

Vampire Contagion as a Forensic Fact

The Vampires of Medveđa in 1732

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Received 01 October 2020 | Accepted 22 January 2021 | Published online 30 April 2021

Abstract. The present article traces the creation of the peculiar concept of the vampiric contagion or “vampirization” through the work of two official commissions which investigated vampires in Habsburg Serbia in 1732. Even though the importance of the documents prepared by the commissions has been duly recognized in intellectual and cultural histories, a closer look at the narrower historical context yields additional insights into how the figure of the vampire was construed. This approach also helps us do justice to the work of the first commission, led by contagion physician Glaser, which usually receives undeservedly little attention in the secondary literature. While acknowledging the Habsburg cameralistic state administration’s efforts at controlling and disciplining the borderland’s population, the article seeks to interpret the vampire as a product of a contact zone, co-created by the local Orthodox population and the borderland’s medical administration.

Keywords: autopsy, borderland, contact zone, contagion, vampire

Introduction

“Thank God, we are by no means gullible people. We are certain that all the light that the sciences may shed on the fact will not expose any of the [supernatural] causes attributed to it. However, we cannot deny the truth of facts proven by law based on trustworthy witnesses’ statements.”¹

These are the first words in the reflections of Jean Rousset de Missy (1686–1762), Huguenot writer on the most curious European news item of the year 1732: a Habsburg military commission executed ten vampires in a tiny Serbian village. Locals accused several of their late fellow villagers of having become vampires, supposedly rising out of their graves at night to attack and torture the living, killing many more in the process. The Serbian villagers also intimated that the corpses

1 Rousset de Missy, *Mercure historique et politique*, 405.

of vampires did not decay in the graves, therefore had to be executed in order for the affliction to stop. News about these events reached the broader European public. Rousset's contemplations are among the over forty standalone treatises and 150 journal articles published between the 1730s and 1760s on the topic of the alleged Serbian vampires. Often referred to as the "European learned vampire-debate", this sizeable body of texts was inspired by a single official autopsy report of vampires, prepared by a Habsburg military commission in the frontier settlement of Medveđa (Medvedia) on the southernmost tip of Habsburg Serbia. The report was the very document that elevated the figure of the vampire from an obscure Eastern European folkloric being to the worldwide celebrity it has been ever since.

No wonder then that the document received substantial attention in eighteenth-century literary, intellectual, and cultural histories.² In these narratives, vampirism is often discussed as an opportunity to anatomize the people and cultures of "Eastern Europe". By doing so, eighteenth-century learned authors rehearsed some of the dominant discourses of the early Enlightenment, such as the need to extirpate superstition, the advancement of learned sciences, and the inferiority of the Eastern Orthodox Church. In this sense, Larry Wolff's remarks about how Westerners invented an Eastern Europe for themselves is equally relevant for the history of vampirism.³

Substantial efforts have been made to understand the said autopsy report in its historical context. Based on Gábor Klaniczay's research, several authors, with medical historian Roy Porter among them, underline that vampirism was a perfect excuse for the Habsburg Monarchy's elite to talk about the need to civilize, and importantly, medicalize their own "inner savages".⁴ It has also been recognized that it is a peculiarity of vampirism that in its eighteenth-century form it arose from the cultures of Orthodox settlers in a land regained from Ottoman rule. Jutta Nowosadtko hence interpreted vampirism as a "phenomenon of occupation", meaning that it was the occupying administrative structure of the Habsburg Monarchy of the southern borderland, which provided the channels for introducing the first cases of revenants.⁵ In a more general sense, Daniel Arlaud and Stéphanie

2 For details, see among others, Hock, *Die Vampyrsgagen*; Summers, *Vampire*; Schroeder, *Vampirismus*; Barber, *Vampires, Burial and Death*; Hamberger, *Mortuus non mordet*; Lecouteux, *Histoire des vampires*; Kreuter, *Der Vampirglaube in Südosteuropa*; McClelland, *Slayers and Their Vampires*; Lauper, *Die "phantastische Seuche"*; Bohn, *Der Vampir*.

3 Even though Wolff does not discuss vampires per se, the way Western writers claimed the right to anatomize, historicize and explain diseases thought of as endemic to this region, such as the plica polonica, can be seamlessly applied to the way vampires were discussed in contemporary European writing. Wolff, *Inventing Eastern Europe*, 29–31.

4 Klaniczay, "The Decline of Witches"; Porter, "Witchcraft and Magic," 214–16.

5 Nowosadtko, "Der 'Vampyrus Serviensis' und sein Habitat."

Danneberg have rightly understood both the vampire and its victims as unruly subjects; therefore disciplining them formed part of the more general Habsburg state measures to gain control over the population.⁶ This disciplining meant that the vampiric attack as an affliction was medicalized, while the undecayed state of the exhumed corpses of alleged vampires was naturalized and normalized.

The present article engages with this growing body of scholarship and seeks to deliver three main arguments. First, important as it is to recognize top-down intellectual and administrative agendas, exclusive attention to them renders the “invented ones” inert and powerless, which in the case of the vampire’s habitat, the borderland between the Habsburg and the Ottoman Empires, was far from true. William O’Reilly’s understanding of borderlands as “contact zones”⁷ provides a more precise and fruitful interpretation. The concept originates from Mary Louis Pratt, who defines contact zones as “social spaces where cultures meet, clash, and grapple with each other, often in contexts of highly asymmetrical relations of power, such as colonialism.”⁸

This view does not only highlight the agency of the “colonized”, but also helps us problematize the in-between status of local agents of central power, who were pressured both from above and from below. Their intermediary position necessitated that they become “complicit in transnational social, economic, and cultural systems, which rendered residents of the frontier neither fully ‘us’ nor fully ‘them’ in the eyes of the imperial center.”⁹

A further benefit of the concept of the contact zone is that it interprets knowledge products generated in it as inherently ambiguous and “heterogenous on the reception end as well as the production end: it will read very differently to people in different positions in the contact zone.”¹⁰ In what follows, I will treat the figure of the vampire as a typical contact-zone product, born out of power-laden negotiations between the Catholic Viennese administration and local Orthodox communities.

A second aim of the paper is to remedy the undeservedly little attention the secondary literature devotes to the first official report on the vampires of Medveđa compiled by contagion physician Glaser. The reason for the relative scarcity of interest in Glaser’s activity is that it was the report of the second commission (led by military surgeon Flückinger), published in 1732, that started the learned

6 Arlaud, “Vampire, Aufklärung und Staat”; Danneberg, “Vampire sind äußerst unordentliche Untertanen”; Bräunline, “The Frightening Borderlands of Enlightenment.”

