
http://theses.gla.ac.uk/5704/

Copyright and moral rights for this work are retained by the author

A copy can be downloaded for personal non-commercial research or study, without prior permission or charge

This work cannot be reproduced or quoted extensively from without first obtaining permission in writing from the author

The content must not be changed in any way or sold commercially in any format or medium without the formal permission of the author

When referring to this work, full bibliographic details including the author, title, awarding institution and date of the thesis must be given

Enlighten:Theses
http://theses.gla.ac.uk/
theses@gla.ac.uk
Plague Epidemics and Public Health in Mantua, 1463-1577

Marie-Louise Leonard

MA (Hons), MLitt

Submitted in fulfilment of the requirements for the degree of Doctor of Philosophy, January 2014

School of Humanities
College of Arts
University of Glasgow
Abstract

This thesis investigates how health officials sought to preserve or recover good health during plague epidemics in Mantua, from 1463-1577. Scholarship on health boards in Italy has focused primarily on larger cities such as Milan, Florence and Venice, while many smaller cities and states which formed part of the wider network of interdependent health offices have yet to receive significant attention. This study attempts to address this imbalance by focussing on Mantua, a hitherto neglected area in the heart of northern Italy. Historians have shown by the sixteenth century health offices had wide-ranging responsibilities, yet their most important function remained tackling plague outbreaks through measures including trade and travel bans, quarantine periods and lazaretti. An analysis of the Mantuan health office’s actions and reactions reveal that it does not fit neatly with the health board model historians have established elsewhere in northern and central Italy. I will argue that while the hallmarks of the ‘Italian system’ of public health procedures are evident, closer examination of their organisation and composition reveals that they were shaped by the incidence and severity of outbreaks. Above all, however, they were dependent upon and defined by the evolving state apparatus and by participation of the wider community, both lay and ecclesiastic. Contrary to the view that permanent Italian health offices enforced plague regulations uniformly, there was a degree of flexibility in application within the structures created to fight plague. Further, it will be argued that by examining in detail symbolic acts, such as processions, in conjunction with practical methods we see with greater clarity how civic and ecclesiastical authorities worked together in the attempt to restore the city to good health. By exploring the dialogues between civic authorities, the people they governed and interactions between specific health agencies across the peninsula, this thesis contributes to the understanding of the Gonzagan state-building process and concepts of public health in Renaissance Italy.
Table of Contents

Abstract ............................................................................................................................................. 2
Table of Contents .......................................................................................................................... 3
List of Tables and Figures .............................................................................................................. 5
Acknowledgements ...................................................................................................................... 6
Author’s Declaration .................................................................................................................... 7

1. Introduction: Health Boards, Plague and Mantua ................................................................. 8
   Health Boards in Northern Italy ................................................................................................. 12
   Mantua and Sources .................................................................................................................. 39

2. Il Collaterale, 1463-1528 ......................................................................................................... 51
   Il Collaterale Carlo Agnelli, 1463 and 1468 ........................................................................... 52
   Superiori della Sanità, 1506 ..................................................................................................... 71
   1527-8 ...................................................................................................................................... 83
   Conclusion ................................................................................................................................. 89

3. Mal Contagioso in Mantua, 1574-6 ....................................................................................... 91
   Conclusion ................................................................................................................................. 126

4. ‘Events pertinent to matters of health’: i Conservatori della Sanità ..................................... 129
   i Capitoli delle provisioni del male contagioso dell’anno 1576 ........................................... 132
   Discussion ................................................................................................................................. 147
   Conclusion ................................................................................................................................. 167

5. Causes and Remedies ............................................................................................................ 170
   Medicinal Remedies ................................................................................................................ 181
   Doctors ..................................................................................................................................... 192
   Cleansing and Quarantine ....................................................................................................... 197
   Conclusion ................................................................................................................................. 220

6. Lazaretti: place and function ............................................................................................... 224
Conclusion .................................................................................................................. 263

7. Conclusion ............................................................................................................. 266

Appendices .................................................................................................................. 271
  Appendix 1. The Italian States, 1559 ................................................................. 271
  Appendix 4. Map of Mapello in Relation to Mantua ......................................... 274
  Appendix 5. Map of Mantua, 1575 ................................................................. 275

Bibliography .............................................................................................................. 276
  Archives .............................................................................................................. 276
  Printed Sources ................................................................................................. 276
  Secondary Sources ........................................................................................... 278
List of Figures and Tables

Figure 1: Deaths recorded in the necrology, October 1575- April 1576, p. 111

Figure 2: Deaths in the five contrade of San Pietro, March 1576, p. 112

Figure 3: Deaths per Month September 1575- June 1577, from Vigilio's La insalata, p. 48, p. 113

Table 1: Monthly death totals per quarter and borghi of the city, 1575-6, from libro dei morti, p. 112
Acknowledgements

This thesis would not have been possible without the help and encouragement of too many people to adequately thank here. As both an undergraduate student, when I first encountered Italian Renaissance history, and as a postgraduate student, when I became interested in the history of plague, I have benefited from the supervision of Professor Samuel Cohn. I thank him for encouraging me to pursue doctoral research, his insightful and inspiring guidance in the course of that research and his careful reading of the thesis.

I wish to thank the College of Arts at the University of Glasgow and the Royal Historical Society for financial help. I was very fortunate to work in the lovely surroundings of the Archivio di Stato in Mantua. I thank Dr Sarah Cockram who helped to demystify the workings of archival research and who has been a source of encouragement. I am very grateful to the staff of the archive for their patience, help and friendship during the periods I spend in Mantua, in particular Franca Maestrini. I thank my examiners Professor Christopher Black and Professor John Henderson for their thorough and attentive reading of my thesis. Their comments and criticisms have undoubtedly improved what follows. My friends and family have contributed in numerous ways, not least in listening to and reading about plague at length. Dr Iain MacDonald and Dr Sarah Erskine kindly read and commented upon earlier drafts. Dr William Hepburn has been a source of support and friendship, especially in the final stages.

My mother Sarah Leonard deserves special mention. Without her support, financially and in many other respects, I would not have been able to undertake doctoral research. I dedicate this thesis to her and to my late father Michael Leonard.
Author’s Declaration

I declare that, except where explicit reference is made to the contribution of others, this dissertation is the result of my own work and has not been submitted for any other degree at the University of Glasgow or any other institution.

Signature _______________________________
Printed name ______________________________
1. Introduction: Health Boards, Plague and Mantua

Carlo Cipolla argued when considering the ‘broader perspective’ of medicine:

‘one must concede that the story of the health boards in Renaissance Italy, although generally overlooked, is in fact the most original and most exciting chapter in the history of medicine in late Medieval and early modern times.’¹

This claim remains valid. With the exception of Richard Palmer’s thesis on the Sanità of Venice, the only monograph to chart the long term development of a health office, scholarship has not focussed directly on health boards.² Cipolla’s prolific contribution, though in the main focussed on seventeenth-century Tuscany, is in part responsible for this.³ He established an Italian model of public


³ For example see Cristofano and the Plague; a study of the history of Public Health in the age of Galileo (London, 1973); Faith, reason, and the plague: a Tuscan story of the seventeenth century, trans. M. Kittel (Brighton, 1979); Fighting the plague in seventeenth-century Italy (Madison, c.1981); Miasmas and Disease: public health and the environment in the pre-industrial age, trans. E. Potter (London, 1982).
health that has become the point of reference for developments across Europe; in particular, the work from which the above quotation was taken has become a seminal publication on the subject. The influential Italian model he articulated emphasised the appointment of permanent health offices or officials that were expressions of the central state. In the course of the sixteenth century the offices came to have authority over many aspects of daily life during epidemics, while broadening their areas of control as concepts of public health developed. Historians have worked on areas and cities including Germany, Denmark, England, Seville and Aberdeen, which take the Italian example as their point of departure. Indeed it is from these quarters that some of the most recent and interesting developments and also critiques of the Italian system have come.

---

4 J. Goudsblom uses Cipolla almost verbatim in ‘Public Health and the Civilizing Process’ in *The Milbank Quarterly*, vol. 64, no. 2 (1986), p. 169. He argues that ‘it may run contrary to what we would expect that the experience of such a disastrous sequence of epidemics as the waves of the plague that swept over Europe between 1347 and 1721 would have influenced the development of manners only indirectly: not by people voluntarily altering their habits but at most through the, only partially successful, enforcement of city ordinances’, p. 170.

Since Cipolla expressed this view the landscape of the Renaissance medical world has been considerably enriched, while there has been a recent surge in interest in the history of public health. For instance, professions involved in medical care have received analysis, such as the role pharmacists and barber surgeons occupied in the urban community. In her innovative work on Venetian plague hospitals Jane Stevens Crawshaw has explored lazaretti personnel and the role of pizzamorti. David Gentilcore has elevated the role of charlatans as healers in the wider medical marketplace. Gianna Pomata has given new perspectives on the patient and doctor relationship through her

---


8 See J. Stevens Crawshaw, ‘The Beasts of Burial: Pizziagamorti and Public Health for the Plague in Early Modern Venice’ in Social History of Medicine, (2011) 24.3, pp. 570-87 and Plague Hospitals: Public Health for the City in Early Modern Venice (Ashgate, 2012). I thank Dr Stevens Crawshaw for kindly allowing me to see the manuscript before publication.

analysis of medical contracts. John Henderson’s work on the multifaceted role of the hospital in Renaissance society has reshaped ideas of such establishments. These historians, among others, have enhanced the Renaissance and early modern medical sphere. As health boards played a pivotal role in administering and working with these professions and institutions, an analysis of their work offers much more than a study of the history of medicine.

The Italian system defined by Cipolla and taken by others as a definitive model requires revision and expansion not only to incorporate ideas from the works outlined above. As scholarship on plague as a disease in the Renaissance and early modern periods has advanced, a reconsideration of health board policies and their efficacy is called for. A fundamental argument that underpins the discussion on the actions of health boards is the medical definition of the disease. The discovery and attribution of the plague bacillus Yersina Pestis in 1894 has shaped our understanding of medieval and early modern plagues, and consequently health board policies have been assessed within this disease framework. Yet as has been demonstrated by Samuel Cohn and Graeme Twigg among others, it is a framework that does not stand up to scrutiny when compared with the evidence for medieval and early modern epidemics. There are numerous important discrepancies between the two diseases, for instance, the evidence of cutaneous signs not tied to glandular areas found in plague cases.

and the epidemiological differences.\textsuperscript{13} Therefore, the following discussion is not tied to a belief in transmission dependent on the rodent population and their fleas.

This thesis contributes to the study of health offices by focusing on Mantua, a small but geographically significant state in northern Italy. The purpose is to broaden the concept of the Italian approach beyond the limited number of cities and less frequently states in the peninsula, and to demonstrate that similarities in response to plague can be found in other parts of Europe. Following the rigid confines of Cipolla’s Italian system obscures these important similarities. First, an outline of the development of health boards in Italy will provide a comparative framework for Mantua.

Health Boards in Northern Italy

The Black Death provoked the initial impetus for the creation of specific health officials. It is not the purpose of this thesis to analyse reactions to the first century of plagues, but there can be no doubt that the period was formative as a core corpus of ideas developed and important foundations for subsequent strategies were established.\textsuperscript{14} The first step was to appoint men to attempt to understand and deal with the unfolding crisis. Cipolla cites the Venetian example from 30 March 1348 when the \textit{Maggior Consiglio} appointed a temporary committee of three wise men to ‘consider diligently’ how to

\textsuperscript{13} See Cohn, \textit{Cultures}, chapter 2, pp. 39-76, for a detailed analysis and comparison of early modern and modern plague characteristics.

\textsuperscript{14} Ann Carmichael has expressed the opposite view. In the first century after the Black Death there was ‘little change in medical theory about plague or in the legislative responses to it’, further not until after 1450 did legislative change in plague controls become rapid. See Carmichael, ‘Plague Legislation’, pp. 512-3.
‘preserve public health and avoid corruption of the environment.’ In Florence a decree was issued on 15 January 1348 which reiterated earlier sanitary regulations. This was followed on 3 April by another decree stating that citizens were forbidden from taking an infected Genoese or Pisan into their homes and from keeping or selling the bedding or clothing of the sick. Soon thereafter, on 11 April eight citizens were elected as a health committee. To the North West, Pistoia also appointed a temporary health board that barred anyone from going to the infected areas of Lucca and Pisa, and also forbade the importation of second-hand wool or linen into the city. Rosemary Horrox has commented that these ordinances ‘are particularly interesting in that they show the city rethinking and amending its strategy as the plague developed.’ Horrox’s acknowledgement of the Pistoians flexibility in their responses as the epidemic ran its course is an important observation.

Responses to counter the effects of the disease continued to develop as subsequent plague waves assaulted the peninsula in the trecento and into the quattrocento. Two states in northern Italy, Milan and Venice, were at the forefront though they progressed in different ways. Milan purportedly escaped the Black Death pandemic and was first struck in 1361. The Milanese soon made strides in creating and enforcing strategies to deal with plague. Regulations made by Bernabò Visconti on 17 January 1374 are oft cited as an example of the ferocity of the Visconti approach to tackling plague. He issued legislation to the

15 Cipolla, Public Health, p. 11. The text of this decree is given in Venezia e le peste, p. 363.
17 Ibid., pp. 21-2.
19 Palmer, ‘Control of Plague’, p. 23.
Podestà of Reggio Emilia, as recorded by the chronicler De Gazata, to ‘preserve our subjects from contagious illness.’ It stipulated that:

‘each person who displays a swelling or a tumour shall immediately leave the city, castle or town where he is and take to the open country, living either in huts or in the woods, until he either dies or recovers.’

Any person in contact with a victim had to ‘wait ten days before returning to human society’, while parish priests had to examine the sick and immediately notify ‘the designated searchers’ under threat of being burnt alive. Richard Palmer argues that these actions are ‘of the highest importance’ in a number of ways; the removal of the sick from the town was central to subsequent counter-plague measures and the quarantine period of ten days was an ‘original and an equally important point for the future.’ Two other points were also precursors for future practices: the confiscation of goods belonging to plague victims, although this is not clearly stated; and the goods of anyone thought to have carried the epidemic from elsewhere ‘shall likewise be put to the use of the lord’s treasury, and no restitution shall be made’, indicating the belief that the disease was communicable by people, but not by their goods as would become apparent in subsequent epidemics.

