovnik was bypassed by most international trades. Therefore, the health-office continued to turn its focus inward, aiming to limit the circulation of infected goods within the city and to persecute disobedient citizens, while also investigating offenses such as theft purportedly committed during the height of the epidemic.

The discussion of the trials is compelling and allows the reader to come close to the anxieties and social tensions in a city ravished by plague. Besides pecuniary sanctions, common punishments were the 'jerks of the rope' or *strappado*, which also occurred as punishment for plague-offenders in Tuscany. This and a number of other publicly executed sentences—such as lashing, riding on a donkey through town, and hanging—explicitly served as a threat to others as well. The trials expose three important biases in the policies behind persecution. First, there were severe class distinctions. Patricians received privileged treatment; they were allowed confinement in their own homes and were penalized by monetary fines and time in prison but were rarely sent to the quarantined areas. The second bias is gendered, as the 'penalties for women were always harsh'. Third, a particularly targeted and mistrusted group were the plague-survivors, the *resanati*. On one hand, the health-office used their supposed immunity for special but lowly paid tasks such as disinfecting goods and digging graves. On the other, because of their immunity, both the state and other citizens greatly distrusted the *resanati*. They accused them of spreading the disease and often suspected them of theft. This is reflected by the large number of trials and investigations of *resanati*, mainly those originating from lower classes. The officials first imposed a death-sentence in 1482 for stealing infected items. Several others followed in the first decades of the 16th century. Moreover, health-officials could still monitor and sometimes outright harassed *resanati* a year after they had been declared healthy and had left quarantine. Finally, examples of neighbors reporting on *resanati* out of fear of infection are important

indications that citizens had access to theories about the spread of plague. A particularly striking example is a neighbor's complaint about two *resanati* who by publicly celebrating their wedding had put their guests and the whole ward at risk of infection.

Related to the issue of popular knowledge, the authors make important observations about the educational value of religious celebrations. Besides information spread by public decrees, the veneration of Saint Roch—a state holiday in the early 16th century—contributed to an understanding of plague among various social classes. The construction of votive churches, such the church of Saint Roch at the entrance of the city, was, therefore, a preventative measure but also a means to educate people about the symptoms of plague. In addition, instructing people about the risks could also motivate them to obey plague-regulations.

In the conclusion, the authors return to the forerunner debate. One of the main reasons that Ragusa quickly implemented a permanent health-office was the importance of retaining their international reputation as a safe and healthy port and, therefore, as a reliable trade-partner. A further reason was that the surrounding powers, particularly the Ottomans, would use a weakened state as an opportunity to invade. The alleged lack of plague-measures in the Ottoman empire also features prominently as a factor in the book; it was also one of the explanations why the health-officials were unable to prevent the 1527 epidemic. Moreover, as a city-state, Ragusa was able to exercise a high level of social control and had the financial means to support measures. A final identified factor was the strong civic ideals of its ruling class.

It is this last notion that perhaps deserves further analysis. The book evaluates the impact of Dubrovnik's health-office quite positively. While the conditions of quarantine could be bad and the aggression towards poorer dwellers and women sometimes cruel, plague-prevention saved many people and often successfully defended the public good at the cost of a few. This is in contrast to historiographical debates on similar offices in Italy. For instance, Jane Stevens Crawshaw [2012] proposes a less positive interpretation of the establishment of lazarettos and Sandra Cavallo [1995] has 'no enthusiasm' for Turin's plague-program. Italian states could use plague-measures to control lower classes and protect the elite's financial and power interests. While in Dubrovnik extended power and legislation were likewise an important

byproduct that increased during each outbreak, Blažina-Tomić and Blažina contend that ‘repression was not the purpose,...health was always the primary concern’. The authors thus reject the theory that patricians aimed primarily at consolidating their power through plague-measures. They argue that Dubrovnik had a less tense political landscape in comparison with Italy. The patricians’ monopoly on state encountered no serious challenge until the 17th century, when inner strife in the patriciate led to an oligarchy.

Instead of portraying the state and its health-officials as acting in a spirit of sacrifice and as guardians of a common good, perhaps their motives can also be interpreted in a more political way: namely, that a strong civic ideology helped to justify the protection of certain interests of the ruling class. The book offers much material for further debate on these issues. One way of gaining deeper understanding would be to define and problematize the use of key concepts such as (public) health and the common good as well as the ways in which the urban sources use the terms ‘infection’ and ‘contagion’. Finally, the book shows the need for research into the (absence of) governmental reactions to plague in the Ottoman Empire.

To conclude, *Expelling the Plague* is the clearly structured and carefully written end-result of extensive archival research. It is also a book that launches the history of plague into new geographical territories and institutional and cultural contexts, which hopefully in the future will be further explored.

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