7 O’Reilly, “Fredrick Jackson Turner’s Frontier Thesis,” 29.

8 Pratt, “Arts of the Contact Zone,” 34.

9 O’Reilly, “Fredrick Jackson Turner’s Frontier Thesis,” 29.

10 Pratt, “Arts of the Contact Zone,” 36–37.

vampire debate. Glaser's report remained in manuscript form until the twentieth century, and hence could not exert the same influence on European publicity as Flückinger's. As I will argue, Glaser nevertheless played a crucial role in the creation of the figure of the vampire because his investigations broke the path for the second commission, whose results followed in Glaser's footsteps.

Third, I wish to emphasize that it was Glaser's negotiations with the local community that gave birth to a novel characteristic of the vampire, one which distinguished it from other revenants known in eighteenth-century Europe: its contagious nature.

Governance and medical knowledge production on the southern borderland

The scenery for the emergence of the vampire in European imagination was the southern borderland, a contested, war-torn region between the Habsburg Monarchy and the Ottoman Empire, which in the late seventeenth and early eighteenth centuries witnessed several wars and went through substantial territorial changes.¹¹ In the wake of the Great Turkish War (1684–1699) and the Austrian-Ottoman War (1706–1718), the Habsburgs conquered from the Ottoman Empire the large central territory of the Hungarian Kingdom, Transylvania, part of Croatia and part of Slavonia, northern Bosnia, Serbia, the Banat of Temes, and Little Wallachia. The narrower birthplace of the vampire, that is the province of Habsburg Serbia, belonged to the Habsburg Monarchy only for a relatively short time between 1718 and 1739, when together with northern Bosnia and Little Wallachia, it was re-conquered by the Ottoman Empire.

After the conquests, the Habsburg Court decided to create a special region along the southern border of the newly gained territories that would not be (re-)incorporated into the territory of the Hungarian Kingdom. Instead, these provinces, which can be termed as “the southern borderland”, would be governed directly from Vienna and would serve as a barrier towards the Ottoman Empire. At the time of the 1732 vampire investigations, the southern borderland's territory included parts of Croatia and Slavonia, the thin strip of northern Bosnia, Serbia, the Banat, and Little Wallachia. The territory was special in several aspects, of which I will highlight three: the elimination of historic property relations, the substantial leverage of local communities over the Habsburg administration, and the region's thoroughly medicalized nature.

11 On relations between the various parts of the Habsburg Empire in the early eighteenth century, see among others Ingrao, *Habsburg Monarchy*; Evans, *Austria, Hungary, and the Habsburgs*.

The tabula rasa of power relations

Since the territories of the southern borderland were not reincorporated into the Hungarian Crown, and the old legal and landownership structures were not reinstated, the central power had direct access to the population, and used the area as an experimental field for more efficient, systematized policies to rationalize governance, facilitate central control and secure economic and demographic blossoming.¹² The overarching principles of this project were elaborated by Prince Eugene of Savoy (1663–1736), field marshal of the Habsburg army conquering the southern borderland from the Ottomans in 1716–1718, and president of the Aulic War Council (1703–1736).¹³ Under the leadership of Prince Eugene of Savoy's military commanders, the provinces of the Banat¹⁴ and Serbia were turned into experiments in absolutist governance along cameralist lines.¹⁵

One main characteristic of the new order, at least on paper, was the transparent and simple hierarchical organization of power structures. At the highest level, the province of Serbia was overseen jointly by the Aulic Treasury and the War Council in Vienna. The province was divided into civilian districts with civilian district officials (cameral provisors) at their lead. Between 1718 and 1733, the provincial government was in the hands of Governor Prince Karl Alexander von Württemberg,¹⁶ who was aided by a provincial council. The council contained both military and

12 The theoretical foundations of the governmental policies applied in the borderland were rooted in the German school of cameralism. For more details, see among others Ingrao, *Habsburg Monarchy*, 93; Horn, "Geschichte(n) von Gesundheit und Krankheit."

13 O'Reilly, "Divide et Impera," 80–81.

14 For a detailed discussion of the general circumstances in the Banat and the province's structure of governance, see Kallbrunner, *Das kaiserliche Banat I*; For the Banat as an experimental field of governance, see Marjanucz, "A Temesi Bánság"; And more recently, Marjanucz, *A Temesi Bánság vázlatos történeti útja 1716–1848*; For a special emphasis on population politics in the Banat, see O'Reilly, "Divide et Impera."

15 Langer, "Serbien unter der kaiserlichen Regierung 1717–1739." And recently with special emphasis on the Serbian governorship as a practicing scene for von Württemberg's absolutist reforms: Brüser, *Herzog Karl Alexander von Württemberg*, 75–89.

16 Karl Alexander von Württemberg's career had been steadily rising as a military commander before he attained the governorship of Serbia. He had managed to protract the defense of the town of Landau against the French in 1713, thereby winning the imperial army's general commander, Prince Eugene of Savoy's (1663–1736) favor. Subsequently, he joined Prince Eugene of Savoy in the Austro-Turkish War against the Ottomans in 1716–1718. During these campaigns, his reputation was steadily rising and in 1717, he was already commanding general at the successful siege of Belgrade. Due to his successes, in 1719, he was named governor of Belgrade and from 1720 president of the newly created provincial administration of Serbia, a title he retained until 1733. Liliencron, *Allgemeine Deutsche Biographie*, 366–72; Matuschka, *Feldzüge des Prinzen Eugen von Savoyen*, 250.

civilian delegates (representing the interests of the War Council and the Treasury, respectively), but as the governor was always a military commander, the provincial administration was dominated by the military's interests.

The settlements were divided into two groups: civilian and militarized. The militarized settlements were wedged into the civilian districts, but their population consisted of frontiersmen, in Habsburg administration often termed as *Hajduk*,¹⁷ who answered to the army headquartered in Belgrade rather than to the civilian provisors.¹⁸ In 1728, the roughly 2400 frontiersmen of Serbia occupied more than ninety military settlements in the province. Many of the settlements were marked out along the Ottoman border, where frontiersmen had to man the ten ramparts and seventy watch posts (so-called *Tschardak* houses). Other settlements were spread in the inner parts of the province, overseeing major fortified towns, and protecting the main inner routes, for example, the one between Belgrade and Paraćin (Baragin), against highwaymen.¹⁹

Local expertise and leverage

The various sections of the borderland may have been organized in a systematic and transparent way, but applying governance in practice ran into several problems. The cameralist projects required that the region should be populated by settlers, especially since many areas were deserted because of the wars. Apart from a small number of German, Italian and Spanish colonists, the court sought to entice most settlers from the wider Ottoman-Habsburg borderland area.²⁰ The main body of newcomers was made up of peasant and shepherding groups, mostly Slavic-speaking Serbs (also referred to as "Rascians") and Romance-speaking Wallachians. Their majority belonged to the Orthodox denomination, and a minority to the Roman Catholic Church. To a varying extent, Jewish and highly mobile Gypsy communities were also tolerated, and Ottoman merchants of Armenian, Bulgarian, Greek and other ethnicities of the Balkans (referred to as "Greek" and "Turkish" in the texts) also played an integral role in borderland society. In practice, the large variety of ethnicities that German officials had to govern necessitated interpreters to bridge the language barriers.

