

LA STORIA DELLA MEDICINA
COME PONTE CULTURALE
NEL BACINO DEL MEDITERRANEO

Atti del Convegno internazionale di studi

Libera Università degli Studi "S. PIO V"

Università di Malta

Società Italiana di Storia delle Scienze Biomediche
e delle Istituzioni Sanitarie

Malta, 19-20 ottobre 2001

EDITRICE APES

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OF ILLNESS AND CURES: CONCEPTS OF HEALTH IN EARLY MODERN MALTA

The Plurality of Medical Remedies

In early modern Malta, as in the rest of Europe, there existed two major systems by which one could explain health and sickness, life and death or, general success and failure in everyday life. The first was based on the general belief that God's omnipresence in the world served as an active force in which the good were rewarded and the impious were punished. God showed his hand on the malevolence of the world in the devastation caused by warring activities or, the infliction of famine and plague. It was believed that the only way these scourges could be controlled was by resorting to supernatural power. Belief in supernatural healing may have been largely circular reasoning but since it was mostly ecclesiastical in nature it was believed to be supernatural and had a vast spiritual and therapeutic effect on the majority of the people.

The other view was that put forward by learned medicine, based as it was on natural philosophy, which it largely borrowed from the Graeco-Roman world of antiquity and adapted to the Christian tradition. It was a view in which elements and humours were believed to govern everything in the natural world from meteorology to medicine. Pseudo-sciences such as astrology, magic and alchemy formed an integral part of this worldview and claimed to offer ways to understand and control the environment.

In essence learned medicine was little different from popular magical healing since the practitioners had no real understanding of the circulation of blood, the nervous system, the digestive system nor anything else. The prescriptions they prepared were of little or no help and were indeed often potentially lethal. In order to give the impression

that they were doing something useful physicians normally subjected their patients to a regime of emetics, purges and bleeding, as the normal forms of intervention available. Nonetheless one must admit that for all its weaknesses the medicinal healing of the times had a very powerful effect on the worldview of people from all social levels.

In short the sixteenth and seventeenth centuries were a time when the appeal of medical knowledge was almost entirely influenced by classical texts based on Greek, and to some extent Roman, popular knowledge. Medical practice was essentially based on Galenic medicine, which changed very little over the centuries until the late eighteenth century. Its correspondence to the material conditions of pre-industrial society and the expectation that it could be applied to the poor all indicate its close relationship to the society that produced it and then believed in it. This state of affairs made sense in a society where everyone regarded some information of medical knowledge as indispensable for one's personal well being. Hence the sick not only diagnosed themselves, but also even expressed their diagnosis to the medical practitioner.

During the seventeenth century great efforts were made in an attempt to define the various branches of the healing profession. From now on the roles of physician, barber-surgeon and apothecary were defined and each sector had its own corresponding moral and professional responsibilities¹. The physician was essentially the specialist of internal medicine who diagnosed the disease during consultations and prescribed prescriptions and concoctions. The physician refrained from any manual activities like operations - which were carried out by the barber-surgeon - and the actual preparation of medicine, which was carried out by the apothecary. The physician, studied at a Medical College and distinguished himself by being conferred the title of Doctor of Medicine while his lesser colleagues, the barber-surgeon and apothecary, acquired their knowledge mechanically often through an apprenticeship and, in the case of surgeons, thanks to training in hospitals. It goes without saying that the barber-surgeon - who suggested treatments for internal diseases despite lack of training in the field - was considered as a violator of the medical corporation and was furthermore a threat to the medical profession. However the most useful and widespread official practitioners were probably not the highly educated physicians but rather the barber-surgeons, who had

¹ G. PANSERI, 'La nascita della polizia medica: l'organizzazione sanitaria nei vari stati italiani', in G. MICHELI (ed), *Storia d'Italia. Annali 3: Scienze e tecnica nella cultura e nella società dal rinascimento ad oggi*, Turin, 1980, p. 180.

considerable practical skills in dealing with fractures, wounds, abscesses and a range of other medical complaints. This explains why medical service, especially in rural areas, was normally provided by barber-surgeons like Nicola Gullo the barber-surgeon of the village of Luqa in the late 1630s. Gullo was reputed for his ability to fix broken bones and even served as dentist².