This legislation was mirrored in the same year by Ludovico Gonzaga for the state of Mantua who also decreed:

20 *The Black Death*, Horrox, p. 203.

21 Palmer, ‘Control of Plague’, p. 31.

22 *The Black Death*, Horrocks, p. 203; ‘Item, all the goods, both movable and immovable, shall be put to the use of the lord’s treasury.’ This could refer to the priests mentioned in the previous point who do not report the sick immediately, however, is most likely to be the goods of the victims.

23 Ibid., p. 203.
‘that any person of the vicarates of Borgoforte, Luzara, Suzara, Gonzaga, Rozolo or any other part of Mantuan territory, or who even lives in the Mantuan domain, whether male or female, of whatever status great or small, is forbidden to enter any territory in which there is the epidemic or mortality, under penalty of death.’

Further, any person harbouring someone known to have come from an infected area was also obliged to report them under penalty of death. Ann Carmichael describes these as the ‘two exceptions’ and argues that ‘the early Mantuan and Milanese examples suggest that tyrants had uncontested, unqualified authority over their cities’, and could therefore enact such arbitrary unpopular legislation contrary to medical opinion. Unlike Milan, Mantua remained under the authority of the Gonzaga lords and the interaction between the current Marchese or Duke, health officials, doctors and other participants in health office work was a more complex interaction than this might suggest; indeed it is a view in need of revision that will be addressed below.

Concomitant with a basic notion of quarantine was the implementation of a thirty day monitoring period at Ragusa in 1377. As an Adriatic colony it could be sure the disease came from outside the community, therefore contact with infected ships was a potential danger. On 5 January 1397 these orders were revised, giving those employed to administer them the right to impose fines and corporal punishment. People arriving in Ragusa from plague areas were commanded to stay for a month outside the district, either on the island of Mercana or in a monastery on the island of Melita. In contrast to Bernabò


25 Ibid.

26 Ibid.

27 Palmer, ‘Control of plague’, p. 32.

28 Ibid., p. 32.
Visconti’s ordinances, these rules refer to goods which could be infected: merchandise with the exception of ‘clothes, beds or used goods’ could be brought into Ragusa. Later that year on 28 June the movement of grain, fruit and clothing from an infected to healthy area was prohibited. Palmer comments on the possibility that these appointments marked the ‘beginnings of Europe’s first permanent Health Office’ despite ‘little record’ of their activity. Therefore, from the Black Death to the beginning of the quattrocento some of the rudimentary practices were being established and applied, often on a temporary basis, with Milan at the forefront; a trend that continued into the fifteenth century.

Palmer argues that one reason for this was ‘the personality of the Visconti on whose fiat the plague orders depended.’ Further ‘the autocratic nature of the Milanese state under the Visconti made possible the promulgation of plague orders which were necessarily rigorous in character and which demanded absolute strictness in execution.’ Gian Galeazzo Visconti is credited with a more sophisticated approach that went beyond his predecessor. This began in 1398 when those from Soncino were refused entry to Milan by crossing the river Adda. Pilgrims travelling to Rome for the Jubilee year in 1400 were likewise refused entry to Milan and were ordered to follow specific routes. Gian Galeazzo ordered that suspicious deaths be reported to a designated official, a parish elder or commissar, and he appointed an official charged with ‘overseeing

---

29 Ibid., p. 33.
30 Ibid., p. 33.
31 Ibid., p. 30.
32 Ibid., pp. 29-30.
33 Ibid., p. 33. Testa also argues that Gian Galeazzo ‘made an important step forward’ from the legislation of his predecessor Bernabò, in ‘Alle origini del’ufficio’, p. 378.
34 Ibid., pp. 33-4.
health regulations’ in the city and the duchy. In September 1399 Gian Galeazzo stipulated the location for two plague hospitals or mansiones for the infected or suspected. In 1400 these mansiones were situated outside the city in an area considered healthy, were furnished with necessities for the sick, and provided with doctors and other personnel. The families of the sick were to be accommodated in monasteries also outside the city. Gian Galeazzo recognised that specific objects, such as mattresses, could spread disease. Other measures included cleansing dwellings; infected houses had to be aired for eight to ten days and fumigated with aromatics. These measures went beyond the city to influence the stance taken in areas subject to the Milanese. An official was appointed for this purpose in Pavia in 1400 but Antonia Testa argues that the exact remit is difficult to determine. However, it is most likely the official carried out Gian Galeazzo’s ordinances. Testa comments that Gian Galeazzo was aware of the need to appoint an officer to organise ‘sanitary defences in the cities in the periphery.’ The practices established by Gian Galeazzo Visconti remained central to the Milanese public health framework.

Milan was also the first to appoint a permanent health official in 1400 to conserve health in the duchy and as Testa argues proximity to Gian Galeazzo


37 Palmer, ‘Control of Plague’, p. 35.

38 Ibid., p. 36.

39 Carmichael, Plague and Poor, p. 113.

40 Palmer, ‘Control of Plague’, p. 42.


was central to this. Guiliana Albini argues that the creation of a permanent health official is probably attributable to Filippo Maria Visconti. Until 1423 orders concerned with health were issued from the duke, whereas in 1424 they emanated also from the *commissario di Sanità*. In the same year a nobleman was appointed ‘commissioner and head officer of the Duke for the preservation of the Public Health in the city and duchy of Milan.’ Thirteen years later in 1437 a ‘commissioner for contagion for the city, suburbs and duchy of Milan, as well as for the city and county of Pavia’ was selected. In 1447 the Ambrosian republic appointed Giovanni dal Torigo to this position. Carmichael describes the ‘overall effect of sustained government control of plague’ by 1450 as a ‘focused and dedicated health office derived from the earlier officials in charge of bulletins.’

The importance of the health office was demonstrated with the fall of the Ambrosian Republic. Francesco Sforza captured Milan in 1450 during one of the worst plagues of the fifteenth-century. René Baldasso argues ‘Sforza understood that his popularity depended upon his success in controlling the plague’ and addressed the epidemic in his first legislative acts. He used the mechanisms

---

44 Albini, *Guerra*, p. 84.
45 Testa, ‘Alle origini dell’ufficio’, p. 381. Who further argues that under Filippo Maria Visconti the *Sanità* became a permanent office. Cipolla concurs that a permanent health magistracy existed from this point, *Public Health*, pp. 15-16.
already in place and appointed a commissioner to preserve health\textsuperscript{51} and the following year he provided personnel including a doctor, a surgeon, a barber, and a notary.\textsuperscript{52} Sforza also employed his physician Benedetto Reguardati to help counteract the epidemic. Reguardati had a full and varied career as a ‘physician, diplomat and university administrator’\textsuperscript{53}, and as ducal physician attended to members of the Sforza family wherever they were, including Milan, Rome and Florence and the areas in between, when needed. Additionally, he was appointed ‘controller of Public Health’ for Milan during this epidemic.\textsuperscript{54} He proposed a solution to the problem of trading goods during the epidemic by suggesting a neutral area between Milan and Pavia be used where goods could be exchanged safely.\textsuperscript{55} Reguardati made further contributions to the Sforza public health agenda.\textsuperscript{56} In his writings he showed concern that the new ospedale proposed by Sforza should be situated where it would have a supply of clean air, a necessity for good sanitary conditions. Reguardati is an example of a university trained and noted physician who interacted directly with plague in both a medical and administrative capacity. He was eventually allowed to leave the


\textsuperscript{52} Albini, Guerra, p. 90. Another of Francesco Sforza’s decisions demonstrates an additional facet of developing public health concerns. In 1451 he decided to amalgamate the smaller neighbourhood hospitals into one large central hospital, the ospedale maggiore. Baldasso argues that through this he achieved control over the health and hygiene board as he was allowed to put forward thirty-six candidates from which the bishop chose the twenty-four members. Sforza became popular for this hospital reform which saved the Milanese people money, as responsibility was taken away from corrupt church officials who sold offices. The actions of Francesco Sforza illustrate how influential and powerful these offices could be. By appropriating existing public health structures, an aspect of continuity which was at the time vital, then Sforza would be able to save the city in two respects, see Baldasso, ‘Function and Epidemiology’, p. 112.


\textsuperscript{54} Ibid., p. 181.

\textsuperscript{55} Carmichael, ‘Contagion Theory’, p. 227.

\textsuperscript{56} Ibid., p. 228.
ducal retinue and Carmichael sees this as ‘severing one sure link between university physicians, the duke and health magistrates.’

A contemporary of Reguardati and member of the College of Physicians, Giovanni Catelano had a ‘lifelong involvement with the Sanità.’ Carmichael has examined his input to the *libri di morti*, arguing that he ‘allied his training in medicine with the interests of early modern state building.’ She also comments that the Milanese ducal physicians, ‘not under the control of the College of Medicine, did have a strong tradition with regard to the idea of contagion in plague.’ Indeed, plague treatises from the time of Bernabò Visconti ‘are frequently seen as the earliest sustained commitment to a contagion principle.’ While later in the sixteenth century the medical elite, university trained physicians, devolved from the Sanità who were happy to ‘pursue a corporeal model of diagnosis, more evident, less negotiable, and in perfect harmony with their strategies for confining the poor and the ill.’

The articulation and development of a contagion based disease transmission that became apparent through the previous century of epidemics, is one of the defining and controversial aspects of the work of health offices. Carmichael has posited the mid-*quattrocento* as a watershed for counter-plague legislation, and suggested the years 1450-70 as the time when many northern Italian cities decided a *lazaretto*, or plague hospital, offered a solution to the

58 Ibid., p. 222.
59 Ibid., p. 221.
problem.\textsuperscript{62} The decision was based on the principle that plague was a contagion based disease rather than on the Galenic theory of the corruption of air, which was at odds with contemporary medical opinion.\textsuperscript{63} Carmichael describes ‘the problem of contagion with public health issues’ in the difference in approach by administrators and physicians:

‘while those trying to anticipate the spread of an epidemic understood the problem of contagion theory as one linked to Hippocratic notions about how an infection could be transmitted from one person to another, physicians focused on the problem at the level of distinguishing which humans were in fact infected with the plague poison or putrefaction.’\textsuperscript{64}

During the plague of 1452 in Milan the military and political ducal advisors ‘tended to emphasize the spatial and familial relationships of putative plague victims.’\textsuperscript{65} Subsequently in the plague of 1468 ‘the Milanese public authorities delimited the parameters of contagion practices before physicians could explore and articulate the ways in which contagion theory posed serious challenges to the Hippocratic/Galenic physiology.’\textsuperscript{66} Also, in Florence the minor plagues of the early fifteenth century led those in charge to believe plague was contagious as it clustered in households in specific areas of the city.\textsuperscript{67} Palmer similarly argues that the ‘disease was increasingly understood in terms of contagion’ through the work of the health officials.\textsuperscript{68}

\begin{itemize}
\item \textsuperscript{62} Carmichael, ‘Plague Legislation’, p. 513.
\item \textsuperscript{63} Ibid., p. 513.
\item \textsuperscript{64} Carmichael, ‘Contagion Theory’, p. 229.
\item \textsuperscript{65} Carmichael, ‘Epidemics’, p. 226.
\item \textsuperscript{66} Carmichael, ‘Contagion Theory’, p. 232.
\item \textsuperscript{67} Carmichael, ‘Plague Legislation’, pp. 518-9.
\item \textsuperscript{68} Palmer, ‘Control of Plague’, p. 48.
\end{itemize}
The dichotomy, however, between health officers as proponents of a contagion belief and academic doctors stuck in a Galenic miasma of corrupted air and atmospheric conditions has been shown to be inaccurate, or at least overly simplistic. As John Henderson has argued this view is dependent upon a history of medicine that focuses overmuch on the great men in medicine and developments predicated on their works. Henderson cites discussions on the plague of 1522 in Florence when the Fraternity of the Misericordia requested advice on how to treat plague and as a result a treatment treatise was written. As Henderson points out discussions between the Fraternity and the doctors ‘must have covered many aspects of the subject and methods to be adopted for the prevention of the further spread of disease.’ Another important point to note is that ‘we do not know the extent to which governments consulted doctors during epidemics and how far they may have influenced decisions and policies which looks to us as purely pragmatic.’ Therefore, ‘the distinction between exclusive lay belief in contagion and the doctors’ miasmatic theories begins to break down both on closer examination of these treatises and the legislation passed by Italian states to cope with plague.’ Annemarie Kinzelbach has also argued that this duality of reasoning is evident in Southern German towns, and she concludes ‘the coexistence of miasmatic and contagionist perceptions was not restricted to the popular context but existed in the medical world as well.’

The construction of a Milanese health office serves as an example of the exception rather than the rule. Venice was also at the forefront of public health development, though for different reasons due in no small part to the unique topography of the city. Unlike in Milan, a Venetian health office did not take permanent root until the later fifteenth century. The account of the


Provveditori alla Sanità is of a difficult gestation and its development was not linear. Richard Palmer argues a ‘new seriousness’ can be seen in the Venetian reaction to the plague of 1456-7: including a ban on immigration from the Balkans, the appointment of a barber in each sestiere of the city, instructions that the Prior of the lazaretto was to burn all clothing from those who died, the property of plague victims was not to be sold for a year after the owners were infected, and three nobles were appointed to choose a quarantine area outside the city, which paved the way for the Lazaretto Nuovo some twenty years later.\(^{72}\) On 17 April 1464 a decree was issued regarding the plague outbreak beginning with an invocation for God’s help in delivering the city from plague; unceasing prayers were to be recited in convents and religious houses ‘for the deliverance of this our city from the sudden assaults of such a dangerous disease.’\(^{73}\) Further, two ‘suitable and competent citizens not of noble rank’ were to be chosen for each area of the city and for a monthly salary of four ducats and were responsible for monitoring the area and removing the infected to the lazaretto. With the infected taken care of, the officers then had to evacuate the infected house and do everything they could ‘to persuade their inhabitants to leave the city’. To facilitate the evacuation the officers could provide the inhabitants with ‘suitable sums of money.’\(^{74}\)

Responsibility for different facets of plague control fell to various offices in the Venetian administration. However, this allocation was not wholly successful; for example, the Provveditori al Sal could not cope with the additional responsibilities which resulted in abuses of the office. On January 1486 the decision was taken to appoint three noblemen as Provveditori alla Sanità to hold office for one year, which they could not refuse, but they could

\(^{72}\) Palmer, ‘Control of Plague’, pp. 55-6.