17 On the word's etymology, see footnote 23 below.

18 See among others: Wessely, *Die österreichische Militärgrenze*; For recent overviews of the conditions on the military frontier, see Bracewell, "The Historiography of the Triplex Confinium"; O'Reilly, "Border, Buffer and Bulwark."

19 Langer, "Serbien unter der kaiserlichen Regierung 1717–1739," 220.

20 See among others O'Reilly, "Divide et Impera."

The Habsburg Court offered settlers land and various privileges, such as favorable tax conditions and the freedom to practice their Orthodox religion under the supervision of the metropolitan of Belgrade and Sremski Karlovci (Karlowitz). Settlers were allowed to keep their own community leaders (called *knez*), who also received limited judicial powers. They were also allowed to follow their customs and social practices related to, among other things, birth, marriage and death. In addition, each community naturally had its own “experts”, people knowledgeable in such matters. As it will be detailed below, these local experts would offer ideas and practices rivalling those of the Habsburg authorities and, for that matter, those of the Orthodox Church as well: in the particular matter of vampirism, the Orthodox Church was struggling to gain control over local practices and ideas just as much as the provincial administration. Similarly, the lower level clergy were also trapped in an in-between situation, pressured by higher church leaders from above, and by their flock from below, trying to accommodate their needs.²¹

Further obstacles to a smooth governance were caused by the fact that settling privileges were not fully unified across the region, thus, there were constant frictions between the various sections of the borderland. In general, hajduk military settlements always had more privileges than civilian ones, as their lands were usually tax free in return for military service. Together with the borderland’s generally patchy organization, this situation made it very difficult for the administration to keep people permanently settled, especially because for centuries relative mobility had been part of the settlers’ borderland-specific lifestyle. It often happened that once the obligations were increased or privileges curbed in a given section of the borderland, people would simply move to a neighboring area that offered better conditions. Prince Karl Alexander von Württemberg had to issue repeated regulations on frontiersmen-recruitment in order to stop the constant flux of people within the borderland; in 1728, for instance, he prohibited cameral subjects to join the military frontier in Serbia.²² The coexistence of military and civilian populations was also wrought with conflicts: the civilian population often complained about frontiersmen having much better settling and living conditions, receiving unfair benefits, encroaching on the rights of civilians, and committing violence against them.²³

21 On the more rigid ideas of Orthodox theology related to different kinds of revenants, see Hartnup, “*On the Beliefs of the Greeks*,” 173–236; See also Zelepos, “Vampirglaube und orthodoxe Kirche”. For examples of the more practical attitude of the Orthodox lower clergy in the Banat, see: Mézes, “Georg Tallar and the 1753 Vampire Hunt.”

22 Langer, “Serbien unter der kaiserlichen Regierung 1717–1739,” 220.

23 Langer, “Serbien unter der kaiserlichen Regierung 1717–1739,” 199, 218–19; It is not by accident that cognates of the “pandur” in Croatia and Slavonia, and “Hajduk” in Serbia, and later also in the Banat often had shades of meaning related to banditry all around the Habsburg-Russian-Ottoman borderland. Cognates of the hajduk can be found with similar meanings in

Finally, despite the efforts to populate the borderland, the thirst for settlers never abated: the hostile natural, sanitary, martial, and criminal environment kept decimating settlers, which in turn gave additional leverage to local communities in enforcing their interests. Consequently, bound as it was to the central power, the new personnel of the Habsburg provincial-level administration was an interface that had to engage on a daily basis in intense negotiations and translations across cultures, languages, and interests.

Medical infrastructure and expertise

Because of its reliance on an abundant and prospering population, cameralist state building elevated public health to the primary agenda.²⁴ It was vital to create a well-functioning medical infrastructure, and the Habsburg borderland is often cited as a prime attempt at the efficient projection of Vienna's medical knowledge and public hygiene policies from the center towards the periphery, the borderland. Each cameral district was supposed to have its own district surgeon, while the provincial centers had a *protomedicus*, a physician overseeing the medical system of the entire province. All the regiments stationed in the provinces had their own military surgeons and physicians. And finally, the military frontier also functioned as a plague cordon: apart from its military significance (which gradually diminished as the century progressed), the frontier's infrastructure served the crucial medical purpose of monitoring traffic across the border and deploying strict quarantine measures in plague times to stop the frequent epidemics spread from the Ottoman lands into the heart of the empire.²⁵ The infrastructure involved in this activity was a hybrid military-medical network consisting of border guards, watch posts that impeded traffic across the green border, and quarantine stations with medical personnel (contagion surgeons, physicians and assistants) positioned at major roads leading into the Habsburg Empire.

Apart from their functions of disciplining the local population and channeling central policies, the medical personnel in the districts, the towns, the army, and the quarantine stations functioned as collectors and generators of medicine-related information from within and across the border. This activity was coupled with the

several languages, e.g. Hungarian "hajdú" which is thought to have originated from the verb "hajtani", meaning "to shepherd [animals]"; the Russian "гайдук" [gajduk] meaning outlaw, rebel against the Ottomans; and the Ottoman Turkish "haydut" meaning robber or bandit. Zaicz, *Etimológiai szótár*, 261.

24 Horn, "Geschichte(n) von Gesundheit und Krankheit"; Krász, "Quackery versus Professionalism?."

25 Lesky, "Die österreichische Pestfront."

production of a substantial amount of written documentation. First of all, they were obliged to submit regular reports on the medicine-related situation in their fields of authority. Second, the medical personnel also functioned as a task force of experts to be deployed when necessary. Thus, it was a part of their duty to compile thorough reports of their experiences within these ad-hoc missions and commissions. The topic of interest was not only the plague but other endemic and epidemic diseases as well, such as health problems caused by the marshlands in the area, or the so-called “mining sickness”, a serious respiratory condition affecting miners, which in the eighteenth century was discovered to be caused by the high arsenic content of certain metal ores. In addition, they also wrote about mass attacks of the infamous blood-sucking pests, the “Kollumbacz flies”, the healing qualities of mineral waters, and prepared various legal documents, such as autopsy reports (*visum repertum*), expert testimonies (*attestatum*) and witness accounts (*protocollum*) of cases of strange diseases, murders, and suicides.

Importantly, the medical personnel employed by the borderland’s administration received payment not based on their healing success, like private physicians would, but as a regular allowance, complemented by remunerations for extra missions they were deployed in as experts. This steady financial support coming from the Vienna administration, rather than from the local population, was supposed to give them higher prestige, self-confidence, as well as to ensure loyalty to their institutional backing.²⁶

All in all, the borderland was a paradoxical combination of a particularly centralized, systematized state infrastructure trying to govern a population that, in fact, had substantial leverage in enforcing their interests. Consequently, it was through interaction and conflict with the local population and the circumstances that Habsburg local medical personnel were gradually becoming “experts” of the local medical relations, environmental conditions, the flora and fauna, as well as the culture and customs. Hence they were in a position to step up as producers and organizers of new knowledge generated there, on the borderland. In what follows, the figure of the vampire will be analyzed as a special case of this knowledge-production activity.