In this state of affairs it should be of no surprise that Neapolitan women are said to have had more faith in the cures provided by women 'experts' than those of the physicians³. The expertise of older women was at a premium, whether they were official midwives or not. The mass of the common folk was not inclined to seek medical treatment. First and foremost, given the widespread poverty, patients and their families were often unable to pay the doctor's fees. Secondly, the physicians inspired feelings of intimidation so that the commoners preferred to consult the local charlatan or wise woman⁴. Finally the diagnosis of medical practitioners often proved to be either erratic or it consisted of medicaments which were little better than the ones provided by the cunning folk. In 1607, for example, the Sicilian physician from Syracuse Matteo Cimino used oil to heal the head-wound of the Muslim galley slave Machamet⁵. Likewise in 1637 the Sardinian galley-surgeon Antonio Meline used egg-yolks to heal the wounded in battle⁶. These remedies were not much different from those used by the common folk⁷. One of the favourite healing methods used by the mid-seventeenth century slave-healer Chag Hali was a potion of different herbs mixed

² G. MICALLEF, *Hal-Luqa. Niesha u grajjietha*, Malta, 1975, p. 77.

³ G. ROMEO, *Inquisitori, esorcisti e streghe nell'Italia della controriforma*, Florence, 1990, pp. 204, 220.

⁴ C.M. CIPOLLA, *Public health and the medical profession in the Renaissance*, (Cambridge, 1973), p. 114.

⁵ National Library of Malta Archives of the Order of Malta, Ms. 663, fol. 63.

⁶ Archives of the Inquisition of Malta Criminal Proceedings, Ms. 54 bis, case 5, fol. 37.

⁷ Kenneth Gambin refers to a few case-studies of the mid-1630s where medical practitioners, physicians or surgeons, declared to have practised magical remedies. Gonsalvo Habel, a Maltese physician practised sorcery against theft AIM Crim., Ms. 51A case 107, fol. 522: 29 June, 1635; Paolo Capones, a Maltese surgeon from Senglea, resorted to love magic AIM Crim., Ms. 51B case 140, fol. 918: 20 July, 1635; Francesco Cagno, a Sicilian physician, was denounced for love magic. AIM Crim, Ms. 52A case 171 fol. 129: 22 August, 1635; A French physician, practised love magic and rituals of sorcery to get wealthy. AIM Crim., Ms. 52B case 288, fol. 835: 31 August, 1637; cf. K. Gambin, 'Fabio Chigi: Inquisitor-Missionary and Tridentine Reformer' (MA unpubl. thesis, University of Malta, 1997), pp. 133, 143, 154, 171.

with water with which he bathed his patient⁸. A detailed analysis of the Inquisition criminal records for the years 1767-1798 carried out by Anthony Camenzuli has shown that witchcraft cases comprise a total of 37.8 per cent of all available cases and are top of the list of accusations. Indeed the highest percentage of cases (477) deals with magical healing⁹. These conditions surely explain why throughout the early modern period, and until the suppression of the Inquisition tribunal by Napoleon in 1798, the number of magic accusations remained so high. The French occupation of Malta in June 1798 had in fact led to the abolition of all Inquisition activities.

It has been argued that the limited efficacy of pre-modern medicine induced the early modern Catholics to resort to any sources of healing that were available to them. Thus 'in this medically pluralistic society the intervention of physicians was but one source of relief, and not necessarily the most common'. Therefore apart from the regular medical practitioners there were the cunning folk, exorcists and saints besides the widespread use of domestic medicine¹⁰. In 1601 Joanna Grima of Luqa took her two-year-old girl, who suffered from an eye-disease, to an old Sicilian woman called Margarita Fiteni, then living at Tarxien. Margarita was reputed for her ability to heal little children from all kinds of illnesses. In the case in question Margarita thought that she could heal the child by masticating an herb *ciminagro* and putting it on the eyes of the girl. Unfortunately, the mother could see no progress in the girl's eyes¹¹. On another occasion a woman and her sister, the tertiary nun Catherina Bonnichì from Vittoriosa, consulted the midwife Agatha (de Suda?) to diagnose the disease that the woman's daughter was suffering from. Agatha fumigated some laurel leaves and made signs of the cross on the girl's forehead and lips while reciting the *Pater Noster* and the *Ave Maria*¹².

The above evidence confirms the view that domestic medicine continued to be a predominantly female field, in part because poor,

⁸ C. CASSAR, 'Witchcraft beliefs and social control in seventeenth century Malta', *Journal of Mediterranean Studies*, (1993) vol. 3, no. 2 p. 321.

