

Health Legislation in Bihor County during the Enlightenment

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UNTIL THE 18th century, medical assistance had not been formally coordinated by state authorities. It had been ensured following the individual private initiatives of the church, some cities, or certain personalities. The church had primarily assumed the task of providing healthcare assistance to the population, under various forms. Representatives of various monastic orders had founded hospitals and outfitted “*Băile Episcopopești*” near Oradea, whose thermal springs had been known since the time of the Romans¹.

A decisive step in organizing the healthcare system was taken only in the 18th century, in “The Enlightenment Age”. Several Enlightenment thinkers from that period shaped a new scientific climate that favored the development of medicine and pharmacy².

Since at that time Bihor County was part of *Partium*, which had been annexed by Hungary, all laws passed during this period by the Imperial Court were transmitted to the county authority through the Hungarian Royal Council (*Consultum locumtenentiale*) in Buda which was subordinated to the Hungarian Aulic Chancellery in Vienna³. These bodies focused their attention on the implementation of the reform program which implicitly covered the issue related to the population health⁴.

The present study was carried out based on careful and complex research in libraries and at the National Archives of Bihor County. We conducted a chronological, systematic and logical analysis of an immense archive material, largely untapped till then: old files, journals, notes, calendars, yearbooks etc. Our goal was also achieved with the help of researchers’ publications and discussions with contemporary pharmacists.

Bishop Demetrios of Oradea mentioned the “Black Death” epidemic (plague) in a document written as early as 1349⁵. In the first half of the 18th century this disease appeared in Transylvania, respectively in Bihor at Sânmiclăuș (today Sânicolaul Român) and other villages around Oradea. The disease was mentioned in several religious records from 1718⁶.

The information on the plague epidemic of 1738-1744 is more extensive. This epidemic ravaged the entire Bihor County and Transylvania as well, determining the central and local authorities to take action in order to eradicate it⁷.

In 1738, as a first measure, a health committee was created within the *Consultum locumtenential* by royal decree. The committee had to supervise the population's health, to take actions and to present reports to the Council, or directly to the sovereign. The committee functioned until 1776 when the referents' system was implemented. To prevent the disease in Oradea, doctor *Mohr Ioannes* ordered that the houses where sick people were found be put under quarantine and that the city pharmacy release medications to treat the sick. Despite these measures 591 people were reported dead in Oradea in the next four months. The epidemic was also reported in villages from the areas of Aleşd and Beiuş. One note mentions that at Aştileu the epidemic ended at Easter in 1743⁸.

In order to prevent the epidemics, in 1744 Maria Theresa issued an ordinance that was translated into Romanian as well, "*Ordinance from her Majesty Empress Maria Theresa...*". The ordinance imposed quarantine on the border to prevent the plague from spreading⁹. Both central and local health committees supervised all the aspects concerning healthcare assistance, the training and the activity of the medical personnel, the preparation and the supply of medicines, the treatment of patients etc.

It is well known that even then the majority of the population was treated by traditional healers and itinerant drug sellers who travelled the villages attending fairs where large numbers of people would gather. They offered treatment and healing services for various diseases with herbs and all sorts of preparations¹⁰.

It is not by accident that the *Consultum locumtenential* repeatedly forbade the activity of these "healers", but the results were not the expected ones. The medical staff with superior training was very low in number, and therefore in 1752 a royal decree was issued, ordering local authorities, that is, county authorities, to hire at least one doctor paid by the community and an official surgeon where there were no surgeons. This order was issued several times due to the lack of doctors and to the lack of interest of the counties. Finally, in 1773, the central authorities formally established the salaries for county doctors and surgeons¹¹.

Even in cities healthcare was still provided mainly by *barber-surgeons* and *midwives*. Generally, there were only midwives in villages. Following the visitations made in 1769 in the 46 villages of the domain, the dean of the chapter also noted this fact in his reports. One of the purposes of these visitations was precisely healthcare assistance for the population. In most cases, the reports noted the lack of surgeons or obstetricians, their work being performed by older women in the village. Even when the reports noted the presence of an obstetrician, they referred to a woman from the village with relative knowledge in the field, called a *midwife*¹².