\(^{74}\) Ibid., p. 114.
also be elected to other positions within the Venetian government.\textsuperscript{75} The health office was disbanded as the plague of 1486 waned. A combination of much bureaucracy, financial difficulties and the instances of plague in the fifteenth century did not necessitate a permanent appointment. In 1490 a plague threatened Venice once again and it became apparent one official was not sufficient. The Provveditori alla Sanità were reappointed on what was initially a temporary basis but the officers, Luca Pisani, Marco Foscolo and Nicolò Muazzo drew attention to the need for a permanent office that could react quickly to the threat of an epidemic.\textsuperscript{76} Palmer argues that this was largely achieved through others recognizing the value of the work of the health office and to the officers themselves. Thus with the dismissal of staff, which reduced the monthly salaries, the office was established on a permanent basis, upon which it could expand. However, at this point the health office lacked clear lines of responsibility, ‘the fault lay in a lack of guidance from the central governmental organs.’\textsuperscript{77}

The development of the sphere of the health board and the solidification of its jurisdiction over issues related to the maintenance of a healthy state was a gradual process that lay in small victories against the many other offices with rights over the same issues.\textsuperscript{78} Here we see the centralization of health issues through governmental channels, but largely fought for and achieved by the health officials themselves. Another example of this was the controls on the hygienic sale of meats, fish and fruits, with the appointment of Soprastanti. Food regulations were particularly extensive: no animal that died of natural causes could be consumed; if an animal carcass was brought from elsewhere a

\textsuperscript{75} Palmer, ‘Control of Plague’, p. 64.

\textsuperscript{76} Ibid., p. 66.

\textsuperscript{77} Ibid., p. 67.

\textsuperscript{78} Problems in establishing jurisdiction over relevant areas continued throughout the sixteenth century; Palmer cites the disputes between the Health Board and nine different offices in the years 1560-76, p. 226.
certificate from the *Rettore* where it had been slaughtered was required; fish had to be approved by a guild official or a *Soprastante* prior to being put on sale, and had to be alive when sold; the practice of mixing live and dead fish and putting blood on the dead fish to make them seem fresher was repressed.  

A concern over the quality of drugs and pharmacy standards led to *soprastanti alli Spetieri* in 1528. By 1500 the health office had passed legislation on ‘the quality of food and drink, the dangers of industrial fumes, the problems of refuse and sewage disposal, the difficulties of the poor and the problem of begging, the old scourge of leprosy and the new one of syphilis’, notwithstanding incidences of plague.

In Venice years 1522-9, when the city was beset with plagues, famines and wars, brought about a change in attitudes, particularly towards the poor. A concurrent famine led to the poor law of 1529 which the *Provveditori* were to administer. From 1539 the regulation of prostitution fell to the *Provveditori* to govern and came to involve a high level of judicial activity resulting in the collapse of the appeal system in 1575. Control of pharmacy regulations also came under the health board’s remit. In 1563 this extended to controls over street trading in medicine with *Soprastanti* elected to monitor activity, and four years later any drug sold on the street had to be licensed by the College of Physicians with samples held by the Health Office. A *Collegio degli Speziali* was

---

79 Ibid., p. 131.
80 Ibid., p. 71.
81 Ibid., p. 72.
83 Palmer, ‘Control of Plague’, p. 163.
84 Ibid., p. 216.
85 Ibid., p. 219.
86 Ibid., p. 223.
founded in 1565.\(^{87}\) According to Filippo di Vivo in that year seventy-one apothecaries registered their shops at the new College and ‘only four years later the number had risen to eighty-five.’\(^{88}\) Concern with the competency of doctors and surgeons led again to the health board’s involvement in reform in 1545. Anyone who wanted to practise medicine without a degree had to obtain a licence from either the College of Physicians or Surgeons that would be registered with the health office.\(^{89}\) One important change in 1563 was the right to appeal criminal sentences made by the health board, resulting in fewer denunciations by the public which the *Provveditori* relied on.\(^{90}\) The health office often struggled to finance itself. With the exception of some salaries it was expected to exist on the fines it collected, which meant that some workers were not paid regularly; such as an Antonio Polito who in 1544 was owed seven years of wages.\(^{91}\) In 1571 it could not afford basic office supplies, such as candles, wax and ink.\(^{92}\)

Despite these trials the health board was a well-established office with wider social concerns than the monitoring of epidemics. However, during the plague in 1574-7 its authority and credibility were challenged by two Paduan doctors Girolamo Mercuriale and Girolamo Capodivacca, who following Galenic principles refuted the presence of plague, initially at least. This epidemic assaulted the north and south of the Italian peninsula between 1574-7, and will be examined at length in later chapters. In the north the epidemic spread from

---


\(^{88}\) F. di Vivo, ‘Pharmacies as Centres of Communication’, p. 505.


\(^{90}\) Ibid., pp. 227-8. This is unlike Mantua, where in 1575 the accuser of those who contravened orders was not only kept secret but also received one third of the goods confiscated.

\(^{91}\) Ibid., p. 230.

\(^{92}\) Ibid., pp. 228-9.
Trent, to Verona, Mantua, Venice, Brescia and Milan. For the moment it is sufficient to draw attention to the furore in Venice. The escalation in the number of deaths in June 1576 led the Venetian Collegio to summon physicians from Padua including Girolamo Mercuriale, Professor of practical medicine, and his deputy Girolamo Capodivacca. Mercuriale, as an ardent follower and editor of Galen, believed that an epidemic had to affect the majority of people and be fatal to most with corrupt air as the conduit; taking ‘plague’ to mean an epidemic, rather than a disease defined by symptoms. At that point in Venice the number of deaths were 2-4 per day and almost all among the poor which did not fit this framework.

On 10 June 1576 the Paduan deputation, a number of Venetian physicians, the Doge and leading officials took part in a medical debate in the Sala del Maggior Consiglio. The core of Mercuriale and Capodivacca’s argument was that the disease Venice was then suffering from was not ‘true plague’ (vera peste). They convinced the Venetian government of their view and proposed terms in order to treat the sick that were a direct challenge to the established practices of the health board including; a public announcement that Venice did not have plague; no one was to be enclosed in their home or sent to the lazaretto unless a number of people in the household were infected; and the crosses which indicated an infected house were to be removed. Perhaps most worrying of all the Paduan doctors travelled through the city treating and touching the sick; a move that caused concern for the Provveditori alla Sanità in

---

93 Ibid., p. 238.
95 Palmer, ‘Control of Plague’, p. 243 and chaper 9. See also Palmer,’Girolamo Mercuriale’, pp. 54-5.
96 Cohn, Cultures, pp. 162-4 and pp. 178-4 for a detailed discussion on the controversy.
97 Palmer, ‘Control of Plague’, p. 246.
Venice and also for the health board in Padua as they were anxious that the doctors would carry infection back with them. The Venetian health board was sadly vindicated when plague took hold in Venice, with approximately 50000 people perishing in the course of the epidemic. Richard Palmer has described this dispute between the *Provveditori alla Sanità* and the Paduan doctors, as illuminating an ‘unresolved tension between the pragmatic measures of plague control developed by the Italian health boards and the conceptual framework of academic medicine.’

Developments in other areas of the Italian peninsula were less voracious than the Milanese machine or as innovative as the Venetian *lazaretti* model. Scholarship on Florence has revealed a different tenor of public health organisation. In her monograph on fifteenth century Florence, Carmichael used extant death records to argue for mixed epidemics in this period; a point which is often neglected by historians who have focussed on plague cases. Using data from the Dowry Fund, scholars have analysed the demographics of the victims and the mortality trends in the fifteenth and also sixteenth centuries. In the Florentine case John Henderson has remarked that the late sixteenth century was a crucial period of development as in:

‘earlier periods when governments tended to react in a knee-jerk way and the structures created to deal with epidemics tended to fade into the background once the crisis had passed. Instead from the late 16th century each epidemic, whether of plague (the last wave to affect Tuscany was in 1630-3) or outbreaks of various types of fever caused by ‘mal aria’ acted as a catalyst to the development and

---


reinforcement of more stringent measures to clean up the Tuscan environment.'

An additional point of note was the role played by the Fraternity of the Misericordia. Henderson commented that the Fraternity, though subordinate to the health office, was heavily involved in the daily administration of health office work, and ‘indeed what is striking about the measures taken by the Florentine government during epidemics when compared with other city-states is the extent of the involvement of what was, after all, an independent lay corporation.’ Delegation of tasks that came under the public health remit during plague epidemics, particularly for states without such advanced organisations as Milan and Venice, is one important facet of health board development that will be explored below.

Sandra Cavallo has argued that in Piedmont the development of public health structures was contrary to the ‘characterization of the Italian model’ as in the fifteenth century some local authorities used, in a basic fashion, the practices that were enforced in the sixteenth century by central government. As a Magistrato di Sanità for Piedmont was not created until 1576 ‘local experimentation in anti-plague policy thus existed more than a century before central government took any interest in public health questions.’

The late sixteenth century was a period of significant development for the growing public health apparatus in Turin. In the years 1568-88 ‘a body of civic legislation concerning public health, welfare and public order’ emerged, and the Ordini


politici were first published in 1573.\textsuperscript{103} In this period ‘there can be little doubt that they were considerably extended and rationalized.’\textsuperscript{104} The power of the new and largely undefined Magistrato di Sanità for Piedmont was limited to legitimizing local orders and establishing penalties for offenders, only coming into conflict if decisions threatened the interests of the Duke’s ‘subjects more widely.’\textsuperscript{105} Cavallo suggests the main improvement made by the new office was the more extensive monitoring of plague through access to the state diplomatic network, which led to infected areas being banned. She argues that ‘the fact that in the 1570’s and 1580’s the region avoided the plague that broke out with such virulence in other parts of Italy and Savoy must have been due to the activities of the newly created office.’\textsuperscript{106}

Her focus then moves to administrative structures put in place during the next plague to affect Piedmont in 1596-8. Cavallo argues that while the regional surveillance system had obvious merit, the local disinfection and segregation policies, which undoubtedly had a symbolic and ritual role, were more harmful than effective. Quarantine periods are cited as an example of regulations that allowed for a degree of bargaining, as quarantine ‘did not indicate, as one might assume, a strict period of forty days isolation’. Instead it was a period of isolation determined by various factors including ‘the power relations between the parties concerned.’\textsuperscript{107} While on a more public level a period of post-plague quarantine was enforced by the Magistrato upon the city of Turin which the city ‘vehemently opposed’ as it was suffering from the lack of food and other necessities.\textsuperscript{108}

\textsuperscript{103} Ibid., p. 42.
\textsuperscript{104} Ibid., p. 43.
\textsuperscript{105} Ibid., p. 46.
\textsuperscript{106} Ibid., p. 46.
\textsuperscript{107} Ibid., p. 48.
\textsuperscript{108} Ibid., pp. 56-6.
The disparity in designated periods of quarantine in both duration and location, and the symbolic significance attached to it has yet to be thoroughly investigated. As mentioned above the first implementation of a period of segregation in Ragusa in 1377 was a trentine, while the early Milanese regulations stipulated ten days. Variance in designated periods of quarantine was not entirely due to political motives nor down to a system of bargaining, a point we shall return to. Recently Kira Newman has shed light on the use of quarantine in early modern England showing the practical concerns that determined the duration and place of sequestration.109 An assessment of this nature has yet to be carried out in Italy, despite its fundamental role in the diffusion of this practice throughout Europe.

Kristy Bowers describes Cavallo’s arguments as ‘a revised interpretive scheme for assessing public health’, with focus on the psychological aspect of ‘symbolic efforts.’110 Bowers examines the mechanisms set in place in Seville in the closing years of the sixteenth century, arguing that as the city council granted exemptions to their plague legislation this demonstrates ‘their attempt to balance the needs of the community and the individual.’111 Bowers describes the case of a wine merchant from a town in the area north of Seville. In January 1582 Seville’s town council put travel restrictions in place due to an outbreak of plague. After hearing this news Diego di Escobar, from one of the banned towns, sent his cargo of wine to a place just outside Seville, while he went to stay with

---


friends before going to Seville to request permission to enter with a testimony that he had been in a healthy place. Several weeks later he applied to collect his wine. A health office doctor inspected the cargo and it was decanted into barrels from the city and carried by mules also from the city. Diego ‘made a rather complex effort to circumvent official plague restrictions, and was able to do so through his knowledge of the system of quarantines and his acquaintances in other towns who allowed him to visit.’

Therefore, this merchant with local knowledge of the geography, systems of quarantine and the health office provisions enacted during a plague epidemic, could effectively work the system by travelling to a specific area while sending his merchandise elsewhere, in effect a self-quarantine period, in order to avoid excessive penalties. This is one example of the successful petitions made to the town council.

Bowers concludes that the less formalized *ad-hoc* approach adopted in Seville, when taken in the revised context of a broader concept of public health, was more effective than the Italian system as it allowed dialogue between health officers and the people that served to placate conflict between the enforcers and the enforced.  

This is contrasted with an Italian system based on Cipolla’s works that emphasized standing boards of health where civic authorities ‘based their policies on exclusion as much as upon policies of public health.’ Further, she argues:

‘the proximity of small separate states in northern Italy made it both expedient and easy to simply exclude residents from neighbouring cities in times of crisis. While in some cases these city states retained their economic ties, their separate political identities enabled them

\[\text{References}\]

\textsuperscript{112} Ibid., p. 338.

\textsuperscript{113} Interactions between health operatives and the people also occurred and were encouraged in Mantua. For instance, we shall see that Mantovani approached health officials to request permission to travel during epidemics, see below pp. 39-41 and pp. 115-6.

\textsuperscript{114} Ibid., p. 355.
to justifiably exclude outsiders than was the case in other European states."\(^{115}\)

Another contributing factor was the difference in approach between the *ad hoc* board in Seville and Italian cities who created health boards as ‘permanent entities’, and would ‘naturally have been entirely focussed on their task at hand: their power came from their position as public health officers. A strict and uniform enforcement of plague regulations was therefore inevitable.’\(^{116}\) This understanding of how Italian health offices functioned and interacted with each other and with people more broadly, certainly in Mantua, is not accurate and downplays the similarities that can be found in Italian approaches and those from Seville. Bowers’ argument for the efficacy of an approach that balanced individual and communal needs can be fruitfully applied to the Mantuan case.

