

Contents lists available at [SciVerse ScienceDirect](http://www.sciencedirect.com)

# Studies in History and Philosophy of Biological and Biomedical Sciences

journal homepage: [www.elsevier.com/locate/shpsc](http://www.elsevier.com/locate/shpsc)

## Quackery versus professionalism? Characters, places and media of medical knowledge in eighteenth-century Hungary

Lilla Krász

Eötvös Loránd University, Budapest, Department of Early Modern History, Múzeum krt. 6-8, H-1088 Budapest, Hungary

### ARTICLE INFO

Article history:  
Available online 9 May 2012

#### Keywords:

Medicine  
Medicalisation  
Physicians  
Habsburg  
Hungary  
Eighteenth century

### ABSTRACT

This essay discusses the question of health in the Kingdom of Hungary during the Age of Enlightenment. It explores the relationships and tensions between central theories of medical police and the local expectations of government administrators, as well as those between academic or official knowledge and implicit or alternative knowledge about health. The reigns of Maria Theresia and Joseph II marked the moment at which particular kinds of folk and practical knowledge about healing became visible and above all legible. This is to be seen in the enormous rise in book production, which in itself represented an 'approved knowledge' that found legitimation in new academic and bureaucratic institutions, such as the reformed medical faculty of the University of Vienna, the newly-founded medical faculty at Tyrnau, the establishment of a health department within the Hungarian *Statthaltereien*, as well as in the emission of royal legislation supporting the agendas of the new enlightened science of 'medical police'.

© 2012 Elsevier Ltd. All rights reserved.

When citing this paper, please use the full journal title *Studies in History and Philosophy of Biological and Biomedical Sciences*

### 1. Introduction

As views of state and society, learning and the public sphere developed during the European Age of Enlightenment, so too the relationship between academic and non-academic knowledge, and between historical actors from different professions, was transformed. Processes such as the popularisation of scholarly knowledge, the popular Enlightenment, the spread of knowledge by means of new media, institutionalisation, scientisation, bureaucratisation, and the formation of communication networks number among the greatest achievements of this period. Another new phenomenon was an increased sense of community among intellectual groups, which stimulated an intensive dialogue between the various professions. These changing social demands led members of the learned world to specialise in ever narrower subject areas. Academic physicians played a prominent role in these processes, and by studying their activities, we can comprehend the social aspects of modernisation in the domain of health.

Since in the 1970s, the term 'medicalisation', coined by Michel Foucault, has served as an umbrella term to describe this aspect of the general modernisation of society. The expression refers both

to the fact that more and more people were gradually drawn into the provision of medical care, and to the professionalisation of healers.<sup>1</sup> The later eighteenth century was decisive in establishing physicians' authority in Europe, from England and France to the Habsburg Monarchy. The learned medicine practised by university-trained doctors was in demand by ever larger sections of the population. The number of professionally trained healers, including physicians, surgeons, and midwives, increased throughout the period, largely thanks to the sanitary reforms introduced during the reign of Empress Maria Theresia, in accordance with the guidelines laid down by her privy councillor, Gerard van Swieten. Among these was the sanitary regulation (*Sanitätsnormativ*) of 1770, intended to regulate the activities of healers of different kinds by introducing compulsory examinations which would be valid throughout the whole territory of the Habsburg Monarchy. This same regulation also created an institutional background for professional training, which produced a network of highly-trained professionals who could police the execution of the regulation. The *Sanitätsnormativ* set very high standards for medical practice, and in so doing, its underlying purpose became apparent: it served to criminalize untrained healers and eliminate them from medical practice. The regulation was also

E-mail address: [krasz.lilla@chello.hu](mailto:krasz.lilla@chello.hu)

<sup>1</sup> On the history and problematic nature of the term 'medicalisation', see Loetz (1994, pp. 123–161); Schlumbohm (1996, pp. 39–44); Stolberg (1998).

intended to have enduring social and legislative consequences, both through the threat of exclusion from medical practice, and by laying out a set of standards and obligations for physicians, surgeons, apothecaries and midwives (Krasz, 2003, pp. 69–85). In consequence, these trained professionals, their explanatory models and their practices achieved widespread recognition, but at the same time, they repeatedly had to demonstrate the value and validity of their particular expertise. On the one hand, they confronted a public sphere which remained stubbornly sceptical; on the other, they had to combat a multiplicity of rival healers in the medical marketplace.<sup>2</sup>

The establishment of academic medical knowledge was supported by state supervision, legislation and the serial introduction of medical instruction. The central administrations of Western and Central European states placed a high value on the common good, and they pursued this by throwing doubt on the methods and materials of traditional healers, while supporting academic physicians and passing regulations removing the right of untrained and empirical healers to practise their craft. This meant that anyone wishing to practise medicine was required to undergo structured training, and to provide evidence of his or her theoretical knowledge and practical skills before a committee of experts. The positive and negative effects of this growing state influence can be explored within the Habsburg Monarchy by studying the newly-formed health administration, the concepts of medical police that were formulated in the name of Enlightenment, and the frequent appearance of decrees establishing standards for medical practice. In a pioneering work, *Österreichisches Gesundheitswesen im Zeitalter der aufgeklärten Absolutismus*, Erna Lesky (1959) evaluated the reformed health system in the eighteenth-century Habsburg Monarchy. Her argument has subsequently been developed and complemented by the studies of Johannes Wimmer (1991) and Sonia Horn (2001), which discussed the making of contemporary Habsburg Imperial as well as Austrian health systems. Numerous short biographies of famous physicians, or local histories of public health in specific locations, were published in Hungary from the 1970s to the 1990s. [Do you want to put some examples in here?] However, a comprehensive investigation of the academic and non-academic healers, patients and health officials in Hungarian territories remains a desideratum for Hungarian research in social and medical history.