“Vampirization”: Contagion physician Glaser’s observations in Medveđa

The 1732 case of the vampires in the village of Medveđa was neither the first nor the last time that the borderland’s administration had to deal with local ideas of revenants: just as banditry, smuggling and epidemics, revenants were also recurring

26 Pomata, *Contracting a Cure*.

problems for the administration.²⁷ However, the mobilization that the vampires of Medveđa sparked was rare, if not unprecedented, and the shape the affliction took was in many ways unusual.

Unrest in Medveđa started in October–November 1731, when a series of deaths shook the village. Given that the problem concerned a hajduk village, the entire investigation was handled within military frames. Taking note of the deaths, and probably suspecting an epidemic, the military commander of the district center in Jagodina, Lieutenant-Colonel Schnezzer organized a commission, which consisted of Glaser, the “imperial quarantine physician” (*Physicus Contumaciae Caesarea*) of the quarantine station of Paraćin, and several military officers, among them the military commander (*Führer*) of Kragobaz (today probably Kragujevac) and corporals from Stalać (Stallada), the settlement Medveđa’s hajduks were probably subordinated to. The commission had to travel to the village to investigate the situation.²⁸

As head physician of the Paraćin quarantine station, Glaser was responsible for overseeing the epidemic situation in the entire province of Habsburg Serbia, as well as in the territories beyond the Ottoman border. This is because the network of stations at the time consisted only of Rakovica overseeing the Karlstadt frontier; Kostajnica (Kostainica) in the Banal frontier (today on the Croatian-Bosnian border)²⁹; Bród (Brod) in the Sava frontier (today on the Croatian-Bosnian border), Paraćin in Habsburg Serbia and Slatina responsible for Little Wallachia.³⁰

The mobilization of the quarantine physician attests to the sensitivity of the borderland to suspicions of epidemic outbreaks in itself, but the location of this particular case was especially precarious: two major trade routes, one coming from Novi Pazar (Novibazar), and the other from Niš (Nissa) met in this area. The route then continued north through Paraćin to Ćuprija (Morava), where it forked, with one road leading towards Pest and Vienna through Belgrade, the other towards Timișoara (Temesvár) through Bačka Palanka (Újpalánka). An epidemic hitting

27 In relation to the Banat’s revenant-management situation, see: Mézes, “Georg Tallar and the 1753 Vampire Hunt.”

28 It is from Glaser’s report and Vice-Governor Anton Otto Botta d’Adorno’s (1688–1774) letter that we know the details of the dispatch. See these two sources in ÖStA FHKA AHK HF “Vampir Akten – Teil 2,” 1132r–v, 1134r–36; Hamberger published Glaser’s report in Hamberger, *Mortuus non mordet*, 46–49. When signing their reports, the officers taking part in the investigations often only provided their family name and their rank or position, but not their first name. Whenever it is known, I use the officers’ full names in the article.

29 Situated in the territory between the Una and Kulpa Rivers, and not to be confused with the Banat’s military frontier to the east.

30 Slatina in Wallachia is not to be confused with today’s Slatina-Timiș in the Banat. On the system of quarantine stations on the military frontier, see: Vaniček, *Spezialgeschichte der Militärgrenze*, 405; Lesky, “Die österreichische Pestfront,” 86–88.

such a major trade route juncture could have dire consequences. On the one hand, if the routes are not closed, the disease could spread unstopably towards the heart of the monarchy; if on the other hand, quarantine measures are imposed, commerce would suffer huge deficiencies. In order to avoid these scenarios, the disease had to be contained to the village as fast as possible.

Glaser's understanding of the multiplication of vampires

Upon arrival, Glaser examined the sick because his main task was to diagnose the nature of the disease, more specifically to establish whether it was contagious. His medical expertise, however, was seriously challenged by local experts. At first, Glaser pronounced that the sick were suffering from non-contagious tertian and quartan fevers, side pains, and chest aches caused by the strict pre-Christmas fasting habits of Orthodox subjects. That is, he gave an endemic explanation to the unusually high frequency of deaths.

Locals, however, offered a rival diagnosis: people were thought to be dying because of the "so-called vampires, that is, bloodsuckers" (*genannten Vambÿres, oder Bluth Seiger*) in the village. Glaser probably was familiar with the term, as the news must have reached him about earlier cases of vampires in the province. Due to the lack of sources, it is difficult to assess what exactly locals and Glaser believed in, but explaining mass deaths in a given community with some sort of revenant activity was not unheard of in other parts of the Habsburg Monarchy: witches were known to be able to cause epidemics even after their death,³¹ and the power of the dead, who were still masticating in their graves (*masticatio mortuorum*), to cause plague was also a matter of discussion at the time.³² Furthermore, on the Moravian-Silesian border the early eighteenth century witnessed numerous mass infestations of revenants, who were thought to have been procreated by a single dead witch who used diabolical machinations to turn corpses into revenants.³³

However, what villagers of Medveđa described was different from all of these explanatory frameworks: it entailed acquiring a condition during one's lifetime which destined one to become a revenant after death. Locals located the source of the current affliction in two dead women:

"There used to be two women in the village who during their lifetime became vampirized (*haben sich vervampÿret*), and it is said that after their

31 Mackay, *Hammer of Witches*, 237.

32 Schürmann, *Nachzehrer glauben in Mitteleuropa*; Ranfft, *De masticatione mortuorum in tumulis*.

33 Bombera, "Posmrtná magie na Libavsku"; Slezáková, "Soumrak pověřivosti."

death they will also become vampires and will vampirize (vervampyren) yet others.”³⁴

Importantly, the peculiar verb, *vervampyren*, which for the lack of a better word, may be translated as “to vampirize”, is not synonymous with “turning (someone) into a vampire”: it means the transmission of a condition, the consequences of which may take effect years after “being vampirized”. As the villagers explained to Glaser, the two women, named Stanno and Miliza had in fact died of natural causes two months before the investigation, and their deaths had nothing to do with vampires: Stanno died in childbirth, while Miliza succumbed to an unspecified sickness. However, both were thought to have been vampirized years earlier: Miliza had eaten from the flesh of a lamb in Ottoman lands that had previously been attacked by vampires. Stanno was vampirized in a different way on the other side of the border: in order to protect herself from vampires, she smeared herself with a vampire’s blood. Even though this way she avoided death by vampires, she destined herself to become a vampire after her eventual death. Moreover, as she had the condition in her body, her future children were also destined to become vampires: Glaser was told that just like his mother, Stanno’s (stillborn) child was also to become a vampire.³⁵

It is unfortunately unclear whether locals used some version of the term “*vampirize*”, or it is entirely Glaser’s coinage, but based on the villagers’ stories, he managed to identify at least four ways of becoming vampirized: 1) being attacked by a vampire, 2) eating from vampirized animals, 3) smearing vampire blood on oneself, 4) being born to a vampirized mother. In the first case, death would follow within days of the attack. In the latter three cases, however, the condition of being vampirized may lay dormant for an indefinite time until death sets in, when it is activated and transforms the victim into a vampire.