The establishment of permanent health boards in the Italian-city states prior to the mid-sixteenth century, as current historiography suggests, applies to Milan, Venice and Florence from 1527.\(^{117}\) In Lucca in 1481 an epidemic broke out and the town council appointed a ‘special committee’ again of three citizens for public health affairs which did not become permanent until 1549.\(^{118}\) While in Sicily it was the work and advice of doctor Giovanni Ingrassia during the plague in 1575 which led to the creation of a health board.\(^{119}\) In Naples ‘the kingdom’s public health legislation was woefully piecemeal and ad hoc, dealing with crises as they arose’ and it was not until the plague of 1656 that forced the creation of a *Magistrato della Sanità*.\(^{120}\) It must also be remembered that Milan, Venice and

\(^{115}\) Ibid., p. 355.

\(^{116}\) Ibid., pp. 355-6.


\(^{118}\) Ibid., p. 14.

\(^{119}\) Cohn, *Cultures*, p. 77.

Florence were at the centre of large territorial states. The creation and administration of health boards or offices in subject territories or areas on the periphery remains largely unexamined. Cipolla suggests in towns such as Pavia and Cremona health officials were appointed on an emergency basis and it was the sixteenth century before such positions became permanent. Nevertheless ‘by the last quarter of the fifteenth century’ in cities, towns and smaller villages, the appointment of a health officer during an epidemic was common.\textsuperscript{121}

Counter-plague measures could provide an element of continuity in periods of territorial gain or loss; Brescia came under Venetian control in 1426 yet the Visconti framework remained in place.\textsuperscript{122} Francesco Sforza used them to his advantage after capturing Milan in 1450. Palmer cites the appointment of similar temporary health officials in Bergamo, Verona, Cremona, and Padua.\textsuperscript{123} Rettori were sent from the capital to control subject cities and in the sixteenth century they increasingly had to deal with public health issues, working with the respective health office. The hierarchy was not made clear until 1577 and was forced by the health board of Vicenza. Venice’s resolution strengthened the position of the Rettori, as their authority over the local office was confirmed, causing consternation in the terraferma cities.\textsuperscript{124} However, this raised problems of authority between the Provveditori alla Sanità and the Rettori who were of a higher rank, yet who could potentially develop local loyalties. Palmer describes this situation as ‘a measure of anarchy to the operation of plague control on the mainland for the greater part of the sixteenth century’\textsuperscript{125}, not least as the dynamics at work between the capital and periphery cities and towns were complex.

\begin{footnotesize}
\begin{enumerate}
\item Cipolla, Public Health, p. 17.
\item Palmer, ‘Control of Plague’, pp. 45-6.
\item Ibid., pp. 47-8.
\item Ibid., pp. 167-8.
\item Ibid., p. 170.
\end{enumerate}
\end{footnotesize}
An additional aspect that requires analysis is how health boards interacted with each other. The need for reciprocal information existed between central health boards, those in their subject territories and also from states across the peninsula.\(^{126}\) The use of political conduits for this requires further investigation, particularly as information taken from ambassadors or other unofficial informers’ correspondence was heavily relied upon. Cipolla cites the ‘efficient network of diplomatic representatives and informers’ who supplied Venice with relevant information quickly.\(^{127}\) In 1500 a law was passed requiring anyone who heard of plague outside Venice should report it to the health office. This was followed in 1528 by a ruling which obliged the Rettori of the mainland and overseas territories to report to the Provveditori di Sanità if plague either infected their local area or if they knew of cases elsewhere.\(^{128}\) A relationship of this sort developed between the health boards in the latter sixteenth century, although could be fraught with ‘duplicit and concealment’, and did not replace valuable ambassadorial information.\(^{129}\)

The corpus of measures created by health boards from the post-Black Death period to the early sixteenth-century can be broadly generalized as the use of health passes for people, goods and animals; the removal of infected and suspected people to either lazaretti or temporary huts away from the urban environment; an association with the disease and the poor which meant provisions had to be made during epidemics; trade bans with infected or suspected areas; and the purgation of goods and houses. By the sixteenth and seventeenth centuries attendant social responsibilities had grown such that it has been argued ‘in times of contagion’ health boards had a significant impact.

---


\(^{127}\) Ibid., pp. 47-8.

\(^{128}\) Palmer, ‘Control of Plague’, p. 133.

\(^{129}\) Ibid., p. 159.
on daily life, by banning festivals, processions, and public gatherings of every sort.\textsuperscript{130} An example of this is the reform of the Milanese Health Board implemented by Francesco II Sforza in 1534 that Cipolla calls ‘revolutionary in more ways than one.’\textsuperscript{131} The sole commissioner was replaced by a board of five officials under a senator. Three of the officers had to be administrators elected by the senate from the three main branches of administration while the two other officers had to be physicians elected by the local College of Physicians.\textsuperscript{132} The structural change was accompanied by instructions to meet each week regardless of whether there was an epidemic or not ‘to be in a position to take prompt action whenever necessary.’\textsuperscript{133} Historians such as Cipolla and Carmichael have also emphasized the implementation of severe legislation by health boards against the general populace that grew in power yet became more focused on the sections of society considered to be more susceptible to disease.

One such connection fostered by plague epidemics was that between the disease and the poor. Once an epidemic threatened those who had the means to flee the infected area did so while those who could not suffered economically through trade bans, lack of decent food and poor sanitation.\textsuperscript{134} In Milan this association was made at the end of the fourteenth century, again by Gian Galeazzo who connected care for the plague stricken and the poor.\textsuperscript{135} Albini states from this time ‘the Visconti had resorted to the system of removing the poor and homeless to save the city from the threat of contagion’ which became commonplace in the following century.\textsuperscript{136} While in Florence this connection was

\textsuperscript{130} Cipolla, \textit{Public Health}, p. 29.
\textsuperscript{131} Ibid., p. 21.
\textsuperscript{132} Ibid., pp. 21-22.
\textsuperscript{133} Ibid., p. 33.
\textsuperscript{134} Albini, \textit{Guerra}, pp. 92-3.
\textsuperscript{135} Carmichael, ‘Contagion Theory’, p. 217.
\textsuperscript{136} Albini, \textit{Guerra}, p. 200.
observed again during the minor plagues of the fifteenth century.\textsuperscript{137} Using quantitative records extant for the Florentine epidemic of 1400 Samuel Cohn argues ‘that plague had taken a decisive class bias across the entire city’ and that by the second half of the fifteenth century ‘Milan’s necrologies show indisputably that the plague had become consistently a disease of poverty.’\textsuperscript{138}

Paul Slack describes how this connection ‘necessitated the growth of local administrative machines and an expansion of state power, the invention of “medical police” in fact’, with resultant restrictions on ‘individual liberty’.\textsuperscript{139} However, just as ‘interaction between fear of the poor and fear of plague was a two-way process’\textsuperscript{140}, interactions existed beyond the legislation itself. Health boards enacting contra disease practices were dependent upon civic co-operation and responses were vital to the success of the office, often the onus was placed on individuals to remain vigilant and report suspicious cases and unlike other government bodies without co-operation the effects were likely to be fatal for individuals, their community and the state.

The gradual increase in the scope of the work of the health boards, such as we have seen in Venice, to incorporate other facets of daily life, has led Slack to argue that ‘they stimulated deliberate defensive measures which were socially formative and profoundly controversial at the time, and which have shaped the concepts and practices of “public health” ever since.’\textsuperscript{141} Therefore, as Bowers and Cavallo rightly argue the ritual or symbolic practices which were a significant part of the counter plague processes should be given consideration

\textsuperscript{137} Carmichael, ‘Plague Legislation’, p. 519.
\textsuperscript{138} Cohn,\textit{ Cultures}, pp. 209-211.
\textsuperscript{139} Slack, ‘Responses to Plague’, pp. 433-4.
\textsuperscript{140} Ibid., p. 447.
\textsuperscript{141} Ibid., p. 433.
when analysing administrative and communal responses to epidemic disease, and are essential to a more comprehensive view of public health as a communal objective, which includes the use or appropriation of specific spaces for particular practices designed to achieve that goal.

However, the application and development of measures varied depending on factors including geography, the incidence of epidemics and the structure of the health board or office within existing mechanisms of government. As John Henderson has argued:

‘it is a mistake to assume that there was a simultaneous development of all these features throughout the Italian peninsula. This had much to do with different political systems. For example, a city such as Milan ruled by the despotic regimes of the Visconti and Sforza families developed a lazaretto and health board earlier in the fifteenth century than did republican Florence.’142

Also, as Cohn has argued ‘neither plague nor the ideas it stimulated were static’ over 500 years of outbreaks in Europe.143 Therefore to suggest that plague regulations were uniformly applied by the Italian health boards without considering local or individual needs over simplifies the situation. A more nuanced and local approach is required to understand how these offices operated in both the immediate area under their jurisdiction and on a wider level the interactions with offices from other cities and states.

142 J. Henderson, ‘Historians and Plagues in Pre-Industrial Italy over the “longue durée”’, in History and Philosophy of the Life Sciences, vol. 25, no. 4 (2003), pp. 490-1.

143 Cohn, Cultures, p. 294.
Mantua and Sources

Mantua, situated in the Po valley in northern Italy, is the focus of this thesis. The comparably small Mantuan state was set in the ‘complex and fragmented political landscape’ of the lower Po plain\textsuperscript{144}, within a network of rivers including the Po, Mincio and Oglio that provided a ‘veritable mesh of watery defenses.’\textsuperscript{145} In 1328 the Gonzaga ousted the Bonacolsi family and remained in power until 1707. The Gonzaga not only maintained the independence of their state, but advanced from ‘padani warlords to princes’\textsuperscript{146} through a policy of military condottieri\textsuperscript{147}; marriage strategies by which ‘they enriched their blood with that of some of the greatest Italian and foreign families’ including the Este, Medici, Farnese, Savoy and Brandenburg\textsuperscript{148}; and an ‘impressive information network.’\textsuperscript{149} Cesare Mozzarelli argues that during the rule of Gianfrancesco Gonzaga (1407-44), who first obtained the title Marchese in 1433, we can see ‘the evolution of the Gonzagan dominion and of Mantuan society towards the forms of organisation of the “modern state”.’\textsuperscript{150} Daniela Frigo states that ‘amid the political equilibrium’ of the late fifteenth and early


\textsuperscript{146} Ibid., p. 16.

\textsuperscript{147} C. M. Belfanti, ‘I Gonzaga signori della guerra (1410-1530)’ in La Corte di Mantova, p. 64. Belfanti has termed this as ‘mezzadria della guerra’.


\textsuperscript{149} Carmichael, Plague and Poor, p. 115.

\textsuperscript{150} C. Mozzarelli, ‘Lo stato Gonzaghesco Mantova dal 1382 al 1707’, in Storia d’Italia diretta da G. Galasso, vol XVII, I Ducati padani. Trento e, Trieste, ed. L. Marini, G. Tocci, C. Mozzarelli, A. Stella (Turin, UTET, 1979), pp. 357-495, at p. 360. This gradual social ascent was manifest in and supported by artistic patronage, such as the commission of works by artists including Pisanello, Andrea Mantegna and Giulio Romano.
sixteenth centuries the Gonzaga, and their neighbours the Estensi, played a ‘pivotal role in Italian politics’.\textsuperscript{151} They oscillated between alliances and \textit{condotte} with Milan, Venice, the Papacy and their feudal lord the Holy Roman Emperor.\textsuperscript{152} The military role was somewhat weakened by the 1540’s and the decline of the system of \textit{condotte} led to a reorganization of the governing structures.\textsuperscript{153}

The court was at the heart of the city and government, and gradually evolved from an organization reliant upon the will of the lord into a more institutionalized structure.\textsuperscript{154} As Isabella Lazzarini argues in the late \textit{quattrocento} ‘the government of the Mantuan state seems to have been based on a continuous series of compromises and agreements between the different social and political actors, and structured by a daily and pragmatic flexibility’, presenting a different picture to the ‘ideological clarity’ shown by the Gonzaga in their alterations to the urban fabric in this period’.\textsuperscript{155} Within this somewhat fluid organisation a powerful bureaucracy developed as in the \textit{cinquecento} the language of politics became more closely tied to developing aristocratic culture.\textsuperscript{156} Mozzarelli points to the end of the \textit{quattrocento} and the first decades


\textsuperscript{152} Rodríguez-Salgado, ‘Terracotta and Iron’, pp. 15-34. This article also argues Mantua’s influence in regional politics as well as involvement in an external context, particularly with France, the Holy Roman Empire and Spain, has been underestimated.

\textsuperscript{153} Mozzarelli, \textit{Mantova}, p. 394.

\textsuperscript{154} See Mozzarelli and M. A. Romani, ‘Finanze, istituzioni, corte’ in Mozzarelli et al., \textit{La Corte di Mantova}, pp. 93-104.


\textsuperscript{156} D. Frigo and A Mortari, ‘Nobilità, diplomazia e cerimoniale alla corte di Mantova’ in \textit{La Corte di Mantova}, p. 140.
of the *cinquecento* as the time when ‘modes of representation and legitimacy of the dominant social class mutated.’

Guido Rebecchini cites Giovanni Giacomo Calandra (1478-1543) who became a *castellano* and chancellor, as an example of the way ‘individual skills and personal prestige determined the position a courtier could reach.’ Marzio Romani describes this as a process of professionalization that resulted in a ‘body of bureaucrats’ with regular salaries. It was from this group of men that the health officials were drawn. As we shall see, the official who was closest to a permanent health officer was the *Collaterale*. Depending upon the severity of the epidemic he was aided by other officials. The appointment of these additional participants in times of crisis reflects the process of professionalization described above. During the epidemics of the early sixteenth century the *Collaterale* was joined by courtier-officials, such as Giovanni Giacomo Calandra whom Rebecchini has discussed.

By the plague epidemic in 1576, the temporary health board was an amalgam of the *Collaterale* and some of the highest level officials of the Mantuan administrative structure, which developed in the intervening decades of the sixteenth century. Federico Gonzaga, son of Francesco and Isabella d’Este who spent time in the courts of France and Rome, is credited with making ‘the greatest efforts to haul the Gonzaga up the final rungs of the status ladder towards princely status, and who secured the transition from *condottieri* to princes.’