Like the other craftsmen of the time, barber-surgeons were organized into guilds (societies, associations) in order to get better training and to defend their interests¹³. Thus, in 1745, *the guild of barbers or surgeons* was founded in Oradea with the approval of its first status by *Maria Theresa*. It counted 6 surgeons who were also its founders, with *Ioan Felix* as "*praefectus primaries*"¹⁴. At that time, this guild was the "*first medical corporation... founded for the benefit of the people, for the good of the future generations and for the praise of the nominee ...*"¹⁵. However, surgeons' duties were quite limited: dental extractions, cutdowns, suction cups, leeches, wound dressing, the burning of wounds with hot iron and the extermination of rabid dogs. For their training, they had to complete the

apprentice and journeyman stages and to undergo all the examinations and tests stipulated by the statutes.

The number of surgeons increased over the years, they worked with the county doctor in hospitals in Oradea, but certainly also in larger localities from the county or on the large feudal estates¹⁶. For example, in 1770, two surgeons were mentioned in the *oppidum* trade fair of Beiuș¹⁷.

Surgeons or barbers were only allowed to treat external diseases, but most of the time they were exceeding their duties, especially due to the lack of doctors. This reality is very clearly illustrated by the following phrase: “*It is a known fact that simple people turn only to barbers. Doctors cannot be everywhere. It is also clear that barbers do not know anything about internal illnesses and still they treat all kinds of illnesses... Barbers cannot go all the way doctors can, but if they are smart enough, they can treat one with some luck*”¹⁸.

Although the population would often take a doctor for a surgeon, the latter did not have higher studies and was not called a doctor. Surgeons took an examination before the County doctor. As far as the doctors are concerned, the health commission set up the healthcare regulation (*Planum regulationis in re sanitatis*) in 1755 which covered the control of their professional training and medical practice¹⁹.

The most important normative document issued during the reign of Maria Theresa was the health law of 1770, *Generale Normativum in Re Sanitatis*, which drew up the legal bases of the unitary organization of public healthcare in the Austrian Empire²⁰. This law redefined the attributions of the healthcare commissions. The doctor or the physician (*physicus*) of the county was in charge of the entire medical staff from the territory. The doctor directed the anti-epidemic measures, checked the pharmacies, visited the communes, supervised the analysis of the mineral waters, the autopsies, fought against charlatanism, and each semester reported the health condition of the population in the county to the superior bodies.

During the reign of Emperor Joseph II, also called “*the crowned revolutionary*”, measures in the healthcare field, as well as in other fields, were more drastic. Thus, in 1783 the *Consultum locumtenentiale* was reorganized and a health department that dealt with the all issues in this field was set up. County doctors were required to report to this commission all the problems concerning the healthcare situation within their area of competence each semester, annually and, in case of epidemics, every 8-11 days. In 1785 the position of small rural district surgeon was introduced. These surgeons were subordinated to the county doctors. The position of chief doctor of the country, “*protomedicus regni*”, was also created. The chief doctor of the country was also the head of the medical staff at the University of Buda and the subordinate of the *Consultum locumtenentiale*. In 1802, the position of ophthalmologist was also established at the central level, and in 1838 that of veterinarian, both being subordinated to the *protomedicus*²¹.

Since the reports that county doctors drew up till 1848 are numerous and since they are among the most important documents that reflect the health condition of the population in the counties at that time, we shall make a brief presentation of the issues these counties were being faced with:

1. Disease description and stage of healing in the territory, as well as meteorological conditions;

2. Supervision of pharmacies in the county, description of buildings, name and number of pharmacists, the methods of preparing, storing and selling medicines;
3. Epidemics;
4. Epizootics;
5. Diseases caused by rabid animals;
6. Condition of mineral waters;
7. Surgical instruments, midwives, veterinarians;
8. Situation of hospitals, patient statistics;
9. Legal autopsies;
10. Medical staff in the county;
11. Medicines given to the county jail inmates;
12. Smallpox vaccination, beginning with 1794;
13. Organizational problems related to the healthcare system²².