Although Glaser never stated explicitly, the ways of acquiring the vampirized condition (through ingestion, contact with the skin, and through the mother-fetus contact) were seamlessly mapped onto contemporary medical explanations of contagion. In early modern medicine, contagions were special: unlike most sicknesses resulting from an inner imbalance of bodily humors, contagions (such as rabies, plague, elephantiasis or syphilis) were thought to be transmitted from one person to another by physical contact.³⁶ Contagion itself was thought to consist of especially potent putrefying vapors, particles or humors. At an individual level, the exhalations and humoral secretions of the sick were inhaled or touched by the people around, and once having

34 ÖStA FHKA AHK HF “Vampir Akten – Teil 2,” 1134v.

35 ÖStA FHKA AHK HF “Vampir Akten – Teil 2,” 1135r.

36 Nutton, “Seeds of Disease”; Carmichael, “Contagion Theory and Contagion Practice”; Gibbs, *Poison, Medicine, and Disease*.

entered the human body through the orifices or through the pores of the skin, they started putrefaction inside the body. They could also be stuck to objects or vaporized into the air and thus travel long distances. Large-scale epidemics, such as the plague were understood as consequences of *miasmas*, that is, clouds of putrefying vapors that emanated from large pools of decaying matter: from the decomposing animals at the bottom of the sea or in animal burial pits, from swamps or open mass graves.

In early modern contagion theory, perhaps the closest analogy would have been rabies or, in contemporary terms, hydrophobia.³⁷ Indeed, the analogy certain authors referred to in the 1732 learned vampire debate³⁸ was close not because of some sort of parallel between the vampiric bite and the bite of a rabid dog: none of Glaser's (or Flückinger's for that matter) corpse-descriptions contain any reference to open wounds or bite-marks. This underlines the theory that the element of the vampiric bite in present-day popular culture is a later addition to the figure.³⁹ The Serbian vampire was draining the victim's life and blood without leaving wounds or punctures on the skin.

Hydrophobia would have been an apt comparison for two reasons. First, the poison of a mad dog was thought to communicate the host's nature to the patient: the rabid person turned aggressive and bit people because the contagious bite had communicated the dog's nature to the victim, just like the vampiric condition was transmitted from vampire to victim. A second similarity is that hydrophobic symptoms often started months, years or even decades after the mad dog's bite, and in some cases vampirization also exhibited a delayed effect. The delay in rabies was explained the same way by Girolamo Fracastoro in the sixteenth century and by Giuseppe Frari (1738–1801) in the eighteenth century, claiming that because dog poison had a particularly heavy, viscous nature, it progressed very slowly through the blood vessels towards the brain.

By his own admission, at first Glaser was reluctant to accept the local diagnosis; supported by military officers he tried to talk some sense into the villagers, but in vain. They were gripped by fear:

“[The villagers] said that before getting themselves killed this way, they would rather settle somewhere else. Two or three households get together for the night, and while some sleep, the others keep watch. And [they also said that] the deaths would not cease until the Praiseworthy Administration agreed to and carried out the executions of the said vampires.”⁴⁰

37 DiMarco, *Bearer of Crazy and Venomous Fangs*, 216–18; Krnić, “Giuseppe and Aloysius Frari's Works.”

38 Putoneus, *Besondere Nachricht*, 33–34, 38–39.

39 This theory is aptly remarked by Kreuter, *Der Vampirglaube in Südosteuropa*.

40 ÖStA FHKA AHK HF “Vampir Akten – Teil 2,” 1134v.

Due to the borderland's general shortage of settlers, the threat to move away touched a neuralgic point, and this worked on Glaser as well. The physician agreed to carry out the exhumations that locals requested, but (as he explained in the report) only to establish the truth behind their accusations.

Exhumations with perplexing results

Upon examining the ten cadavers, Glaser was perplexed, as the evidence supported the local diagnosis of vampirization. While several of the corpses were decaying in an orderly fashion, some looked fresh. In his report, Glaser described all the bodies, some of them in a single sentence, while others in greater detail. He adopted the local vocabulary to describe the bodies along an axis of the state of decay as “vampire”, “very suspicious”, “half-suspicious”, and “decayed”. In the full translation of Glaser's description of Miliza's corpse, who was one of the two arch-vampires, the structure of the original text is maintained. Following the name, the text is not organized into sections, but flows continuously.

“A woman named Miliza.

Vampire (Vampÿer). Age fifty, lay for seven weeks. Came over from the Turkish side six years ago and settled in Metwett. She always lived in a neighborly way was never known to have believed or engaged in anything diabolical. However, she told the neighbors that in the Turkish land she had eaten of two lambs which had been killed by vampires (Vampÿres), and therefore, after her death she would also become a vampire. It was on this utterance that the common folk based their steadfast opinion. In fact, I have also seen such a person. And because she [Miliza] was known to have had a dry, haggard body, was of old age and lay buried in the moist soil for seven weeks without any garb, she should have already been half-decayed. Nevertheless, she still had her mouth open, light, fresh blood was flowing out of her nose and mouth, her body was bulging, and was suffused with blood, which appeared to be suspicious even for me. And these people cannot be wrong, [because] by contrast, after the opening of some other graves, [in which the cadavers] were of a younger age, used to have a bulkier constitution in life, and died of a shorter and easier sickness than those old people, [the younger bodies] were decayed the way regular corpses are supposed to be.”⁴¹

His rich description allows valuable insights into how Glaser was trying and failing to fit vampirization into the frameworks he was familiar with.

41 ÖStA FHK A AHK HF “Vampir Akten – Teil 2,” 1134v.

Attempts at natural and supernatural explanations

Glaser tried to explain the lack of decay with natural processes, but his observations did not map onto the tenets of the putrefaction theory. Putrefaction in the mainstream natural philosophy of the era was understood as putrefaction-inducing particles and influences (usually referred to as *menstrua*) of the environment inducing the process of a corpse's disintegration into the four basic elements. In turn, the lack of decay was thought to have two main causes: either something was blocking the *menstrua*'s access to the body, or the nature of the corpse and that of the environment were not of opposing qualities.⁴² A cold environment was widely known to hinder decay. Given that it was wintertime in Medveđa, the weather would naturally delay putrefaction, but then it was unclear why some corpses did start putrefying in an orderly fashion. Another possible factor hindering *menstrua* was air-tight conditions and barriers between the body and the soil. However, in this case, all the bodies were apparently interred without coffins or shrouds and were in direct contact with the soil. A third impeding factor may have been sudden death, as it would trap some of the vital spirits inside the body, which could repel the invading *menstrua*. As Glaser remarked, however, the bodies that were found to be properly putrefying were the ones that died of a sudden, short disease.