---


160 Giovanni Giacomo Calandra was involved health office work during two epidemics, in 1506 and 1527. For example his role in health office work is discussed below pp. 75-84 and pp. 85-90.

161 Rodriguez-Salgado, ‘Terracotta and Iron’, p. 34. Federico’s younger brother Ferrante was sent to the Spanish court and developed a relationship with Charles V and was appointed governor of Milan in 1546, see R. Tamalio, ‘Il perfetto capitano nell’immagine letteraria e iconografica di
Federico was betrothed to the eight year old Maria Paleologus, the eldest daughter of the Marquis of Monferrato, and married on his return to Mantua. This was later annulled, but had significant consequences for the Mantuan state. In April 1530 while visiting Mantua Charles V conferred upon Federico his ducal title and the marquisate of Viadana for his son. A condition of this was marriage to Giulia d’Aragona. However, two months later the marquis of Monferrato died leaving an aging childless successor. In a move characteristic of the Gonzaga ambition, Federico repudiated Giulia and renewed his marriage contract to Maria Paleologus, who died just before the contract was completed. Undeterred he obtained permission from Pope Clement VII to marry her sister Margherita. The succession to Monferrato was much contested and it was not until 1536 that Federico became Marchese. Following this acquisition, during the years 1560-70 the Gonzaga engaged in an ‘extremely hard fight’ to bring Monferrato under their rule.

By the end of Federico’s reign in 1540 the oft quoted Venetian ambassador Navagero stated that the court consisted of 800 people which Cardinal Ercole Gonzaga, acting as regent with Duchess Margherita Paleologo, reduced to approximately 350 bocche. They operated a policy of strict control over public finances and also enacted a number of reforms in 1543, and ‘proposed an overall rationalization of the modes of administration and state government.’ When Gugliemo reached maturity he continued to strengthen and streamline the structure of state bureaucracy. Roberto Navarrini has stated

---


164 Ibid., p. 418.

165 Ibid.
‘one can say that under the rule of Guglielmo the Mantuan state reached the highest level of prosperity’, particularly from an economic perspective.\textsuperscript{166} Further, Carlo Marco Belfanti has argued in the mid-sixteenth century ‘when institutional arrangements elsewhere were beginning to loosen up, the duchy of Mantua intensified political centralization and urban society tightened its grip over the countryside.’\textsuperscript{167}

The city of Mantua was the heart of the Gonzagan state. The population of the city and its three borghi of Porto, San Giorgo and Pradella, fluctuated at around 30000 inhabitants in the period covered by this thesis. The chronicler Andrea Schivenoglia gives the figure 26407 for the city in 1463, which was based on a city census from 1462.\textsuperscript{168} Karl Beloch analysed the population figures for the city and borghi, taking into account groups who were not always included, such as the Jewish community and the members of religious houses based in the city. He points out that after the plague in 1528, Mantua was not afflicted by plague as frequently and there was a strong growth in population in the sixteenth century; by 1572 the population was approximately 34000.\textsuperscript{169} The next plague to infect Mantua was in 1576. The Mantuan historian Carlo d’Arco stated 8138 of a population of 42000 died.\textsuperscript{170} However, this perhaps refers to the Mantuan state


\textsuperscript{167} Belfanti, ‘Town and country’, p. 311.


\textsuperscript{170} As quoted in Lodigiani, ‘La peste di San Carlo’, pp.363-4.
as a whole. Beloch demonstrated that the population recovered quickly from this epidemic as by 1580 it had reached 33015 people.\textsuperscript{171}

The main staples of the Mantuan economy were agriculture and the textile industry. As Paul Hare argues from the mid fifteenth century Lodovico Gonzaga fostered and encouraged the textile industry, particularly silk manufacturing, in Mantua.\textsuperscript{172} Belfanti argues that this industry reached its height in the mid-sixteenth century and that the plague of 1576 followed by a famine in 1590-2 contributed to the demise of textile production in Mantua.\textsuperscript{173} He states that the measures enacted by the health office in 1576 that restricted production and trade, particularly of textiles, had a severe economic impact and also posed a number of difficult social problems as many of the workers were left without a livelihood.\textsuperscript{174} As mentioned above the link between plague and the poor, not solely as victims of disease but as victims of the economic constraints, was established in the fifteenth century. This facet of public health will be discussed below.\textsuperscript{175}

It is in this political and social context that officials tasked with managing plague epidemics functioned. However, analyses of the Mantuan approach to plague and public health are scant.\textsuperscript{176} For the fifteenth century, the application

\begin{footnotesize}
\begin{enumerate}
\item Beloch, \textit{Storia della popolazione}, p. 377.
\item C. M. Belfanti, ‘Il problema della povertà’, p. 129.
\item See below, pp. 165-8 and 179-82.
\item There are studies that examine other aspects of public health more broadly. Such as the network of hospitals in the city, see R. Navarrini and C. M. Belfanti, ‘Problema della Povertà nel
\end{enumerate}
\end{footnotesize}
of counter plague measures in Mantua has been compared with Milan as both were governed by dominant families, with the exception of the brief Ambrosian Republic. However, the construction of a health office was rather different. Initially the growth of the health office in Mantua followed a similar trajectory to that of Milan. Roberto Navarrini, in examining the origins and development of the Ufficio delle Bollette argues that by the 1450’s the office had effectively become a health office. As plague epidemics threatened Mantua it was the bureaucratic arm of government most apt to carry out the task, as it already monitored population movement and the movement of foreigners. In 1451 an anonymous Mantuan chronicle reported that ‘the plague was in Mantua, Milan and many other places.’ According to Alfonso Corradi, Venice became infected in June of 1447 and was followed the next year by Milan, Lodi, Piacenza, Rome and Florence. In that year plague also struck Verona, Cremona and Como and Giuliana Albini adds Crema, Modena and Padua to the list of infected cities. In Mantua on March 1451 it was decreed that:

> ‘every day at evening, the Cavi de Campagna must present written notice of the sick in their district to the Ufficiale de la bolete, and

Ducato di Mantova: aspetti institutional e problemi sociali (secoli XIV-XVI)’ in Timore e Carità i Poveri nell’Italia Moderna, eds. G. Politi, M. Rosa and F. della Peruta (Cremona, 1982), pp. 121-8. See also the sections ‘La medicina a corte’ pp. 291-351, and ‘Temi medici vari’ pp. 355-421, in Mantova e i Gonzaga nella civiltà del rinascimento, for a range of useful articles, including the Mantuan pharmacopeia and descriptions of some of the people practicing medicine in Mantua and their works. However, these subjects have been treated separately and much work is yet to be done.

177 G. Malacarne, I Gonzaga di Mantova; una stripe per una capitale europea (Modena, 2004), p. 367.


180 Albini, Guerra, pp. 41-2 and p. 51.
insofar as it is known, of what cause the person suffers, and what needs each sick person may have for provisions.”

A *grida*, or proclamation, from July 1451, and quoted by Navarrini, provides further details: illness had to be reported to the local official, the *Capo di contrada*, after which a doctor would visit and give a diagnosis; if it was contagion or suspected plague (*malattia sospetta*) the patient was sent to a *lazaretto* to be looked after, and could be accompanied by someone (*familiare*) if the patient so wished. However, if the denunciation was not made in that way the entire family was sent to the *lazaretto*. As a result of the increase in responsibility the office lost its autonomy and passed under the authority of the *Collaterale*, who was essentially a military officer with close ties to the current Gonzaga Marchese or later Duke. An additional motivation for transferring the responsibility to the *Collaterale* can be found during this epidemic. A Matteo da Vicenza was placed in charge during this plague and his rule caused problems in the city that led to a brief disturbance. Matteo was described in a later chronicle by Federigo Amadei as ‘a miserly man by nature, who used terrible harassments and cruelties against the lives and goods of the relations of the dead.’ Thereafter the *Collaterale*, a Mantuan, was given this position.

181 Carmichael, *Plague and Poor*, p. 115.


183 R. Navarrini, ‘L’officio delle bollette e il controllo sanitario a Mantova nei secoli XV-XVII’ in *Civiltà Mantovana*, vol. 5 (1984), pp. 14-5. A succinct definition given in a survey of the structure of the Mantuan state describes the *collaterale* as being assigned to the military affairs of the duchy, providing for the maintenance of troops and taking care of the fortifications. From the mid-fifteenth century he acquired the work of the office of bulletins, and additional duties included ‘health police’ (*polizia sanitaria*), responsibility for cleaning the streets, the maintenance of drains and sewers to prevent the air becoming infected and to protect the city from plague. In addition, he had to check the movement of people, be vigilant of the activities of people like mountbanks, and oversee taverns, hostelries, and vagabonds. In *Le istituzioni storiche del territorio lombardo. XIV-XIX secolo*, Progetto CIVITA Mantova, Regione Lombardia, G. Cobelli (Milan, 1999).

Collaterale remained a central official during epidemics and will be discussed in greater detail in later chapters.

Studies of the effects of plague in the sixteenth century are also sparse. The epidemic in 1576 has been discussed by Mario Lodigiani who examined aspects of the social restrictions the health office enacted in response to the disease and the temporary lazaretto. Enrico Ghidoni has written an article on the effects this epidemic had on postal networks and the delivery of correspondence to and from the Gonzagan state. He argues that Duke Guglielmo Gonzaga used the neighbouring Marquisate of Mirandola as an intermediary point to receive and send important letters, such as correspondence relating to diplomatic concerns. An attendant point related to postal networks is the movement of the Gonzaga family during epidemics. While the Gonzagas developed a more bureaucratic state, the nature of much of the surviving documentation used, the correspondence of health officials, makes it hard to judge the personal involvement of the Gonzagas, and even to know where they were within the state at given moments, on in a neighbouring state. Belfanti has shed light on the demographic and economic effects of this epidemic, arguing that it was particularly devastating as many of the victims were young adults. Yet, many gaps remain; for instance the plagues of the early sixteenth century have yet to receive scholarly attention. No study to date has examined the Mantuan response to recurrent plagues by analysing the core officials involved, and how their responses changed or adapted over time.

---

185 Lodigiani, ‘La peste di San Carlo’ in Mantova e i Gonzaga, pp. 363-73.
187 Belfanti, ‘Mantova e la peste del 1575-76’, pp. 57-68.
This study is based on extensive archival research and examines a series of plagues that infected Mantua in 1463, 1468, 1506, 1527-8 and 1576. The Gonzaga archive in the Mantuan Archivio di Stato is a treasure trove for historians of a variety of disciplines. The unpublished correspondence of health officials or rather officials with some responsibility for health matters during plague epidemics forms the basis for this thesis. Other analyses of health board activities and actions are often based on what may be termed retrospective sources. For instance, Alessandro Pastore has used criminal cases in his discussion on seventeenth century plague in Bologna. Giulia Calvi’s fascinating study on the Florentine Public Health Magistracy during the plague in 1630-1 incorporates a variety of sources such as the official record compiled by the Ducal librarian Francesco Rondinelli, criminal trials and canonisation documents for a plague saint. Cohn has used literature including plague tracts and poetry to examine the plague epidemic in 1575-7: the successi della peste and the plague tract by doctor Ingrassia are perhaps closest to giving a day by day discussion and analysis of events during an epidemic. Each of these sources have particular challenges: trial transcripts present the extreme end of the punishment spectrum; canonisation narratives may distort the input of more earthly interventions; doctors’ plague tracts began to address broader public health questions in the late sixteenth century therefore, they are of limited use before that time; printed proclamations and bandi give a rigid idea of plague regulations; and chronicles give a limited interpretation of an epidemic. The letters under discussion here are not systematic sources and we must be mindful of their purpose; for instance, they are unlike the materials from the Venetian health office archives used by Richard Palmer and Jane Stevens Crawshaw. The

190 Cohn, Cultures, in particular see the chapter on successi pp. 95-139.
191 Ibid., p. 239.
192 See also Venezia e la peste, Comune di Venezia Assessorato alla cultura e belle arti (Venice, 1979), for a range of documents produced by the Venetian health office.
Mantuan correspondence analysed in this study was not generated specifically as a consequence of the plague epidemics, rather the information they contain about plague is part of the broader bureaucratic communication network. Nonetheless the letters provide a unique, contemporary viewpoint of events as they unravelled and reveal the daily concerns, struggles and issues caused by the impact of an epidemic upon a society. They give a wealth of information from those employed to implement procedures and about their responsibilities and activities; from monitoring suspected or infected people, provision of doctors and surgeons to administer to the sick, the creation of lazaretti areas, purgation of infected goods and homes to the organisation of processions, as well as conflicts which arose with the people subject to them.

In conjunction with the unpublished correspondence there are several chronicle reports of varying length and detail. The city’s necrologies are extant from 1496 but are incomplete; however, records survive for the plague years 1527-8 and for part of 1575-6. For the late sixteenth century epidemic we have additional documentation produced by health officials including printed and hand-written proclamations, orders issued by other local health boards retained by the Mantuans, and an extensive list of public health measures employed in the crisis, that permits a comparative analysis of regulations and methods. Ambassadorial correspondence has also been fruitful in shedding light upon the spread of disease, and the relationships between infected and healthy areas in 1576. Plague periods saw an increase in the volume of correspondence compared to non-epidemic periods. As Kinzelbach has noted in sixteenth century Germany ‘the town authorities initiated and promoted text production by publishing or recalling regulations, by justifying measures, by asking for advice and by corresponding with other towns or territories.’

---


increase not only in health office correspondence but in varieties of documentation was during the epidemic in 1574-7.