Approximately 40 years later, when probably only isolated cases were reported, between 1786 and 1787, Bihor County was again ravaged by a strong plague epidemic that originally broke out in the areas of Făgăraș and Brașov. In Bihor, the epidemic was compounded by other calamities: an earthquake, flooding, drought, causing a terrible famine and an increase in the price of the agricultural products. Village mayors had the obligation to investigate and verify whether the measures of preventing epidemics in general were being carried out. There were only a few cases of plague reported in the Crișul Repede valley (at Telechiu, Borod, Țețchea, etc.)²³.

In Bihor County, at the turn of the 19th century, other contagious diseases, such as smallpox, scabies, fever, rabies etc. were also reported especially in the small rural districts of Șareth and Eriu. *József Sándorffi*, chief doctor of the county, included these diseases in his semester report (November 1804) that was submitted to the county authority. The report drew attention especially to the case of fever from Picleu and to the fact that the poorly informed population was exposed to the danger of being contaminated by this terrible disease. That is why the doctor made the following recommendations to the population²⁴.

1. It is unnecessary to allow visits to patients, only those in charge of patients' care are to be admitted, visitors exhaust patients, expose themselves to contamination and consume the oxygen from the patients' room;
2. It is forbidden for several patients to share a small room or for two patients to share a bed;
3. Patients' rooms must have windows that can be opened and rooms must be ventilated daily;
4. Keep clean by washing frequently the white laundry because diseases spread mainly due to poor hygiene;
5. If someone dies of a contagious disease, the relatives are not allowed access, the belongings of the deceased must be thoroughly washed, then smoked with the smoke produced by burning fir seeds, and the straws from the mattress shall be burnt.

These recommendations were sent to the bishops of Oradea, who would forward them to the priests in all parishes.

Another contagious disease that made numerous victims in Transylvania in the 18th century was smallpox, also known as black pox. But at the end of the century, thanks to the achievements in medical science, the smallpox vaccine was discovered. In short time the vaccine spread across the European continent, which led to a decline in the incidence of this disease²⁵.

In order to start vaccination against smallpox in Hungary, on 13 March 1804, the *Consultum locumtenentiale* issued a circular to all county doctors. The circular showed the success of the vaccine, instructed doctors and required priests to use the pulpit in order to raise the awareness of the population on the healing effects of this vaccine, which was being successfully applied in Europe, but towards which our people were reluctant due to deeply ingrained prejudices²⁶.

As a result, in August 1804, the Greek Catholic Consistory of Oradea issued a pastoral letter addressed to the priests and to the parishioners, asking them to accept the vaccination of children²⁷. In 1804, at the order of Leopold II, Stephen Stratimirovic, the metropolitan of Karlovci, published the "*Instructions for combating human and bovine smallpox*" in Romanian at Buda²⁸. In 1805, the Gubernium of Transylvania issued in Cluj other instructions in Romanian that were addressed to parents ("Christian Parents") and which presented the benefits of the smallpox vaccine²⁹. We also mention the Romanian translation, in 1817, of Professor Ferencz Bene's paper, consisting of 76 paragraphs, "*Short teaching for healing smallpox*"³⁰.

After advertising the benefits of this vaccine, Doctor Sándorffi, accompanied by surgeons, travelled through the communes, proceeding to the vaccination of the children up to the age of 15. Since not all children could be vaccinated due to the population's reluctance, in 1805 the authorities started again to raise the awareness of the people on the importance of vaccination and of following the rules of hygiene in order to prevent the epidemic. To support his claims, the doctor presented the case of Brusturi where a lot of people got sick because they had not been vaccinated³¹.

Apparently, thanks to the measures taken, the smallpox epidemic did not have serious consequences on the population³². It would come back to the attention of the officials after the Napoleonic wars, alongside the cholera epidemic which spread across Europe in six successive waves beginning with 1817 and culminating in 1831³³.