⁹ A. CAMENZULI, 'Inquisition and Society in mid-Eighteenth Century Malta', (BA (Hons) unpubl. thesis, University of Malta, 1996) p. 10; *Ibid.*, 'Maltese Social and Cultural Values in Perspective. Confessions, Accusations and the Inquisition Tribunal: 1771-1798', (MA unpubl. thesis, University of Malta, 1999), p. 43.

¹⁰ D. GENTILCORE, 'Contesting illness in early modern Naples: *Miracolati*, physicians and the Congregation of Rites', *Past and Present. A Journal of Historical Studies*, (1995), no. 148 p. 119.

¹¹ AIM Crim., Ms. 23A case 321, fol. 323.

¹² AIM Crim., Ms. 18 case 211, fol. 185-v.

elderly women were frequently driven to the margins of society and thus depended on their knowledge for their livelihood. At the same time healing and health were considered a natural part of the female domain. It was part of the women's concern for the family's survival and well being¹³. In 1602 Marietta Butigeg of Gudja declared that there was nothing wrong when she tried to cure Domenico Vella, her niece's husband, who was in bed suffering from rheumatism. Marietta had heard people say at the village that an herb called *sambuca* could relieve the pain. Therefore Marietta crushed some leaves and cooked them in a pot. Then she massaged the ointment into Vella's knees and legs¹⁴. Marietta's case shows that there existed a general belief that herbal and collective wisdom could cope with simple illnesses. Healing was part of the female sphere, since the relationship with the body - vis-à-vis disease and reproduction - formed part of what was considered the feminine sphere and its responsibilities¹⁵.

The popular healer thus came to play a vital role whenever illness appeared. In the case of a prolonged sickness a whole range of potential healers were often consulted, either simultaneously or in sequence. Evidence that popular remedies shared elements of medical knowledge with official medicine is provided in the case of the Greek healer Jacobo Cicconi. The Magnifico Agostino Gozmano of Vittoriosa whose son, Giovanni Thomaso, was suffering from scrofula had approached Cicconi. But Gozmano only consulted Cicconi after having in vain tried his luck with a number of physicians¹⁶. In his deposition before Inquisitor Verallo, Cicconi not only claimed his ability to cure scrofula but also gave a detailed report of the methods he used. Cicconi explained that on the day he began his cure he fasted on bread and water and recited three Creeds, five *Ave Marias*, and seven *Pater Nosters*. He would then make the sign of the cross on the diseased part of his patient's body and would then pour the blood of a tortoise on the wound. Cicconi explained that he had been taught this remedy by another Greek, Georgio Candiotto (literally George of Candia) and believed that the therapy was most effective if carried out on the eve of the feast of St John the Baptist¹⁷.

Most cunning folk, like Cicconi, offered cures based on herbal

¹³ C. CASSAR, *Witchcraft, Sorcery and the Inquisition. A Study of Cultural Values in Early Modern Malta*, Malta, 1996, p. 50.

¹⁴ AIM Crim., Ms. 20B case 123 fol. 668.

¹⁵ I.M. LEWIS, *Ecstatic Religion. A Study of Shamanism and Spirit Possession*, 2nd edn. London, 1989, p. 79.

¹⁶ AIM Crim., Ms. 23A case 286, fol. 32.

¹⁷ *Ibid.*, fol. 32v.

medicine or religious observances. It was normal for them to provide a range of services, including love magic, the recovery of stolen goods, information about missing persons and searches for buried treasure. Nonetheless whenever asked about their healing activities the cunning folk, were usually unwilling to admit that they resorted to healing practices. One such cunning woman, Marietta widow of Augustino Borg of Vittoriosa, declared that she had never cured the sick, 'and may God guard me from such practises' because she was not only unable to cure any illness but went on to say that she consulted a physician whenever she felt sick. Yet an instant later she admitted to have previously been summoned at the Holy Office for alleged magical and healing activities¹⁸. A few days later Mastro Mariano Curvaija recalled that when two or three years earlier his wife had had a miscarriage, Marietta used to check on her health and even used to smear an ointment on his wife's abdomen. On his part Mastro Curvaija did nothing to stop Marietta from using her medicaments but he continued to consult the professional medical practitioners¹⁹. Such practices confirm that the power to heal and to harm was so closely intertwined in the popular mind that they could never really be separated. All forms of healing formed part of a tangled web of cause and effect, into which magic and the supernatural could easily be inserted.