Health officials were required to implement concrete frameworks of governance and practices to deal principally with a disease which challenged medical classification, while increasingly absorbing wider social responsibilities as notions of public health developed. An analysis of the Mantuan health office’s actions and reactions will show it does not fit neatly with the health board counter-plague model historians including Carlo Cipolla have established, albeit patchily, elsewhere in northern and central Italy. I will argue that while the hallmarks of the ‘Italian system’ of public health procedures are evident, closer analysis of their organisation and composition show they were defined by the incidence and severity of outbreaks, but above all were dependent and defined by the evolving state apparatus and by participation of the wider community, both lay and ecclesiastic. Further, it will be argued that by examining in detail symbolic acts, such as processions, in conjunction with practical methods we see with greater clarity how civic and ecclesiastic authorities worked together with the participation of the wider community in the attempt to restore the city to good health. With this in mind we now return to Mantua to analyse the development of a public health strategy directed toward governing plague epidemics. Central to this were the administrative officials and we begin by examining their role during plague periods.
2. *Il Collaterale, 1463-1528*

Following the mid-fifteenth century epidemic responsibility for dealing with plague outbreaks was assigned to the *Collaterale* and his office. This chapter examines the initial period of what may be described as a fledgling health office. It will be argued that the basic job of the *Collaterale* did not substantively change from the late fifteenth and early to mid-sixteenth centuries, despite a series of plagues. The *Collaterale* was involved with monitoring disease in the city and state, issuing travel licences and in creating and constructing plague hospitals. However, the position he held within a developing and still fluid ‘health office’ structure began to change in the early sixteenth century. By examining the composition of those involved with health office work during epidemics and the duties they performed we shall see that the *Collaterale* became part of a group of officials, often with higher positions in the court bureaucracy.

The epidemics under discussion in this chapter can be considered as relatively minor outbreaks. Carmichael has argued that ‘neither the fine set of Gonzaga family letters preserved from the early fifteenth century, nor the record of public proclamations, nor the chroniclers writing of these years in the city, speak of any plague of significance.’ This may be true in terms of mortality rates when compared with those of larger cities or later epidemics in the sixteenth-century. These outbreaks did, however, have an impact on the city and state and warrant serious consideration, particularly when exploring the argument put forward by Carmichael and by Paul Slack, that minor epidemics allowed for the development of innovative processes. Slack’s argument comes primarily from sixteenth-century England where officials ‘stayed in greater numbers in minor epidemics than in major ones, and they observed the progress’

---

1 Plague hospitals or *lazaretti* are examined in chapter 6.

of plague more closely and fought it more tenaciously then Mantua does not follow this analysis; rather, the opposite development occurred. Finally, this chapter challenges the notion that autocratic states enacted arbitrary legislation to control plague. For instance, in 1506 a convocation involving a variety of officials, doctors and citizens discussed the disease then present in Mantua and the provisions to be made; as a result recommendations from citizens were implemented.

**Il Collaterale Carlo Agnelli, 1463 and 1468**

In the second half of the *quattrocento* Carlo Agnelli was the *Collaterale* during plagues in 1463 and 1468. An overview of these two epidemics will be useful before examining Agnelli’s letters and his work. According to Corradi the first outbreak began in 1462 when Assisi was ‘afflicted by a most fierce pestilence’ that killed a great number of people without regard for sex, age, or condition that the city and surrounding towns were almost empty of inhabitants. Correspondence directed to the *Marchesa* of Mantua, Barbara of Brandenberg, cited by Corradi, reported that Recanati, Pienza, Siena, Viterbo and Orvieto were also infected. He also gives an example from Gubbio, where on 24 August pestilence began ‘through a contagious woman from Venice’, who recovered in the hospital. In 1463 reports of plague in close proximity to the Mantuan periphery began in June and July. A letter from Sermide situated close to the border with Ferrara reported plague there on 19 June and commented on

---


the need to guard the Mantuan border against it.\textsuperscript{7} Later, on 5 August a short addendum relayed that Sermide was then in good health.\textsuperscript{8} On 23 August, Mantua was informed that plague still raged in Ferrara.\textsuperscript{9} The \textit{Diario Ferrarese} states that in 1463 ‘there was a very great death (\textit{moria}) in Ferrara of the kind that killed around 14000 people.’\textsuperscript{10} The entry for the following year mentions people who had fled from the plague in the previous year returned to Ferrara.\textsuperscript{11}

According to the \textit{Cronaca di Mantova} the plague was carried from Ferrara to Mantua by the Jews.\textsuperscript{12} Ferrara was implicated as the source of infection in several letters sent from officials in the areas of the contado near the Ferrarese border. The disease was described as ‘the disease of Ferrara’\textsuperscript{13} before reaching Mantua and after the infection arrived as ‘the plague of Ferrara.’\textsuperscript{14} The \textit{Cronaca universale della città di Mantova} offers additional details. The wedding of Federigo Gonzaga to Margarita of Baviera was delayed because ‘a contagious epidemic’ appeared among the Jews and was brought by a Jew from Ferrara where that disease was spreading.\textsuperscript{15} Meanwhile in Mantua avaricious boatmen and coachmen charged exorbitant prices to carry people and their goods from the city.\textsuperscript{16} The price of goods rose dramatically and in the \textit{Cronaca universale}

\begin{footnotesize}
\begin{enumerate}
\item Archivio di Stato di Mantova (hereafter ASMn.), Archivio Gonzaga (hereafter AG.), \textit{busta}. 2400, \textit{carta}. 379.
\item ASMn., b. 2400, c. 386.
\item ASMn., b. 2400, c. 391.
\item \textit{Diario Ferrarese}, p. 45.
\item \textit{Cronaca di Mantova} p. 32.
\item ASMn., b. 2400, c. 155. ‘il morbo di Ferrara’.
\item ASMn., b. 2400, c. 288. ‘la peste de Ferrara’.
\item Ibid.
\end{enumerate}
\end{footnotesize}
Amadei commented that even in his contemporary economic context the prices were exorbitant.\textsuperscript{17}

In the \textit{Cronaca di Mantova} Andrea Schivenoglia recounted that because plague was present on 20 October 1463 a proclamation was made giving citizens ten days to leave the city. People fled to the countryside by foot, horse or boat, though certain areas of the \textit{contado} were restricted as the Marchese Ludovico Gonzaga reserved them for his court and family.\textsuperscript{18} There were 26407 people in the city and by 24 November this number had dropped to 2890. The figure of 26407 people in the city was taken from the census of 1462. How the number of 2890 was reached is not made clear. These figures serve to highlight the dislocation of a large number of people rather than indicating plague mortality. Once the ten days had passed, according to Schivenoglia, no one could leave or enter the city, and the remaining citizens ‘felt great melancholy.’\textsuperscript{19} Inside the city Carlo Agnelli ‘had responsibility for all the land and everything he said and ordered was done.’\textsuperscript{20} Not until 1464 did the city gates reopen and people returned to the city as before.\textsuperscript{21} Mantua was struck by plague again in 1468, as were Cremona, Florence, Genoa and Milan.\textsuperscript{22} It began in April in the house of a blacksmith in the \textit{Pescaria Vecchia} area of the city and quickly spread to other houses. Carlo Agnelli was once more placed in charge of the city and more specifically charged with supervising the infected.\textsuperscript{23} The \textit{Cronaca universale}

\footnotesize
\begin{itemize}
\item \textsuperscript{17} Ibid. A living pig cost 30 \textit{soldi} causing Amadei to comment ‘this was an excess, if we calculate the monetary value in those days’.
\item \textsuperscript{18} \textit{Cronaca di Mantova}, pp. 32-3: namely Ostia, Revero, Quistello, Gonzaga, Borgoforte, Governolo and all the Seraglio, Marmirolo, Goito, Cavriana and Marchana.
\item \textsuperscript{19} Ibid., p. 33.
\item \textsuperscript{20} Ibid., p. 33.
\item \textsuperscript{21} \textit{Cronaca universale}, vol. 2, p. 138.
\item \textsuperscript{23} \textit{Cronaca di Mantova}, p. 36.
\end{itemize}
describes it as a short epidemic and by the next August the people could return to Mantua.\textsuperscript{24}

The overview of Mantuan chronicle reports and the brief selection of details given in Corradi, indicates that plague was a persistent threat that could strike at varying points of the year. In both 1451 and 1468 the outbreaks struck in the spring and peaked during summer, while in 1463 plague was officially recorded as beginning in autumn and was at its most virulent towards the end of the year rather than in summer. This is amplified by the reports of plague cases in smaller towns and villages found in the correspondence that are not included in the broader chronologies of epidemics. A letter from Quistello, in the south east of the state, dated 10 September 1463, relayed the information that plague had spread to more houses in Carpi, a town south of Quistello outside the Mantuan territory.\textsuperscript{25} On 23 October, again from Quistello, it was reported that four people in Carpi had died of plague, while the authorities were undecided over a fifth death.\textsuperscript{26} On 28 October another report of plague in Cremona was sent from Revere.\textsuperscript{27} In the summer months as the confirmed instances of plague moved towards its borders Mantua was on the alert for the arrival of the disease within the \textit{contado} from August at the very least if not before; as demonstrated in a letter from Revere which relates the suspicion of a plague case on 8 July.\textsuperscript{28} Unfortunately the outcome is not elaborated upon.

During these epidemics Carlo Agnelli was the \textit{Collaterale} and his letters were addressed to \textit{Il Collaterale generale per la peste}, an additional appellation

\textsuperscript{24} \textit{Cronaca universale}, Vol. 2, p. 154.
\textsuperscript{25} ASMn., b. 2400, c. 38.
\textsuperscript{26} ASMn., b. 2400, c. 43.
\textsuperscript{27} ASMn., b. 2400, c. 222.
\textsuperscript{28} ASMn., b. 2400, c. 205.
that does not appear in the sixteenth century. His correspondence forms the basis for analysis of these plagues. However, on a cautionary note we must bear in mind their purpose and limitations and what this reveals about the focus of his work. Agnelli corresponded almost daily with the Marchese Ludovico Gonzaga and also with the Marchesa Barbara of Brandenberg. The information in the letters to the Marchesa is marginally different to those sent to Ludovico. As Paul Hare has recently argued Barbara ‘played a crucial role in the government and cultural life of Mantua’, and the thousands of extant letters in the Gonzaga archive are testament to her multifaceted role from the organisation of the Papal congress in 1459, to details of architectural and building works in the city, matters of state, and ‘involvement in the affairs of government and court’, which the letters exchanged dealing with plague fall under.  

Agnelli’s letters are another example of the role the Marchesa played in running the Mantuan state.

Despite the crisis facing the city, in the course of the epidemic Barbara also brought other matters to Agnelli’s attention; including domestic matters such as the whereabouts of the keys for the room of the falcons and the room of the dogs. On 30 October, Agnelli commented that ‘it seems the keys for the dogs’ room and the falcons’ room have not been found.’ The mystery continued as Barbara told him a Maestro Giovanni dai Cofani had the keys, but Giovanni arrived in Mantua the following day and said he did not have them. Although the search for the whereabouts of the keys was not a major problem and was swiftly dealt with, it serves as an example of the nature of Agnelli’s position. During the epidemic in May 1468, Agnelli reported that a piece of the wall at the

---

29 Hare, ‘The Literary Patronage of Ludovico Gonzaga’ see pp. 34-9 for an overview of recent scholarship on Barbara.

30 ASMn., b. 2398, cc. 342 and 350.

31 ASMn., b. 2398, c. 342. ‘La chiave dela camera dai cani et quella dai falchoni pare non si trovano.’

32 ASMn., b. 2398, c. 345.
Borgo de Porto, above the gate, had fallen down and he sent an officer to investigate. On 24 June after stating that ‘the land thank God is starting to get better’ he reported the nose had fallen off a statue of Virgil and broken into three pieces, adding he would get it fixed. Soon thereafter he wrote about sending various types of fruit to the Marchese, sometimes offering an opinion on the quality of the produce, and where it came from. On 24 July he sent two melons from a farm in Ferrara (de la somenza da Ferrara) and seven figs from Columbara, an agricultural area located to the south of the city. Three days later he sent sixteen figs adding that there were no melons from Columbara, but he would send them when they arrived. On 8 August he sent two melons ‘of those from Columbara’ and one from the farm at Ferrara. The following day he sent another two melons from Columbara. Later that month on 22 August he sent three melons for lunch the following day and also a box of moscatello grapes. On 24 August he sent five melons, which he believed were good, while two days later he sent two melons, one of which was good. Perhaps a reflection on seasonal change, on 1 September he sent fifteen very beautiful pears. On 4 September he sent thirty-six of the most beautiful peaches he could find, and on 9 September he sent a box of prunes and thirteen peaches.

33 ASMn., b. 2410, c. 248.
34 ASMn., b. 2410, c. 448. ‘La terra, deo gratia, succede in ben stare.’
35 ASMn., b. 2410, c. 292.
36 ASMn., b. 2410, c. 298.
37 ASMn., b. 2410, c. 464.
38 ASMn., b. 2410, c. 465.
39 ASMn., b. 2410, c. 476.
40 ASMn., b. 2410, c. 477.
41 ASMn., b. 2410, c. 478.
42 ASMn., b. 2410, c. 483.
43 ASMn., b. 2410, c. 487.
44 ASMn., b. 2410, c. 494.
As these examples suggest Agnelli was not exclusively concerned with the plague. His letters serve to elucidate his versatile role as Collaterale and as a consequence reveal their limitations as a source for public health development: they are not sophisticated discussions or theoretical explanations about the mechanisms of the disease or of any counter plague measure. However, they go some way to challenge a particular view of Italian health offices and their practices, as described recently by Kristy Bowers.\(^{45}\) In the late quattrocento at least the Collaterale also acted as a court functionary, and could not be described as operating a focused and dedicated health office. Further, we shall see that this type of miscellaneous information, not strictly tied to reporting plague controls, varied in later epidemics. The evidence presented thus far does not support the view that during minor epidemics strategies were improved upon by health officers who stayed on the front line.

Returning to the epidemic in October 1463, Schivenoglia suggests that once the ten day period allowing people to leave ended the city was effectively closed; however, the city gates were not as firmly shut as Schivenoglia indicated. The movement of large numbers of people and the potential problems resulting from it drew comment from Agnelli. On 22 October he remarked on ‘the emptying of people from this city’, and that ‘the poor remain inside and the rich having left, are absolved and as a consequence one cannot provide what is needed.’\(^{46}\) The lack of access to resources for poor relief is also an interesting insight into the state of civic or lay mechanisms for aiding the poor; indicating an absence of these structures, or at least of their centralisation, under the authority of the health office.