A second group of causes that may have hindered bodily putrefaction was the nature of the corpse matching the environment: moist-natured corpses would decay slower in a wet environment, while dry bodies decayed slower in dryer, air-permeable surroundings. By contrast, in the case of the purported vampires, Glaser observed the exact opposite: the soil was moist, nevertheless bulky, young people decayed much faster, while dry-natured Miliza did not, even though she had been underground for much longer.

The discrepancies perplexed Glaser to the extent that he returned to the problem once more at the end of his report. He stated that villagers asked him the question: Why is it that exactly those people decayed in an entirely proper way (*gänzlich, wie sich es gehöret verweesen seyn*) who used to be "stronger, more corpulent, younger and fresher, died of a simpler and shorter disease" (which meant that the disease did not dry them out), and spent a shorter time in the very same soil? Glaser had no answer, and repeatedly admitted in the report: "This reasoning (Raison) does not seem to be incorrect."⁴³

Since he was unable to fit the observations into the natural explanations he was familiar with, he had to venture into the grey zone between the natural and the supernatural. His remark cited about the lack of a known prehistory of diabolical practices in Miliza's case means that Glaser tried to collect testimonies of witchcraft,

42 Hamberger, *Mortuus non mordet*, 24–25; See also: Zacchia, *Quaestiones medico-legales*, 238.

43 ÖStA FHKA AHK HF "Vampir Akten – Teil 2," 1135v.

as demonic activity would have explained Miliza's posthumous harmful activity as well as her body's resistance to decomposition. As locals gave no witness testimonies against Miliza, Glaser had to discard this explanation as well.

Eventually, Glaser refrained from giving a definitive diagnosis, even though he did not discuss a further possible explanation, which was very topical in the natural philosophy of the era. Most of the learned contributions to the 1732 vampire debate in Europe engaged with the current controversies about the existence and characteristics of the so-called "third part", often referred to as "astral spirit", an airy, but material substance in the human body that served as an intermediary between the material body and the immaterial soul, and which some authors regarded as being capable of posthumous activity independent from body and soul.⁴⁴ Broadly speaking, debates about body-soul relations pitted against each other iatromechanical authors, who argued for a duality of body and soul, denying the existence of an ontologically separate third part, and followers of animist physiology, who maintained that body and soul should rather be thought of as an inseparable unity (*anima sive natura*), and who often assumed the existence of an astral spirit. The most spectacular clashes were those waged by animist physician Georg Ernst Stahl (1660–1734) of the University of Halle first against mathematician and philosopher Gottfried Wilhelm Leibniz (1646–1716), and later against physician Friedrich Hoffman (1660–1742) and philosopher Christian Wolff (1679–1754), also from Halle.⁴⁵ As relevant as these debates were for the Medveđa vampire case, they cannot be traced in Glaser's report. As a physician, Glaser must have known about the controversies, since only a few months after his report even a military ensign in Belgrade made the connection.⁴⁶ Glaser's motivations are unclear, but apparently he did not see it wise or necessary to address such a controversial topic in an official report.

Although reluctant to provide a clear-cut diagnosis, at several points of the text Glaser adopted local terminology rather than deploying his own Latin and German-based medical vocabulary. First, it is significant that he coined the Germanized expression, *vervampyren* to denote the spread of the affliction, and second, used *Vampyer* to describe corpses which were not in the state of decomposition they were supposed to be in. This way, his report, provides the first known instance of a medical diagnosis of a *contagious* form of revenantism, in which revenants did not simply spread death and cause plague epidemics but were assumed to transmit their own revenant-condition to living people. This combination of elements made the vampire a novel framework, which was both similar to and

44 Hamberger, *Mortuus non mordet*; Magyar, "Orvosi vita."

45 Duchesneau and Smith, *Leibniz-Stahl Controversy*; King, "Stahl and Hoffmann"; De Ceglia, "Hoffmann and Stahl."

46 Hamberger, *Mortuus non mordet*, 56.

different from existing natural and supernatural frameworks. In this sense, it may be deservedly called an uncanny (*unheimlich*) contact-zone product.⁴⁷

As Glaser's original mandate was to investigate if an epidemic was involved, he was not (or did not feel) authorized to allow the executions, and had the corpses reburied. At the same time, he recommended the military command to comply with the villagers' request, submitted his report to Jagodina, and Lieutenant-Colonel Schnezzer forwarded it to the Belgrade headquarters.

Vampire forensics: Regiment surgeon Johann Flückinger's autopsies

Prince Karl Alexander von Württemberg did not reside in Belgrade but was in his home in the Duchy of Württemberg at the time. Therefore, it was Vice-Governor Marquis Anton Otto Botta d'Adorno (1688–1774) who had to take action. In response to Glaser's report, he dispatched a sizeable high-ranking commission to the village, led by Johann Flückinger, the regiment surgeon of the Fürstenbusch Infantry Regiment.⁴⁸ Regiment surgeon was a very high position. In fact, Flückinger was the head surgeon responsible for overseeing the entire regiment. He was aided by two other military surgeons, Johann Friedrich Baumgarten from the same regiment, and Siegele from the Marulli Regiment, whose commander was Vice-Governor d'Adorno.⁴⁹ The three surgeons were accompanied by military officers Senior Lieutenant Büttner and ensign J.H. von Lindenfels, both of them from the governor's own Alexander Württemberg Infantry Regiment. On their way to the village, they picked up the senior officers of the Stalać frontier company, Captain Gorschik, the lieutenant (*hadnack*) and the ensign (*barjactar*).

Our main source of their activity is the autopsy report (*visum et repertum*) they prepared as a result of their investigations.⁵⁰ It is called *Visum et Repertum* ("seen and discovered"), which is the usual contemporary term for forensic autopsy reports carried out within the frames of judicial trials. The autopsies were usually

47 "Many people experience the feeling [of the uncanny] in the highest degree in relation to death and dead bodies, to the return of the dead, and to spirits and ghosts." Freud, "The Uncanny," 241–43; Marin, "Haunted Communities."

48 Infanterieregiment No. 35, founded in 1683, also called "Böhmisches Infanterie-Regiment" and "Württemberg zu Fuss". At the time was commanded by Daniel von Fürstenbusch. Wrede, *Geschichte der k. und k. Wehrmacht*, Vol. 1, 366–67.