The evidence provided suggests that witchcraft beliefs gained currency when medical knowledge proved inadequate. It usually consisted of a mixture of remedies, based on the accumulated experience of nursing combined to the inherited lore, concerning the healing properties of herbs, accompanied by prayers, charms and spells. Thus the wise woman Imperia, wife of Giulio of Mosta, had the habit of reading on the heads of her patients from a book. It was rumoured that she had learned how to read at the *monasterio delle vergini* (the Benedictine nunnery of Mdina) where she had spent some time before her marriage²⁰. The numerous magical prayers, whether passed orally or taken from the various magical books which healers kept, clearly expressed the related notion that religious language was in itself a vehicle of power. At the same time clerics, as well as medical practitioners, routinely offered medical advice and often participated in popular healing techniques.

Many improvised healers who practiced their cures, learned perhaps by observing medical practitioners, in response to a recognized need and

¹⁸ AIM Crim., Ms. 146 case 5 (76), fol. 102-v: 2 March 1599.

¹⁹ *Ibid.*, fol. 104v: 8 March 1599.

²⁰ *Ibid.*, Ms. 23A case 303, fol. 273: 9 November, 1604.

following a reputation for success. Betta Caloiro explained that she became acquainted with magical healing at the age of six thanks to the priest Don Francesco Habela who taught her an invocation from a book, which, although she learned it by heart, she did not know what it meant. As a young girl Betta had been bewitched by a woman of the village and as a result her nose became distorted. Betta spent the next 25 years visiting several physicians who could not offer any remedy. Finally a Sicilian physician from Licata - who was in Malta during the reign of Grand Master D'Homedes (1536-1553) and lived at Fort St Angelo - was able to cure her with a mixture which included lead. Thus she became convinced that lead could be used as a cure and began using it to cure others. She firmly believed that these remedies 'function through the intervention of Christ, and saints Cosmas and Damian, physicians of Christ, thanks to the *Pater Noster* and *Ave Maria* which I proffer, as well as the burning of blessed incense and myrrh'²¹. When asked why she resorted to such invocations, Betta expressed surprise, retorting that blessed medicine heals better as it possessed more virtue²². From Betta's deposition it transpires that both the medical doctor from Licata and Don Francesco Habela approved such remedies. This should come as no surprise since there was little to distinguish between popular medical practices and the activities of properly qualified physicians. Thus although lay knowledge was practically based on personal experience, there existed a substantial convergence between lay and professional medical outlooks and attitudes. Indeed both elite and popular medicine made use of a large herbal component in their healing activities. The major difference between the two methods of healing lay largely in the disease causation of popular medicine, which was often tempered by practical experience while their healing rituals had an underlying supernatural basis. The reason why we know so much about the services provided by popular healers is because the Catholic Church claimed jurisdiction over those who used enchantment rituals for whatever purpose. Magic in all its forms, including the learned type, came to be seen as dependent on diabolical intervention for its success and was thus prosecuted by the local branch of the Roman Inquisition²³.

Magical beliefs were widespread at a time when medical knowledge was often inadequate. Even the sacred host was perceived as a magical remedy. In 1546 the Dominican prior at Birgu was denounced to the

²¹ AIM Crim., Ms. 19B case 46, fol. 465.

²² *Ibid.*, fol. 464-v.

²³ C. CASSAR, *Witchcraft, Sorcery and the Inquisition*.

Bishop of Malta for having written the words *hoc est corpus meum* (this is my body) on consecrated wafers before communicating the sick at the hospital²⁴. This appears to have been a common practice among the clergy as in 1575 the Apostolic Visitor Mgr Pietro Dusina prohibited the clergy from saying mass over consecrated wafers upon which prayers and other magical words were inscribed²⁵. It was unthinkable for the properly trained clergy of the Tridentine Catholic Church to participate in 'superstitious' remedies but the Church continued to encourage the blessing of houses, the sprinkling with holy water. At the same time the performance of exorcisms and pilgrimages remained popular among the faithful. The Franciscan exorcist Fra Gerolamo Menghi (1529-1609) wrote that orthodox religious methods used by the clergy were effective since clerics had the power to heal with the aid of God and the approval of the Church²⁶. Therefore one may safely assume that popular healing remedies developed largely as an extension of ecclesiastical ritual²⁷. However Menghi warned exorcists not to venture into the physicians' realm, by giving oral medicines without a prescription.