The validity and applicability of the individual laws which regulated medical practice were judged against the backdrop of everyday practice. During the period under consideration, the number of university-trained doctors with degrees multiplied significantly. In the late eighteenth century, various sources were still reporting a chronic shortage of trained physicians, or complaining of quackery or the medical mismanagement of men, women and children, as well as of the absence of a general medical culture. Such sources, which included official minutes, medical reports on hygiene, and imperial or royal legislation, also reveal a great deal about the openness of different social groups to modern medical guidelines and therapies. In medical terms, this period was characterised by debates between academic physicians and empirical healers, between the standard professional treatments set out in point form, and healing methods which could only be comprehended with dif-

ficulty, or not at all, by professional medicine: in other words, it was characterised by a *fruitful dialogue and collaboration* between *scientia medica* and *ars medica*, that is, between learned medicine and the actual practice of the medical art. For the Italian case, David Gentilcore has comprehensively analysed the therapeutic practice, interactions and social acceptability of healers from different spheres, whether medical, ecclesiastical or popular. To describe the complexities of the early modern European medical world, Gentilcore has coined the phrase 'medical pluralism'.<sup>3</sup>

A number of aspects of this medical world have been somewhat neglected for the Habsburg case. Firstly, in what did the knowledge possessed by the academic medical community consist? What lay behind its growing social credibility and success? What new institutional forms of individual or group representation of interests helped the doctors to raise their professional and social status? To what extent did they participate in the working out and execution of medical policies decreed at the highest level? Finally, were they merely trusted executive instruments of power, or benevolent, skillful mediators undertaking a process of hygienic modernisation?

## 2. The healers and their methods: the many faces of the 'medical marketplace' in eighteenth-century Hungary

In order to reconstruct the activities of eighteenth-century doctors as well as their social ascent, we must first explore the varied and crowded medical marketplace, to which physicians and all other healers belonged (see Table 1). The division of labour which had differentiated learned physicians from other groups of healers throughout Europe since the Middle Ages survived into the period under consideration. In medical practice, learned physicians limited themselves to *cura interna*—the treatment of internal disease, based on the use of mixtures of herbal remedies (*composita* or compound medicines)—and to advice on healthy lifestyles. They did not deal with any disease or disorder which is today treated by surgeons. The *cura externa* or treatment of external conditions was undertaken by other healers, both official and unofficial specialists, who were allowed to prescribe simple medicaments consisting of a single component (*simplicia* or simples). This rule was decreed by Maria Theresia in hygienic legislation issued in 1770 and applicable throughout the entire Habsburg realm: "Surgeons and apothecaries are banned from treating internal diseases, and qualified physicians are likewise forbidden to treat illnesses which fall within the domain of competence of the surgeons."<sup>4</sup>

There were doctors who periodically toured the countryside, giving advice to the victims of illness. Among these was the physician to the Upper Hungarian county of Zólyom, a man by the name of Karl Otto Moller (1670–1747). In his four-volume collection of medical biographies, the nationally famous town physician of Debrecen in Eastern Hungary, István Weszprémi (1723–1799), had rather appropriately dubbed Moller "Hippocrates Hungaricus", the Hungarian Hippocrates.<sup>5</sup> Dr. Moller, based in the Upper Hungarian town of Besztercebánya (Neusohl, today Banská Bystrica in Slovakia), undertook two annual tours, one in spring and another in the autumn, through Upper Hungary, the county of Pest and the areas east of the river Tisza.<sup>6</sup>

<sup>2</sup> The notion of a 'medical marketplace' was first presented in Cook (1986). On the problem of establishing physicians' authority in the age of Enlightenment, cf. Stolberg (2004), Wahrig (2004).

<sup>3</sup> Gentilcore (1998, 2006).

<sup>4</sup> The complete Latin text of the hygienic legislation is reproduced in Linzbauer (1852, Vol. II, pp. 535–571).

<sup>5</sup> Weszprémi (1970 [1787]), Vol. IV, pp. 443–445. Weszprémi was one of the most successful doctors of the time and of Protestant origin. He studied in Utrecht, Zürich and London and gained his doctorate in Utrecht in 1756. His career in Debrecen, Eastern Hungary, began in 1757 and lasted 43 years. Among his countless scientific and medical publications was the first textbook on midwifery in Hungarian. His principal publication is the collection of biographies of physicians in the Hungarian territories discussed here. On Weszprémi, see Sükösd (1958); Szelestei (1981).

<sup>6</sup> Magyary-Kossa (1929, Vol. I, p. 73). Moller gained his doctorate at Altdorf. From 1697 onwards he was at Pozsony, (Preßburg, today Bratislava in Slovakia), and from 1703 he was the municipal physician while in Besztercebánya (Neusohl, today Banská Bystrica in Slovakia), he founded a private medical school to prepare future medical students from the Hungarian region for study abroad. He was the author of numerous medical essays, and his writings on the healing powers of the baths at Besztercebánya are also significant. See Magyary-Kossa (1929, Vol. I, pp. 35–36).

Download English Version:

<https://daneshyari.com/en/article/7553011>

Download Persian Version:

<https://daneshyari.com/article/7553011>

[Daneshyari.com](https://daneshyari.com)