\(^{46}\) ASMn., b. 2398, c. 324. ‘...el vacuare de le persone de questa terra'; ‘li poveri rimaneno dentro e li richi absentati seriano absolti e per conseguenze non se poteva supplire ali bisogni.’
Nonetheless, on 24 October in a brief three lines reporting two plague cases, Agnelli commented that one house belonging to a trumpeter named Pietro was close to his own home. On the same day in a longer missive, he asked to move his own seemingly large family to Castelluccio, to the west of the city, adding ‘I will force myself to send them away before the end of the proclamation.’47 One who missed the deadline for leaving the city was a Giovanni di Boetto, an official of the table. He was working at Borgoforte, a Gonzaga refuge from the plague to the south of the city on the Po River, and being so busy with his job had forgotten to send his family to his home in Luzzara as he had intended. Agnelli asked Barbara of Brandenberg if Giovanni could be accommodated.48 By the 26 October Agnelli commented that ‘your city is very empty’ and almost all the officials had left.49 The subsequent outpouring of people from Mantua into the contado was problematic. On 31 October an official, Girolamo di Suardo, requested that Agnelli stop giving licences to people who wanted to go to stay in Reverie, because many had already arrived and the castello and borgo were full.50

Not everyone who left the city did so of their own accord. Part of Agnelli’s job was recognising and removing plague cases from the island of the city and he identified several families of muleteers (mulatieri) living near the torre nuova as a source of infection. On 24 October Agnelli wrote to inform both Ludovico and Barbara that after the deaths of two women and two children he intended to purge the families from the city51, and hoped to move them out the

47 ASMn., b. 2398, cc. 326 and 327. ‘Sforzaròme mandarla fora fra li termine de la crida.’
48 ASMn., b. 2398, c.349.
49 ASMn., b. 2398, c. 330. ‘Questa vostra citadella molto si vacuata’.
50 ASMn., b. 2400, c. 223.
51 ASMn., b. 2398, c. 327. The Torre nuova refers to the Bell Tower then under construction.
following day.\textsuperscript{52} By 26 October, he had them removed, again described as ‘purged’, along with several others he suspected; despite this, he allowed a shoemaker from Sancto Vicolo to remain in the city, as he doubted he was infected.\textsuperscript{53}

However, entry or re-entry into the city was not impossible. On 31 October Agnelli reported the case of Rosso di Berenino. He had been given a licence by Agnelli to take his family to Viadana on the south west edge of the state: it is not clear if he had a property there. Upon reaching Viadana Rosso was refused entry, chased off and then retreated east to the vicarate of San Benedetto on the Po River, but was chased away again. He returned to Mantua sad (\textit{dollendose}) and crying in distress. Agnelli stated that he felt compassion for Rosso and as no one was ill in his home in the city, near San Michele, and the places Rosso had been were not known to have been infected, Agnelli allowed him back in to Mantua.\textsuperscript{54}

The following month on 29 November Agnelli wrote about a number of requests made by citizens including a Jacomo di Valenti to come into Mantua to collect wheat (\textit{biade}). He concluded that citizens who wanted to collect wheat for their own use could come into Mantua to retrieve it; though with a licence and depending upon where they were resident and where their goods were held in the city. They would be told to take enough for around three months in order to avoid too much mixing (\textit{praticare}) in the wider state. Agnelli then set out a plan for the better-off citizens, the ‘citadini grossi’, who had wheat to sell: they could collect it and then sell it at three points on the edge of the city, the Borgo di Porto, the Cereso gate and beside the Predella. He added that ‘this seems to

\textsuperscript{52} ASMn., b. 2398, c. 328.

\textsuperscript{53} ASMn., b. 2398, c. 330.

\textsuperscript{54} ASMn., b. 2398, c. 344.
me to be the healthier way to avoid too much mixing.’

Therefore, Agnelli considered the requests and sought a solution that was beneficial for both those with grain and for those who had need of it, without damaging the health of the city.

Likewise, in the 1468 plague restrictions on movement were not passively accepted by the communities subject to them; for instance, Agnelli received a request from a citizen to move out of the city as there had been a plague death near his home. Occasionally Agnelli had to act as an intermediary between citizens and the Marchese Ludovico. On 9 June 1468 Agnelli reported that all was well in the city and then relayed a request from some citizens, mostly artisans or craftsmen (artigiani) with vines or small areas of land to tend in the walled area to the south of the city named the Seraglio, for permission to leave the city and check the state of things there. On another occasion Agnelli passed on more requests from ‘many citizens’ outside the city who wanted licences to enter Mantua to care for the infirm; he awaited Ludovico’s decision on the matters. Thus there was the possibility for dialogue between citizens and Agnelli, who in cases where he did not have authority would mediate between the Marchese and those making the requests. In short, the Collaterale had some flexibility in allowing movement to and from the city during plague epidemics, though, in certain cases he deferred to the Marchese.

Events in the castello of Revere in the contado provide a stark contrast to the approach taken by Agnelli. A series of letters from the citizens and men of Revere present and discuss a series of problems related to the request for more

---

55 ASMn., b. 2398, c. 421. ‘Questa me pareria via più salubre per schivare troppo unione’.
56 ASMn., b. 2410, c. 146.
57 ASMn., b. 2410, c. 439.
58 ASMn., b. 2410, c. 474.
medical personnel in early November 1463. On 16 November the people of the commune wrote both to defend themselves and to state their case for more medical help. They referred to themselves as ‘your citizens and contadini now living here in Revere’, affirming their loyalty to the Marchese as they were concerned that the Vicario had given Ludovico a poor impression of them before raising the issue of the need for medical help and pizzamorti to bury the dead. The Vicario, without knowledge of or any consultation with the citizens and contadini appointed a Maestro Giovanni, a barber and son of Stefano di Subieti who had died, however, the commune wanted a ‘doctor of medicine.’ On 21 November, after receiving a response from Ludovico again they reiterated that the problem was not that they did not want to be governed by him, rather Giovanni di Subieti was not good enough. They described him as an ‘empiric and a barber’, who in the two years he had been in the community among them had never made a praiseworthy cure. On 30 November the residents had found two other doctors who they thought were worthy of employment as ‘they had made many good cures in the area which Maestro Giovanni has never done.’ In the midst of an epidemic the inhabitants of Revere demanded a medical professional of a particular standard, rejected a candidate based on their previous performance and engaged in a proactive search for a replacement. This example provides an alternative view of the desperate search for a community plague doctor given by Cipolla, where the doctor was able to direct the negotiations.

59 ASMn., b. 2400, c. 157. ‘..vostri citadini e contadini al presente habitanti qui in Revere.’


61 ASMn., b. 2400, c. 159. ‘hanno facto di belle cure in questo paese, cosa che non fece mai dicto Maestro Giovanni.’

62 Isabella Lazzarini discusses a similar case in the community of Ostiglia. During a plague in 1466 they were involved in correspondence with the Marchese regarding the payment of a plague
The following month the situation had worsened for the residents of the castello of Revere. They wrote to Ludovico Gonzaga on 15 December stating that thirty-three days previously the bridge had been lifted and no one could leave. It had been thirty-three days since the last death and despite the fact no one had died of plague, the Vicario was determined to keep them enclosed for the full forty days. In the opinion of the majority the last death on the 20 November, that of a servant of a Rossino, was not plague as she had been ill for ten days, which effectively ruled it out. The residents were quite certain that no one within the castello was ill, and it was to their detriment that they were being held there. A separate letter from 11 November demonstrates the caution with which they approached cases of illness: it had been reported on the previous Saturday the daughter of a Giovanni da Carpi died inside the castello, though her father affirmed she did not die of the sign, but of worms. As a precaution the family were moved to a remote place for some days. In terms of the city as a whole the porous and flexible attitude to entry shown and practiced by Agnelli was arguably more successful than the rigid policy implemented by the Vicario in Revere.

As Agnelli had responsibility for allowing people in and out of the city during epidemics, it was crucial that he was aware of illnesses present in the city and where they occurred. We have seen how some of these decisions were reached, such as the case of the mulatieri. However, an idea of how cases of

doctor; the Marchese expected them to pay for the doctor and they disagreed. See I. Lazzarini, “Cives vel subditi”: modelli principeschi e linguaggio dei sudditi nei carteggi interni (Mantova, XV secolo) in Linguaggi politici nell’Italia del Rinascimento atti del convegno, Pisa, 9-11 novembre 2006, eds. A Gamberini and G. Petralia (Rome, 2007), p.107. I thank Professor Lazzarini for discussing this with me and for kindly providing me with a copy of the article.

ASMn., b. 2400, c. 159.

ASMn., b. 2400, c. 232.
plague or suspected plague were identified and monitored is useful. A set of criteria was applied to determine if an individual or group was infected or at risk. Identifying plague victims could happen in several ways and be carried out by various people including doctors, barber surgeons, pizzamorti, by Carlo himself and occasionally in questionable cases he relied upon the opinion of neighbours. On 17 November 1463 a fourteen year old girl had died after an illness of eight days, which was at the upper end of the duration of time for a plague death. The neighbours testified that the girl had had a severe pain in her ear, which had troubled her previously. She had gone to bed, awoke with a fever, and then died as a result. Agnelli commented that these neighbours had very clearly demonstrated that she had not died of plague, and this was sufficient to convince him.  

The pizzamorti also played an important role and their evidence was cited frequently. The origins of the Mantuan pizzamorti are somewhat unclear: were they active in the previous epidemic, or as plague was prevalent in the peninsula, did they travel from one area to another, or were they simply told by the health officials what to look for? Richelle Munkhoff has explored the role of women who she defines as ‘searchers’ in early modern London. These women identified plague cases and other deaths and thus contributed to the information printed on the bills of the dead, an important source for demographic and medical historians. She has fruitfully shown how these women, occupying a marginal social status, defined and participated in this important work.  

Jane Stevens Crawshaw has examined pizzamorti in Venice through literary interpretations of carnival and of their association with wild beasts to identify some of the changes in this role in Venice between the fifteenth and sixteenth centuries. From 1432 ‘two body clearers were permanent employees of the Venetian Republic’ and were initially employed to bury corpses, and from 1484

65 ASMn., b. 2398, c. 389.

were also employed in ‘providing medical care to the male patients in the city’s plague hospitals.’ As yet there is no detailed study on the origins of this group.

Nevertheless, in Mantua one aspect of their job in this epidemic was providing confirmation of plague deaths, and there are numerous references to cases identified by them. On 23 October one of a group of mulatieri, who Agnelli subsequently had removed from the city, died of plague as had been seen and confirmed by the pizzamorti. Eight days later another case was reported, although on this occasion a blacksmith had died in a room where twenty-two days earlier two children had died, however, the pizzamorti claimed they were not plague cases. To be on the safe side, the room was closed, so that if it was proven to be plague no one other than his wife and another boy would have been infected. In another case described in this letter the pizzamorti were involved in burying a poor man who had died in the house of someone named Scaramucia from Luzzara. The man had been ill for a number of days as testified by his neighbours, and so presumably did not have plague. They also had the task of burying another old man found near San Salvatore, who did not have any marks upon him to indicate plague.

Identifying plague cases depended upon a number of causes including consideration of the physical symptoms and took into account information about the family or household and their location within the city or the contado. One such case was that of Maestro Bartholomeo Fossato who during the epidemic in 1463 stayed with his family in Cipata near the borgo of San Giorgio. On 1

---

67 Stevens Crawshaw, 'The Beasts of Burial', p. 572. For an overview of the development of Venetian pizzamorti as a trade, pp. 571-5; see also, Plague Hospitals, pp. 129-32.

68 ASMn., b. 2398, c. 325.

69 ASMn., b. 2398, c. 341.

70 ASMn., b. 2398, c. 341.
November a child had died and Bartholomeo’s wife was ill and as Agnelli believed it to be plague he reported that he would inform those nearby.\textsuperscript{71} Two days later Bartholomeo’s wife had died and others were ill.\textsuperscript{72} Bartholomeo succumbed to plague on 14 November and Agnelli sent pizzamorti to bury him and to take one of his male servants who had the ‘sign’ and another female servant, who until that point was not sick, to Mapello, with Bartholomeo’s goods.\textsuperscript{73} Mapello was an important area used during plague epidemics as a lazaretto and as an area to cleanse goods. It was located on the banks of the Mincio River to the north west of the city.\textsuperscript{74} Subsequently other plague cases surfaced in Cipata: two girls of an innkeeper had also become infected. Agnelli immediately sent provisions for them and stated ‘I believe this illness (male) to be caused by the aforementioned Bartolomeo, firmly.’\textsuperscript{75} The physical location and familial connections were important factors, as was the ability to trace who the infected had interacted with. A case reported on 20 November involved the son of Jacomo dalle Cenolle who was infected somewhere near the house of the trumpeter Pietro. Jacomo confessed that previously he had consorted and conversed every day with a Jacomo di Pedoro his neighbour.\textsuperscript{76} Jacomo died of plague on 9 November, which had been concealed by his family and he had not died in his own home.

\textsuperscript{71} ASMn., b. 2398, c. 347.

\textsuperscript{72} ASMn., b. 2398, c. 353.

\textsuperscript{73} ASMn., b. 2398, c. 380.

\textsuperscript{74} See appendix 4 for the location of Mapello in relation to the city. Health officials used a building, referred to as the ‘palazzo di Mapello’ in a letter from 1576 as well as adding temporary huts as necessary. See below pp. 241-2, for a discussion about the merits of the site as a plague hospital in 1576.

\textsuperscript{75} ASMn., b. 2398, c. 382. ‘Credo che questo male sia causato dal predicto Maestro Bartholomeo, firmiter.’ It should also be noted through this example that in this epidemic the poor were not the only plague victims: many had titles or some status. Agnelli wrote in the vernacular, but used the Latin for ‘firmly’ in this case.

\textsuperscript{76} ASMn., c. 2398, c. 400.
Letters reporting cases sent from the contado tend to emphasise a different set of symptoms. While they also considered household deaths and death after a short illness as identifiers, these letters contain more details on the physical markings on areas of the body. A report from Quistello on 21 November stated that in Novolano a boy had died with a bubo on his body, although no indication was given as to where exactly it was found. On the 14 December in the vicarate of San Benedetto it was reported that a servant had died with a sign of the plague which was further elaborated upon as a carbone under the armpit. On 9 November in Revere a case was reported concerning two people: the stepson of an innkeeper was ill with a swollen shoulder and a fever, and his manservant was gravely ill with a swelling in the throat and three buboes above the shoulder. It was also reported that they were separated, presumably from the uninfected, and that everything possible was being done for them. Thus these buboes or carbone gave cause for grave concern as it indicated a severe infection if the patient was still alive or was one method of confirmation of a plague death.