Despite such arguments the ordinary folk continued to associate church sacraments with healing. Battista Codronchi went so far as to declare that confession 'not only alleviated the fear of mortal sin, but could also be considered a "physical medicament" because of the link between body and soul'²⁸. In the popular imagination sacred buildings, sacramentals and religious rites were believed to contain some form of therapeutic power - a state of affairs that made it harder for the church authorities to control the spread of magical healing methods. Similar beliefs were associated with the devotion towards saints, who performed miracles, since the expectation of miracles was a fundamental part of Catholic Reformation theology - a belief that was shared by all social classes.

One form of healing, which was frequently resorted to at the time, was healing by exorcism. In the late sixteenth century Fra Aurelio Axac,

²⁴ AIM Crim., Ms. IA case 1: 1 April, 1546.

²⁵ NLM Libr(ary) Ms. 643, p. 35.

²⁶ M. O'NEIL, "'acerdote ovvero Strione", Ecclesiastical and superstitious remedies in 16th century Italy', in S. HALICZER (ed), *Inquisition and Society in Early Modern Europe*, London, 1987, p. 54.

²⁷ *Ibid.* 'Magical healing, love magic and the Inquisition in late sixteenth century Modena', in S.L. KAPLAN (ed), *Understanding Popular Culture. Europe from the Middle Ages to the Nineteenth Centuries*, New York, 1984, p. 91.

²⁸ B. CODRONCHI, *De christiana ac iuta medendi ratione libri duo doctrina referri*, Ferrara, 1591, pp. 48-49; cfr. D. GENTILCORE, *Healers and Healing in early modern Italy*, Manchester, 1998, p. 11.

an Augustinian friar who served as rector of the sanctuary of Our Lady of Mellieha, was one of the few clerics in Malta who had a licence to practice exorcism²⁹. Most significant is the fact that Axac practised his speciality at the holiest sanctuary dedicated to the Virgin Mary in Malta at the time. Despite its isolated position in the north of Malta the sanctuary attracted devotees from all parts of the Maltese islands. Devotion to the sanctuary of Our Lady at Mellieha was so intense that on occasions the Inquisitors specifically imposed a visit to the sanctuary as a form of penance. In a deposition in front of Inquisitor Innocenzo del Bufalo in 1596, Axac explained that he often read on the head of the 'possessed' and sick persons. Amongst his 'patients' Axac recalled that he had exorcised Imperia, the widow of Geronimo Bonnici, who used to make sounds similar to those of a bull. He stated that his experience enabled him to diagnose Imperia as one suffering from the evil eye³⁰. In another Inquisition trial of 1599 another woman, Margarita Psaille of Siggiewi, was thought to be possessed by an evil spirit both by Fra Aurelio Axac and Don Mario Greg, another exorcist, and the parish priest of Lija³¹. Likewise the parish priest of Burmola, Don Michele, usually read over the heads of those who were believed to be possessed by the devil³². The Roman Inquisition worked to separate clerical and lay, or improvised, exorcists. The latter were charged with taking on the status of the trained and licensed priest since exorcisms could only be undertaken by trained and licensed clergy. The Holy Office examined laymen accused of performing improvised exorcisms. In 1608, for example, the Gozitan priest Matteo Zahra denounced the military engineer and member of the Order of St John, Fra Vittorio Cassar, for exorcising a Maltese woman at the Church of St John in the Gozo Castle³³.

In reality every priest in the diocese was considered to be a potential healer because of the remedies at his disposal³⁴. This may explain why

²⁹ C. CASSAR, *Witchcraft, Sorcery and the Inquisition*, p. 40.

³⁰ AIM Crim., Ms.14A case 13, fol. 399: 12 January 1596.

³¹ AIM Crim., Ms. 147A case 77, fols. 148-49: 9 August 1599.

³² AIM Crim., Ms. 22C case 237, fol. 962: 27 August 1604.

³³ AIM Crim., Ms. 28B case 196, fols. 826-35; cf C. CASSAR, *Witchcraft, Sorcery and the Inquisition*, p. 83.

³⁴ In Gozo there must have been a dire shortage of medical practitioners which must have lasted at least until the first few decades of the eighteenth century. On 30 October 1729 the Gozitan priest Don Angelo Bonnici, accused of blasphemy in front of the Holy Office, was referred to as 'one of the two docters on the island'. AIM Crim., Ms. 111B case 200, fol. 660; cf. M. Xuereb, 'Apostasy and the Inquisition in Malta, 1720-1730', (BA (Hons) thesis, University of Malta, 1998), p. 156. Such a state of affairs would naturally encourage the proliferation of popular healers.