49 The regiment was founded in 1709, its owner was Francesco Cavaliere Marulli, while its commander at the time of the Medveđa vampire case was Botta d'Adorno. Wrede, *Geschichte der k. und k. Wehrmacht*, Vol. 2, 193, 221.

50 ÖStA FHKA AHK HF "Vampir Akten – Teil 2," 1138r–1141v.; Hamberger, *Mortuus non mordet*, 49–54.

conducted by surgeons rather than physicians, because traditionally it was the surgeon's duty to perform manual operations, while physicians would be equipped with the theoretical knowledge to interpret the surgeon's findings. In practice, physicians were not easy to find, and in legal cases both the observation and the interpretation of signs were done by surgeons. Accordingly, the Flückinger commission's report also contains a mixture of observation and interpretation.

A detailed analysis of the autopsy report lies outside the scope of the present paper and has been amply done in the secondary literature. I will therefore only venture a few relevant supplementary comments.

Reconstructing a two-wave affliction

The commission arrived on 7 January, almost four weeks after Glaser's visit. Considering the tensions Glaser mentioned, it was a huge feat of self-discipline that all this time the villagers refrained from taking vigilante action. The commission's mandate was to carry out a thorough investigation of the entire matter. Based on the testimonies of witnesses, they reconstructed a vampirization-sequence even more elaborate than Glaser's: a two-wave epidemic.

Villagers related that back in 1727, Arnout Pavle, a hajduk from the village, had fallen off a hay wagon and broke his neck. During his lifetime, Arnout Pavle used to say that after his death he would surely become a vampire, since he had been plagued by one in Cossowa (probably a reference to a village in today's Kosovo) in Ottoman Serbia. It is noteworthy that several researchers have remarked that there seems to be a foreign element in vampire-narratives, as Miliza, Stanno and Pavle all declared that they had been vampirized in Ottoman lands.⁵¹ It can be conjectured that Pavle's name "Arnaut" comes from the Ottoman Turkish *arnavut*, meaning "an Albanian", a word used in reference to mostly Albanian-speaking irregular soldiers serving in the Ottoman army. Just like in the case of witchcraft, being a newcomer to a village might have heightened the chances of being accused of the crime. However, this was certainly not the only scenario. On the southern borderland foreign connections seem especially problematic, as many of the villages are likely to have been entirely inhabited by newcomers. In addition, having contracted the vampire-condition "in Ottoman territory" is not very meaningful, as only fourteen years before the Medveđa case, the whole region had still been part of the Ottoman Empire.

Pavle managed to avoid being killed only by eating from the soil of the vampire's grave. In the same way as smearing oneself with the vampire's blood, this also meant that after his death he would inevitably turn into a vampire. Following his

51 Bohn, *Der Vampir*, 120; Kreuter, "Der Vampir, ein Fremder?."

prosaic accident with the hay wagon, Pavle indeed returned from the grave, sucking blood and killing several people. The villagers unearthed him as well as his victims, and based on the same symptoms as in all revenant cases, they found that four of them were vampires. They were staked, burnt, and the ashes were thrown back into the grave. The procedure however does not seem to have been thorough enough: the vampires had attacked sheep as well, and anyone eating from their meat was vampirized. This is the part of the story that Glaser also recorded. Miliza had eaten of the vampirized lamb meat, and hence when five years later she died, as a vampire she started killing people. Stanno, who as Glaser noted, had also been vampirized, died of childbirth, and the two women started massacring the villagers. Seventeen villagers fell victim, dying after a rapidly progressing illness and complaining about certain dead villagers tormenting them at night.

Confirming Glaser's observations through autopsies

Having finished the hearing of witnesses, the surgeons ordered the exhumation of fifteen corpses of people who had died in the previous three months. They conducted systematic autopsies on them, recording their name, age, time of death and state of decay, while going into the details of the state of internal organs only for the undecayed corpses. The autopsy report gives the impression of highly disciplined work, because the fifteen exhumed corpses are presented in the form of a numbered list. Within each entry, the text flows continuously but always follows the same structure: name, age, time of death, cause of death, and the state of the corpse. There are thirteen entries, out of which two women's entries contain the additional description of their young children. The results of the dissections confirmed on the inside what Glaser saw on the outside: Flückinger's commission confirmed as vampires all the five corpses Glaser had deemed as such. This is in fact remarkable, for it means the corpses did not change much during the four weeks between the two visits. The two commissions of the plague-cordon infrastructure and the military structure found themselves in the same position of agreeing with the locals.

Flückinger remarked the signs that pointed towards the continued functioning of the vital-nutritive functions. He noted continued bodily growth: hair and nails had grown, and new skin was seen to appear under the old layer that was peeling off. The regiment surgeon's dissections were confined to the chest-stomach area, the seat of the vital functions, of circulation, breathing and nutrition; there is not a single mention of the state of the brain, which at the time was considered to be the seat of animal functions (movement, thinking, feeling, imagination and others). The interest in the abdominal cavity is partly explained by the fact that it was known to be the area that was supposed to be the first to fall to putrefaction,

as it was moist and fatty. The surgeons found the untouched state of the internal organs striking. In Stanno's case, they remarked for instance that "the entire entrails, including the lungs, the liver, the stomach, the spleen and the intestines were quite fresh, just like in a healthy person."⁵²

The most frequently noted feature was the presence of light, fresh, liquid blood in various cavities of the corpse, a sign that had been part of a centuries-old tradition of recognizing revenants in Europe.⁵³ On the one hand, the commissioners found liquid vascular and extravascular blood in various parts of the chest, which they suggested was strange, for it should have coagulated. In the case of Stanoicka, a twenty-year-old woman, the commission wrote for example that "during the dissection the often mentioned fresh, balsamic blood was present not only in the chest cavity but also in the ventricles of the heart."⁵⁴ Liquidity points towards life, mobility and an ability to perform the vital functions. On the other hand, in two cases, blood was found also in the mouth and in the stomach: both are considered to suggest that the body was feeding on blood. This fascination with feeding on blood was emphatic in the learned debates as well. The German term which Habsburg officials used for vampires was "blood sucker" (*Blutsauger*), which also points in the direction that feeding was one of the most decisive features of vampires. In fact, it was not unusual for dissecting surgeons and physicians to focus on fluids in the corpse, as disease and health were both almost universally understood as a result of a balance of fluids.⁵⁵ Life in general was thought of as being maintained by the constant movements of highly mobile fluids in the body. Death was supposed to make the fluids stop moving and coagulate.

The surgeons were very diligent in recording the color, texture and the state of the bodies, but they did not venture on far-reaching conclusions. Observations about the apparent continued functioning of the vital functions nevertheless resonated with contemporary iatromechanical vs. animist debates and would be widely discussed later, during the learned vampire debate. The commissioners' findings would also inspire discussions about another topical issue of the time, namely the question of seeming death. In the era, there was no unanimously accepted list of the sure signs of death, and surgeons as well as physicians often warned about the hazy boundaries between life and death.⁵⁶ If a surgeon was to determine death, there were a few signs that he was looking for: the stopping of movement, sensitivity and vital functions (no heartbeat and breathing), as well as pallor mortis, rigor mortis, and

52 ÖStA FHKA AHK HF "Vampir Akten – Teil 2," 1138v–39.