During this period, especially in 1814-1817, the increased frequency of all kinds of diseases in Bihor was favoured by the great famine that was caused by unfavorable climate and meteorological conditions. This brought the population to the point of desperation. People got sick either from malnutrition or because they were eating roots, animal feed and other non-food products. A large number of sick people was reported in 1816 in the Băița-Vaşcău mining area and in the villages situated on the Crișul Negru River. Officials in the areas reported on the need for food and medicines. *József Sándorffi*, the county doctor, together with surgeons *Mihail Freundhold* and *Szatazilly Ferencz* inspected the localities with more severe problems and prescribed the medication that had to be prepared from barley and brandy. Other medicines were prepared from wine and

ground fir seeds, being used mainly for a rapid healing of stomach problems. Lit fir cones were used for the sanitation of houses³⁴.

In the area of Marghita, the doctor prescribed to patients (with shivering and cough) a solution (tincture) prepared from marshmallow and liquorice roots that were boiled and strained. Then a few drops of *Hofman* were added (1 part ether and 3 parts concentrated alcohol). This medication was administered every 2 hours. If patients had fever and complained of pains in the hands, feet and spine, a few drops of *mohar angyelik* were added to this medicine (we don't know exactly the main ingredients of this potion, but we suppose that it was based on an extract of *angyelik*). If the patients arrived unconscious, 1 gram of camphor and 10 grams of sweet roots were added to this medicine, which was administered hourly³⁵.

Other medicines were prepared from boiled corn husks and various substances, according to the prescription. The substances used in the preparation of these medicines were purchased from the pharmacies located in Oradea³⁶.

Between 1829 and 1831, due to the fact that the smallpox epidemic was increasingly threatening, both higher and local authorities demanded that the vaccination of children be made at their baptism. Surgeons had to release a certificate with the name of the child and the date of vaccination³⁷. But, the most threatening danger was now the cholera epidemic which was ravaging various parts of Hungary and Transylvania, and, as an eyewitness declared, in most cases, the infected ones died within 24 hours³⁸. As a first emergency measure against cholera in Bihor we mention the letter that *Emeric Lányi*, imperial commissioner, wrote in August 1831 to the bishops. In his letter he presented the danger of the cholera epidemic and a few measures to preserve people's health. These measures would be included in a circular distributed by priests in all villages³⁹.

Some of these measures that are presented below illustrate the population's low standard of living and civilization, the symptoms of the disease and how people were advised to treat themselves in the absence of healthcare assistance:

1. Cleaning the body, the clothing and all personal belongings or the things people came into contact is of utmost importance for the prevention of the disease. Clothes must be changed more often, the body must be washed with warm water and vinegar at least once a week. The room, the courtyard and the streets must be clean and the fetid places with stagnant water must be cleaned and drained.
2. The air in people's houses must be clean and dry as in the case of any contagious disease.
3. Small homes must not be overcrowded by people, they must be heated in winter, and animals and dirt must be removed from the house. Windows must be opened twice a day (before meals) and during this time people should burn juniper to remove the stagnant air. The air in the rooms where sick people stay must be cleaned with vinegar steam or, better yet, people must keep hot vinegar here.
4. People must avoid exposing themselves to cold or hot temperatures, and first of all they must protect their legs and abdomen, never lie on wet ground be it day or night.
5. In the future, especially in the evening, people must eat moderately avoiding heavy meals, hot or over baked bread, bread made of unprocessed wheat, rye or corn-

cockle mixed with dirt. People must avoid fat meat, unripe fruit and dirty water. Raw cucumbers and melons are dangerous.

6. No one must go to work with an empty stomach. Have some soup in the morning or a glass of warm wine or a suitable quantity of brandy with a piece of bread.
7. Dirty or stagnant water must be replaced by moderate amounts of wine. But there is nothing more harmful to this disease than wine, brandy and beer consumed abusively.
8. Those who stay with the sick ones will not get sick (contact the disease) if they often wash their mouth and hands with vinegar.
9. People must recognize the symptoms of cholera: headache, dizziness, sudden weakness of the body, nausea, diarrhoea with frequent abdominal pain, intestinal burns, heavy breathing, cold hands and feet etc.