Henciona Gadineo had consulted several physicians, as well as various friars and priests, before she turned to the expert necromancer Fra Vittorio Cassar in the hope that her 15-month-old daughter could be healed³⁵. These remedies had powers that the physicians lacked since they over turn the order of things, which was not possible for the physician to carry out. This was carried out in the belief that if a spell caused illness, it was the devil that gave it its power and God allowed it to happen in order to test the sinner. Church remedies were believed to be the only means by which to combat such diseases.

Of Causes and Cures

Death's omnipresence affected popular attitudes to healing practices. Its imminent presence affected the lives and activities of all classes of the population. The sixteenth century in particular was an age of heroic enterprises, especially remembered in Malta for the Ottoman siege of 1565 and the active part Malta played in sea battles like Prevesa (1538) and Lepanto (1571). Yet, for all their importance, these campaigns were often rushed in planning and preparation. Owing perhaps to the lack of proper means of communications, much of the human effort of the early modern period suggests a frantic attempt to rush things through before death stepped in to cancel all effects of human endeavour³⁶. War could produce famine, and famine left people open to death from endemic and epidemic diseases.

In such circumstances knowledge about health and illness was, in the minds of people at the time, an urgent matter that gave hope of survival. Medicine could help to produce a feeling of personal control over events: by making sense of how illness and death occurred and by providing instructions on how to lead a healthy life and how to avoid infection - concerns which, of course, are still perennial today though kept at a low key. Ideas of health and illness can be viewed as compliments to the pattern of mortality that gripped Western Europe from the times of the Black Death in the fourteenth century to the second

³⁵ AIM Crim., Ms. 28B case 197, fol. 842: 7 July 1608; cf C. CASSAR, *Witchcraft, Sorcery and the Inquisition*, p. 80.

³⁶ F. BRAUDEL, *The Mediterranean and the Mediterranean world in the age of Philip II*, English translation, Glasgow, 1973, vol. 2, part 3 provides an excellent insight into this attitude for the sixteenth century; cfr. D. Cutajar & C. Cassar, 'Malta and the sixteenth century struggle for the Mediterranean', Mid-Med Bank Annual Report and Accounts, Malta, 1985.

part of the eighteenth century. However as C.M.Cipolla remarks, 'by avoiding doctors, poor people unwittingly protected themselves from practices which often more than doubled the probability of a fatal outcome'³⁷. Naturally in Malta, as Naples and elsewhere, many had no faith in doctors and this must have induced Domenica Muscat to declare, in 1598, that people preferred to resort to healers instead of physicians³⁸.

One must appreciate that unlike the modern day physician, the early modern medical man 'had no battery of diagnostic technology at his disposal', (which means that he) 'was forced to rely pre-eminently upon the sickness story his patient told...' (taking account of the fact that) '...the pre-modern doctor depended upon advancement very largely upon his capacity to please private patients. He necessarily had to speak their language, even defer to it'³⁹.

This view can be confirmed by the way prescriptions were issued. Most attention was devoted to food and drink as they were judged to be the principal causes of disease. Detailed advice was given, therefore, about the goodness or otherwise of different types of food. The surgeon Pietro Paulo Moniza recalled that in 1594 he had medicated Don Bernardino Frances, rector of St Paul's Parish in Valletta, of two swellings for about forty days. The surgeon had advised Don Bernardino to refrain from the consumption of salted foods, legumes and cheeses and to avoid excessive wine drinking. However if Don Bernardino felt the urge to drink wine Moniza insisted that it had to be diluted with water⁴⁰. Obviously there existed a tragic social dichotomy between the wealthy classes and the wretched underclass, which is nowhere more apparent than in the quality of food consumed. P. Camporesi is of the opinion that 'the drama of everyday life, in its tough existential reality, escapes historical writing which examines the *longue durée*', where 'the imbalances of the economy reflected harshly on the working population'⁴¹.

Good, clean air was believed to be nearly as important as food and drink. Its good and bad effects upon the body were very extensive. In

³⁷ C.M. CIPOLLA, *Miasmas and Disease. Public Health and the Environment in the Pre-industrial Age*, New Haven and London, 1992, p. 73.

³⁸ AIM Crim., Ms. 18 case 209, fols. 177-180.