53 See among others: Caciola, *Afterlives*.

54 ÖStA FHKA AHK HF "Vampir Akten – Teil 2," 1139v.

55 Horn, "Vom Leichenöffnen," 800.

56 On this topic, see among others Milanesi, *Mort apparente, mort imparfaite*; Horányi, *A látszatot halál*; Kessel, "Die Angst vor dem Scheintod"; Grubhoffer, "Fear of Seeming Death."

carcass stench as one of the surest signs. Strangely enough, apart from the functioning of vital functions, Flückinger did not record or mention the presence or lack of any of these signs, not even that of stench.

Interestingly, Flückinger's commission said nothing about the element that Glaser found most perplexing, namely the seeming discrepancy between conventional natural philosophical knowledge about putrefaction on the one hand, and their experiences on the other. They did record that Miliza had a desiccated complexion in her lifetime, but did not point out that for that reason she should have decayed faster in the moist soil than the corpulent corpses, which were entirely decayed. Either they did not deem it necessary to include this detail, given that Glaser's report already contained it, or perhaps they lacked the theoretical knowledge university-trained physicians like Glaser had. The fact that they failed to record this discrepancy had consequences, because later only the *Visum et Repertum* was published, while Glaser's report was not. Thus, the learned debaters could not engage directly with a fellow physician's explicit contemplations about the matter.

The reports prepared by the two commissions provide insights into how the expertise of the local arms of the central power were challenged and ultimately conquered by that of locals. Just like Glaser, Flückinger's commission also substituted their own medical vocabulary with the local usage, classifying undecayed corpses as being "in a vampire state" (*im Vampyrenstande*), and although we do not know the exact details, local power dynamics certainly influenced the autopsies. While relating Miliza's autopsy, Flückinger remarks that locals exclaimed when they saw how bloated she was, even though she used to be skinny and barren all her life.⁵⁷ They interpreted this as a sign of having grown fat in the grave on her victims' blood. What is remarkable is that this suggests that villagers were present during the autopsies. The procedure of the dissection was not done in a confined space supervised only by medical personnel: locals could also influence the interpretation of signs. Knowing about the circumstances, one may question whether it is by accident that out of the fifteen dissected corpses the five deemed to have been decaying in an orderly fashion all belonged to the village officers' households: they were the lieutenant (*hadnak*)'s wife and child, the ensign (*barjaktar*)'s wife and child, and the corporal's servant. At the same time, the remaining ten were relatives of ordinary frontiersmen and were identified as vampires. This is all the more suspicious, since Flückinger did not provide a detailed description of what the normally decaying five corpses exactly looked like.

In the end, based on the dissections and yielding to the pressure of the local community, Flückinger authorized the execution ritual. The bodies deemed to be in a vampire-state were decapitated by local Gypsies, burnt at the stake, and their ashes

57 ÖStA FHKA AHK HF "Vampir Akten – Teil 2," 1139r.

were thrown into the Morava River. The meticulousness of the ritual suggests an intense fear of pollution, as even the ashes were not allowed to stay in the vicinity of the village. It also reflects the aim to totally annihilate the cadavers.

The military-forensic framework within which the commission carried out the investigations and executions gave full support to their actions and exhibited trust in their expert diagnosis. In his letter of 26 January 1732 to the Viennese Aulic War Council, Botta d'Adorno lauded them for the "hardships they endured and the extraordinary efforts they made" requesting the council to offer monetary compensation to the surgeons.⁵⁸ On 11 February, the War Council forwarded the request to the Aulic Treasury, underlining that the three surgeons should be recompensed not only for their travel expenses, "but also for the many hardships they endured during the exhumation, the examination and the burning of the corpses that were found to be suspicious."⁵⁹

The Treasury in turn ordered the provincial government of Serbia to calculate the exact costs the surgeons had to spend and to detail exactly how many days the mission had taken up. The same order also talks about vampires as a tentative reality, referring to them as "those so-called vampires or bloodsuckers, [whose presence is] fairly strongly felt there, in Serbia"⁶⁰

In this way, the reports provided the provincial administration with officially accepted evidence to support the existence of the newly crafted affliction of the vampire contagion, which subsequently passed into the learned world only to be reshaped again and again ever since. The history of translations from local fears through highbrow treatises to the current movie culture started out from a productive, if conflicted, interaction between Serbian popular culture and the Habsburg medical administration on drawing the boundaries of death.

Conclusions

On the southern borderland of the Habsburg Empire, the early decades of the eighteenth century witnessed the enchantment of the Habsburg occupying administration's personnel with the figure of the vampire, which was thus (re-)born as a typical contact-zone product. Military, civilian and medical officials had to accept the expertise, knowledge claims, and social practices of "the other". They developed a symbiosis in which revenant executions were allowed to happen as long as they were duly requested, overseen and documented by the authorities. Understanding the

58 ÖStA FHKA AHK HF "Vampir Akten – Teil 2," 1132r-v.

59 ÖStA FHKA AHK HF "Vampir Akten – Teil 2," 1142r.

60 ÖStA FHKA AHK HF "Vampir Akten – Teil 2," 1131r-v.

local populations of the Habsburg borderland as active participants in knowledge production contributes to similar claims about colonial spaces outside Europe.

Even though often overlooked in the secondary literature, contagion physician Glaser's report was seminal, because it marked out the direction of investigation for Flückinger's surgical commission: the latter arrived on site already with a physician's contemplations about the unusual diagnosis of vampirization in their hands. Glaser, and Flückinger in his wake described and, to some extent, subscribed to a novel, contagious kind of revenant etiology, where a living person was believed to acquire (not to say, get infected with) the destiny of having to become a vampire after death. For Glaser, the turning point was that his experiences went against the conventional natural philosophical theory about the dynamics of putrefaction: corpses, such as Miliza's dry body surrounded by an opposite-natured, moist soil, did not result in fast decay the way theory predicted.

The activity of Glaser's and Flückinger's commission was born out of a practical and urgent pressure to make sense of the public health situation in Medveđa and to be able to give an expert opinion for further judicial action. Even though the main role of their activity was governance and disciplining, they were also pushing against the boundaries of contemporary knowledge on bodily decay. The fact that both Glaser's and Flückinger's commissions surrendered their Latin-German-based medical vocabulary for the sake of Serbian idiom and Glaser's open reflections on his inability to produce a fully convincing explanation to what he saw offer us a glimpse into the learning process through which provincial-level officials were gradually becoming transnational experts in the contact-zone of the southern Habsburg borderland.

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