In case there are signs of this disease and at least one of the symptoms mentioned above is present, and if there is no physician or surgeon nearby, patients can help themselves by following these rules:

1. Patients must stay in a warm place, drink warm elderberry or linden tea;
2. Patients must be seated on a chair with the seat cut out. Heated bricks and a bowl of heated vinegar must be placed under the chair. Patients must be wrapped in clothes leaving out only the head so that they sweat. Patients must stay as long as they can bear it, then be moved to a warm bed;
3. If, however, the body does not heat up and does not sweat, then it must be rubbed for 1-2 hours with wine vinegar boiled with pepper, paprika powder and garlic until it sweats. During this time, patients must drink warm chamomile, mint or peppermint tea;
4. A hot cataplasm made of flour, vinegar and brandy must be applied on the patients' abdomen. The cataplasm must be changed frequently;

If patients show symptoms of nausea and abdominal pain, a paste of mustard flour with vinegar or horseradish must be used⁴⁰.

We have to mention here the letter that Bishop Samuil Vulcan addressed to the clergy and to the people on 28 August 1831. In the letter he banned fairs, great popular assemblies, large burial feasts. He ordered that quarantine be instituted in the localities struck by the epidemic in order to stop its spread. Patients had to be isolated, basic hygiene rules had to be followed and the treatments indicated by county doctors had to be administered⁴¹.

Until the middle of the 19th century there would be several waves of cholera, but of smaller intensity and without so drastic consequences. The outbreaks of 1835-1836 and 1848 are mentioned in the documents of the time. The medical instructions set up on 10 July 1848 by the Department of Health in Buda were advertised with the support of the church. The documents show that the cholera from the Romanian Countries reached the Hungarian border, but this time it was not so aggressive and it was less destructive than the one in 1831. The documents contained several recommendations regarding a balanced lifestyle and the ways to treat the disease⁴².

The most important normative document, the healthcare law (*Generale Normativum in Re Sanitatis*) of 1770 laid the juridical foundations for the unitary organization of public health in the Austrian Empire. The law would later be completed with other measures and regulations that would be applied in Bihor County as well. The local authorities took the necessary organizational measures, made repeated recommendations to the population, especially during epidemics, and drew up a series of reports on the health of the population.

At the beginning of the 19th century, based on the orders of the *Consultum locumtenential*, the authorities in Bihor County were strongly involved in the promotion and administration of the smallpox vaccine. They resorted to the support of priests who presented the benefits of this vaccine to their parishioners.

The poor healthcare assistance and the lack of medicines in the county were felt especially during the great famine of 1813-1817, which affected the entire Transylvania, causing various diseases and leading to the death of thousands of people. This disaster was one of the reasons that boosted the establishment of new pharmacies, even if the documents of the time do not provide explicit information in this regard. It is not by chance that pharmacies were established in the regional centers (Marghita, Salonta, Diosig, Valea lui Mihai and Aleșd) that were surrounded by several smaller localities whose populations presently had access both to the necessary medicines and to the pharmacists' advice and guidance, especially because doctors were very rare in rural areas at that time.

We can therefore conclude that the first elements of medical assistance and of medical-pharmaceutical assistance in the fight against epidemics had taken shape by the middle of the 19th century. These measures were adapted in the coming period, as the medical science and science in general developed.



Notes

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Abstract

Health Legislation in Bihor County during the Enlightenment

This paper presents the first healthcare measures taken in Bihor County in the 18th century and the beginning of the 19th century, a period called the “*The Enlightenment Age*”. During the *Enlightenment*, Bihor County was incorporated in the Habsburg Empire, being subordinated to the laws and measures initiated by the Imperial Court in Vienna. Despite all the progress made in the healthcare system during these years, there was a high incidence of contagious diseases, especially in rural areas. Numerous epidemics that ravaged the population were reported in that period. The plague, smallpox and cholera had the most devastating effects. The plague caused the greatest human suffering and loss.

Keywords

history of pharmacy, health, contagious diseases, Bihor County