³⁹ R. PORTER, "'Expressing yourself ill': The language of sickness in Georgian England", P. BURKE and R. PORTER (eds), *Language, Self and Society. A Social History of Language*, Cambridge, 1991, p. 278.

⁴⁰ AIM Crim., Ms. 14A case 4 fol. 159.

⁴¹ P. CAMPORESI, *Bread of Dreams. Food and Fantasy in Early Modern Europe*, English trans. Cambridge, 1989, pp. 63, 66.

1647 Gian Francesco Abela hailed the village of Zurrieq as the healthiest place in Malta because it is exposed to the southern and northern winds. This, stated Abela, explained why the people of the area looked so healthy and lived longer than inhabitants in other areas of Malta. He added that the sick and convalescent were often taken to Zurrieq to recover⁴². The sick that could afford it were encouraged to leave Malta for some salubrious place in Sicily. For example, in December 1599 the sick ridden thirty-five year old Catherina Vultaggio left Malta for her native city of Messina, in order to have a change of air. On her trip Giacomo Thomasello, presumably a medical doctor, and her two young daughters, accompanied Catherina⁴³. Likewise Catherina Vitale spent the last few months of her life in Syracuse for a change of air. Of course not everyone had the means and ability to avoid bad air if it meant changing house or occupation. For some people a 'change of air' was too expensive⁴⁴. Nonetheless physicians appealed to the common folk to stay away from fetid environments since good air had refreshing effects on the body while bad air clogged it up. In other words good air was judged qualitatively, subjectively, by one's own sense of smell and sight; it had to be clear, clean, without any infection and smell. In the eighteenth century the name of the village of Safi, within a walking distance from Zurrieq, was described to refer to the clean air within the village, which lacked any sort of pollutants⁴⁵. Such views seem to imply that in the days before knowledge of gases and modern chemistry, everyone could be an expert in judging whether air was good.

The material discussed so far points to the assumption that physicians held 'vague and imprecise' concepts of disease and they tended to explain phenomena in terms of stories full of metaphor and incident that abounded in descriptions of pathological events. It follows that diseases were frequently categorised on the basis of their lethality. In 1600 Don Mariano Briffa, asked to be relieved from his morning duties at the Cathedral, where he served as canon, due to ophthalmic problems. Briffa was lucky because he was able to seek the advice of an eminent

⁴² G.F. ABELA, *Della descrizione di Malta isola nel mare Siciliano*, Malta, 1647, p. 102.

⁴³ The clerk specified that Catherina's husband, Mastro Gioan Giacobbo Vultaggio, had given her permission to travel to Sicily. N(ational) A(rchives of) M(alta), M(agna) C(uria) C(astellania), R(egistrum) P(atentorum) vol. III: 12 December, 1598.

⁴⁴ It seems that there existed two options for those to whom it was prescribed to change the air either to move to a different place with the island, or, to move out. Probably the poorer classes remained within the precincts of Malta and the well-off had the possibility of travelling to another country, most commonly Sicily.

⁴⁵ NLM Libr., Ms. 17, n.p.

physician who was then living in Malta - Pietro Parisi. When asked to explain the reason for his ophthalmic problem, Parisi asserted that the air at night effected Don Mariano's eyesight and was thus harmful to him⁴⁶. In his diagnosis of Don Briffa's eyesight Parisi was putting into practice the suggestions he wrote in his book of 1593. According to Parisi the way to avoid bad air was simple and open to all. In fact he advised his readers not to live close to the foci of corrupt air, such as dead bodies, marshes, other stagnant waters, sinks sewers, dung-hills, kitchens, and places where flax and hemp were soaked⁴⁷. Unscientific as this might be it seems that such views were commonly held among physicians at the time.

As pointed out earlier on, the doctrine of disease was in essence Galenic. It was believed that the body became diseased when the natural complexion or temperament of one or more of its parts was disturbed by an external cause thereby altering the power of that part. Any part of the body could suffer from such qualitative change, but the most likely internal cause of disease was an alteration of the natural temperament of the bodily fluids - the four humours: blood, phlegm, yellow and black bile. This could be due to unnatural qualitative change to the body's parts as a result of a hereditary taint, from a laceration or form of poisoning, or, more commonly, through an abuse of the non-naturals, whose good or bad management maintained the body in a state of health or provoked disease. These were air, food, drink, exercise (including sexual activity) and rest, sleep, wakefulness, bodily evacuations, and the passions of the soul.

Thus when the physician Raimondo Calamia was asked to check the medical condition of Luca Camilleri - then a prisoner of the Holy Office who was about to undergo torture - Calamia held Camilleri's pulse and checked his urine before he diagnosed the nature of the disease⁴⁸. This

⁴⁶ The petition of Don Mariano was sent to the Inquisitor by the Deacon of the Cathedral, Don Antonio Bartholo. AIM Civ(il Proceedings), Ms. 11 fol. 128: 20 May, 1600.

⁴⁷ *'Hor questa aria come cosa mista, non come elemento semplice si corrumpe per diversi cagioni ò superiori, come per congiuntioni e aspetti di planete, influssi, e ecclesiastici: i quali havendo dominio nell'elemento dell'aria, la putrefanno: e così da una secreta qualità de' cieli viene à prodursi nell'aria una nuova qualità nimica, e velenosa: O inferiori come i vapori, che si lievino dall'acqua morte, e putride de' stagni, ò da carpi morti, non seppititi, ò da alcuna essalatione, che esce dalli abissi, ò dalle profonde cavarne della terra, e così ancora dal vitto, che communamente si usi in alcuna città, ò Regno per necessitã. Di che havendosene fatto consuetudine, e habito per lungo tempo, fa che quelli, che usano l'istessa sorte di vitto, incorvano, e siano soggetti alle medesime malattie...'* P. PARISI, *Avvertimenti sopra la peste*, Palermo, 1593, p. 36.

⁴⁸ AIM Crim., Ms. 1A case 18. fol. 316: 1 January 1575. Besides the analysis of clinical signs physicians were expected to have a knowledge of the examination of the

evidence provides eloquent proof that the evacuation of evil humours was thought essential for a sick person to heal and it was generally believed that such humours were released in the evacuation of bodily waste. This latter view was so recurrent among physicians that the seventeenth century French writer Molière felt he had to mock the medical profession in his last play, *Le Malade imaginaire* written in 1673, by direct reference to it. Perhaps the fundamental issue here is that both the physicians and their patients shared a need to describe and identify the disease since it was thought that by objectifying the illness and its symptoms the disease, or ailment, could somehow be controlled. It follows that sharing one's views about the disease, or illness, in question and comparing with previous experiences was thought to be a very important element in the healing process⁴⁹. Unnatural abstinence but more especially immoderate indulgence - like gluttony, over exercises, anger, sexual athleticism and the like - were believed to be the sure harbingers of disease.

Conclusion

In this brief analysis on medical perceptions and values in Malta during the sixteenth and early seventeenth centuries I have tried to demonstrate, thanks to the case studies discussed, that early modern popular and elite medicine had essentially overlapping functions. In reality there was a good deal of play within the corporate medical community created at that time for intense and numerous dealings involving trained and untrained practitioners. To a much greater extent than historians have normally been willing to acknowledge, the popular healer and the physician inhabited a unitary world, so that elite and popular medicine were contiguous or overlapping rather than contrary or dichotomous. This point gains more credibility when one examines the medical ideas and the language used by all the types of medical practitioners then practising, whether popular and professional. All in all the available evidence supports the view that to a very considerable extent, trained and untrained practitioners participated in a shared

patient's urine which was perhaps the only laboratory examination known at the time. Urine analysis, based on the quality (colour) and the quantity of urine emitted by the patient, was originally observed by Hippocrates in the fifth century B.C. It was later practised by Galen and assumed great importance in the regimen of the Medical School of Salerno which perfected and improved the method of urine analysis.

⁴⁹ D. GENTILCÒRE, 'Contesting illness in early modern Naples', p. 127.

medical discourse. That discourse was grounded in the medical theory of the ancient world based on the notions of the second century Greek physician Galen. One cannot ignore the importance played by Galen's theory of the humours - a highly pervasive and influential one on the cosmology of medieval and early modern Europe. It formed the fundamentals of medical theory known to the educated elite from their schooldays, and was popularised through versions of contemporary medical ideas which circulated freely and widely in print. Naturally, there were very great differences in the extent to which trained and untrained practitioners could articulate that discourse or use it creatively. Yet its forms were so variable, and its influence so pervasive, that it seemed impossible for healers to escape it. Galenists made no claims to the infallibility of their art. On the contrary, they stressed its limitations in many cases, especially when patients were suffering from acute diseases or painful chronic conditions - a view which can be confirmed by the Malta case studies discussed above.