A distinction was made between physical signs which were indicative of plague and those which were not. In Revere on 8 November 1463 one suspected person held in a casono was felt not to be marked by the disease. The town and monastery of San Benedetto was also an area of infection as there are a number of letters from both the civic and monastic authorities describing a variety of cases. This concurs with the infection being carried from Ferrara as San Benedetto lay close to the trade route with Ferrara. Again, the vigilance and suspicion which accompanied a death is evident. On 31 October the death of an old man, approximately seventy years old, was reported. An examination was

---

77 ASMn., b. 2400, c. 50, ‘che haveva uno bognono suso il corpo.’ In F. Cherubini, Vocabolario Mantovano-Italiano (Milano, 1827), bognono is described as a bubbone or ascesso, p.12.

78 ASMn., b. 2400, c. 330.

79 ASMn., b. 2400, c. 231.

80 ASMn., b. 2400, c. 314.
conducted and it was concluded that no sign of plague was found upon his corpse.\textsuperscript{81} By mid-November the monastery was infected and the abbot wrote to the Marchesa Barbara describing the situation.\textsuperscript{82} One of the brothers had died of plague and another displayed a fever and other bad signs, which caused great concern as he had been in contact with other brothers.\textsuperscript{83} In the interim the infected man had been separated from the rest of the community. San Benedetto remained infected the following month as in a letter dated 11 December there was concern for the health of a number of brothers, predominantly related to the presence of a fever; one victim was initially very ill with a fever and then died of plague.\textsuperscript{84}

A significant indicator common in reports from both the city and contado was multiple infections or deaths within a household which were treated swiftly and with suspicion. On 22 September Quistello reported two deaths in the same house just days apart but no indication was given as to the cause of death and plague was not mentioned, but it is noted that no other person in the house had fallen ill.\textsuperscript{85} An addendum to a letter from Sachetta dated 20 November stated that in Poletto Mantovano three people died in one house, and as a result the remaining family members were sent to a casono.\textsuperscript{86} It was not a confirmed case of plague, but was an initial brief four-line report added to the end of a letter and unfortunately the outcome remains unclear. A letter sent from Poletto Mantovano on the same day, however, reported the death of a woman without mention of any symptoms, yet the men of the village were ordered not to go

\textsuperscript{81} ASMn, b. 2400, c. 314.
\textsuperscript{82} ASMn, b. 2400, c. 317. The letter is addressed to Barbara Gonzaga who was then in Borgoforte.
\textsuperscript{83} ASMn, b. 2400, c. 317.
\textsuperscript{84} ASMn, b. 2400, c. 328.
\textsuperscript{85} ASMn, b. 2400, c. 40.
\textsuperscript{86} ASMn., b. 2400, c. 466.
outside, presumably of the village, under pain of death. This occurred one month after Mantua was infected, and several months after reports of plague cases in areas of the contado. Therefore, the removal of the family to essentially a quarantine station was evidently a precautionary measure while the case was decided. As mentioned above a plague death was reported there on 20 November. Nevertheless, the death of three people in one house was clearly sufficient grounds to suspect plague, and to merit action.

A letter from Revere dated 30 November reports four plague deaths all associated with one particular household. Firstly someone connected to the head of the family, unfortunately the letter is damaged which obscures the name, and the wife of a Gianebello Ferraro. The other two deaths, the sister-in-law of the innkeeper and a female servant were reasoned to have been infected through contact with the members of the household. These deaths occurred outside the castello itself and it is noted that inside the castello remained healthy. In Suzzara it would appear the infection and suspicion centred upon the households of a certain Amadino and of another man Nicolò di Marzolo. Four deaths had occurred in the household of Amadino, the first being Amadino himself as reported on 25 October. The following day one of his daughters died. Another daughter was reported as being ill on 4 November and five days later was dead. After a hiatus of almost three weeks on 28 November a servant

87 ASMn., b. 2400, c. 476.
88 ASMn., b. 2400, c. 159.
89 ASMn., b. 2400, c. 159.
90 ASMn., b. 2400, c. 159.
91 ASMn., b. 2400, c. 518.
92 ASMn., b. 2400, c. 519.
93 ASMn., b. 2400, c. 522.
94 ASMn., b. 2400, c. 525.
died with the telltale sign under the armpit.\textsuperscript{95} The group including Nicolò di Marzolo was monitored and a letter dated 12 December reported that they were staying in the countryside and that sufficient provision had been made for them so that they did not want for anything.\textsuperscript{96} There were no reported deaths within this group. However, it is possible they came from an infected area, or had even fled from the city itself given the concern shown regarding their wellbeing. On 22 December Mantua was informed that it had been approximately fourteen days without report of any further infections, and indeed the situation was improving.\textsuperscript{97}

While household connections and duration before death were vital information in both the city and \textit{contado}, there was a prevalence for reporting details of physical markings by officials in the \textit{contado} that were not reported in the letters from Agnelli regarding the city. This can perhaps be explained because Angelli, in his position as \textit{Collaterale}, had authority to decide upon cases whereas in the letters from the \textit{contado} those writing had to clarify cases and provide some evidence as to their progress. The volume of cases reported from the \textit{contado} is also an indication of the effect of the mass departure of people from the city. Thus Agnelli, in reporting on cases in the city acted as a filter for information going to the \textit{Marchese}. Nevertheless, through these letters we can gain an idea of the characteristics of the disease and gauge to some extent their relative importance to Agnelli, and also the actions he took.

No matter who made the final judgement on a plague case or what symptoms were identified, consideration was given to the household of the victim and to their location in the city, as was concern with whom they

\begin{footnotes}
\item[95] ASMn., b. 2400, c. 538.
\item[96] ASMn., b. 2400, c. 547.
\item[97] ASMn., b. 2400, c. 551.
\end{footnotes}
associated with, and in tracing their movements. These are not new observations; indeed, the prevalence of plague cases tied to households has been linked to arguments about the characteristics of the disease. Rather, what Agnelli’s letters demonstrate in the public health vein is a lack of more city wide quarantine procedures and restrictions of movement within the city during this epidemic. Carlo Cipolla argued that ‘before the middle of the fifteenth-century, the concepts of quarantine and sanitary cordons were fully developed and as the Health Boards were created precisely for the containment of the plague, it became their responsibility to apply these ideas.’ For Mantua at least, this is one aspect whereby the dominance of Cipolla’s work needs qualification and will be examined in more detail in a later chapter.

Agnelli was at the front line during these epidemics. He had the task of looking after the depleted city, monitoring the state and of implementing restrictions on movement which required a precise knowledge of disease within the city and elsewhere. He also marshalled a limited number of others, such as pizzamorti, doctors and his notary Roberto to assist in controlling the spread of disease. His position, in charge of all counter plague measures and of communicating directly with the Marchese, would not continue in the following century.

**Superiori della Sanità, 1506**

Gian Carlo Scalona was *Collaterale* during the first two plagues to infect the Mantuan state in the early sixteenth century, in 1503 and 1506, and had

---

98 Cohn and Alfani, ‘Households and Plague’, pp. 177-205.


100 ASMn., b. 2398, c. 321. On 13 September 1463 Agnelli discussed a case and mentioned Roberto as his notary.
responsibility for health office work grafted on to his remit.\textsuperscript{101} In Corradi the first of these epidemics in Mantua is mentioned very briefly. The only reference is taken from Federico Amadei’s chronicle, where he mentions an inscription about this plague on the monastery of San Pietro d’Ongharia.\textsuperscript{102} However, I have not found any reference to this building being used in 1503 in any correspondence. Rather it appears this epidemic did not affect the city at all. On 24 April 1503 Scalona wrote to the Marchese Francesco Gonzaga that he accepted the ‘new and strict order’ to be alert to protect the state from plague, and particularly from the Venetians who were under suspicion. Further, that with permission from the Marchese he would put a guard of citizens at the gates according to custom.\textsuperscript{103} He set to work immediately and reported to the Marchese the following day. Scalona began the letter by refuting gossip Francesco Gonzaga had heard from several sources who claimed that many people were dying in the state and supported his argument with the number of deaths; from 1 to 25 April, the date of the letter, and even to the hour the letter was written no more than fifty-seven had died. The next day he intended to ascertain the number of sick people in Mantua, adding he would use every discretion in order not to cause confusion or add to the spurious gossip.\textsuperscript{104} On 29 April he reported that there were not more than between eighty and one hundred sick in the city, including in the old hospitals.\textsuperscript{105}


\textsuperscript{103} ASMn., b. 2461, c. 191.

\textsuperscript{104} ASMn., b. 2461, c. 192.

\textsuperscript{105} ASMn., b. 2461, c. 193. ‘Old hospitals’ is perhaps a reference to the continued use of smaller hospitals before the larger San Leonardo was commissioned.
It seems the infection was confined to the towns of Revere and Governolo in the south east of the contado. Scalona wrote to the Rettori of Verona to confirm the presence of plague in the Veronese state and much like Mantua, the city was safe but several parts of its contado were infected. He therefore banned those areas and to reduce contact with Verona instructed the towns on the edge of the Mantuan Veronese border to stop any celebrations (feste).\textsuperscript{106} Scalona could congratulate himself in a missive to Francesco who wanted to be informed of the status of the city and state, assuring the Marchese that ‘to my debt and to my satisfaction your city, by God’s grace, until now there is no plague, only a small suspicion of it in other parts of the state.’\textsuperscript{107} On 1 October Scalona was able to report on the supposed origins of the disease in Revere; the innkeeper of a tavern had allowed infected people to stay and on 8 September a young man died and was buried without having been checked by the local official. Soon thereafter, five members of the innkeeper’s family died, as did the priest who heard their confession. Meanwhile in Governolo the infection was mild and there were three sick in casoni.\textsuperscript{108} This was echoed on 20 November 1503 when Scalona referred to a grida about Revere and Governolo, adding that thanks to God and ‘the good and early provisions made’, suspicion of plague was avoided. He then made reference to the new moon, and questioned if something would come as a result of that.\textsuperscript{109}

The next plague in 1506 required more serious action. The Collaterale Scalona was heavily involved in the counter plague work but was joined by

\textsuperscript{106} ASMn., b. 2641, c. 196.

\textsuperscript{107} ASMn., b. 2641, c. 201. ‘per debito mio e per satisfactione di quella me par notificargli che in la cita sua per dio gratio fin qui non gli é stato ne peste ma pur una minima suspictione ne in altro loro del dominio suo: Excepto che Gubernolo e Revere come prima io gli scrisse.’

\textsuperscript{108} ASMn., b. 2461, c. 200.

\textsuperscript{109} ASMn., b. 2461, c. 202. ‘farò per publica crida levar di banno Revere e Governolo per esserli cessato ogni suspicione de peste mediante la dio gratia e le bone e preste provisione factegli.’
another two officials; a Maestro Alessio, and Gian Giacomo Calandra. They functioned as a loosely structured health office, operating on an ad hoc basis. From the contents of the letters and the varying type of information given by each writer Calandra was, in effect, the head of this group, all of whom were close to the Marchese and his court. Although Scalona communicated with the Marchesi and the secretary Tolomeo, he did not do so as frequently as Alessio or Calandra. The letters written by these three men give interesting insights into the role each played and a layering of information; indeed, there was often much repetition in content but shaped by the particular writer that illuminates the inner workings of their shifting relationships.

Before discussing the actions taken we must consider the arrival of this epidemic. It generated brief comment from the chronicles; Corradi cites Schivenoglia who wrote that the plague lasted from carnival to September and that the gates of the city were closed. In the city and the borghi more than two thousand people died and ‘the commune provided 14000 ducati to the public need.’ Unlike descriptions of the beginning of previous plagues in the chronicles and letters that sought to apportion blame on the Ferrarese or the Jews, in 1506 the type of plague was of greater import than identifying where it came from.

Reports concerning suspicious deaths began in March 1506. Tolomeo, secretary to Francesco Gonzaga, reported on 11 March that he had been in contact with Calandra regarding the appointment of doctors to visit the sick and examine the dead in the state. A dispute then arose among the doctors as to whether the deaths were caused by pestilential fever or contagious plague with

110 Calandra was part of a family of Gonzaga officials: see above p. 27 fn. 158; Bourne, Francesco Gonzaga, p. 500; and Cockram, Isabella d’Este, p. 178.

the initial dividing lines drawn between doctors working in the wider state and those in the city. Tolomeo first spoke to a Maestro Andrea, who told him the four doctors in Mantua, referred to as physici rather than medici, had never seen plague, with the exception of a Maestro Baptista Fiera, therefore, Tolomeo spoke with him. Yet, as Fiera had not visited the houses in the state Tolomeo did not rely on his judgement alone. The next day, 12 March, Tolomeo reported that he had spoken separately with some medici of the state and found that a Maestro Antonio di Grado and il Zaita were very hesitant to comment; all agreed that the illnesses were pestilential but they did not want to say that it was contagion.

The following day Tolomeo reported that a convocation would be called ‘for the orders for the plague’ and that Calandra had informed him nine deaths occurred that day, but only one had the sign of plague. The meeting took place on 14 March and was attended by a Maestro Gian Pietro, a Conte Giovanni, Maestro Jacomo Suardo, Alessio, the massaro, the rector of the hospital, Gian Carlo, Maestro Antonio di Grado, il Zaita and some other citizens (alcuni altri cittadini). Together they discussed the illnesses and eventually by common consensus decided that they were pestiferous and contagious, but that provisions could be made to stem the disease. The episode also demonstrates that a division between lay contagionists and medical miasmatists did not occur. Tolomeo then continued listing the suggested provisions: hunting out rogues and undesirables; stopping Masses and the schole for fifteen days; appointing a doctor (phisico) to be paid to visit the suspected so that they would not die abandoned and desperate; two gentlemen were to be elected as Signori della sanità, who along with Calandra would take care of the problems that could

---

112 ASMn., b. 2469, c. 39.
113 ASMn., b. 2469, c. 44.
114 ASMn., b. 2469, c. 45. ‘e domatina ordinarò la convocatione per gli ordini di la peste.’
115 ASMn., b. 2469, c. 48.
occur and would give out licences to those who wanted to leave. The Signori della sanità were in essence carrying out the same duties as Agnelli had done although the severity of infection in the city necessitated more drastic actions.

Scalona was the Collaterale again, and as we have seen had some success in controlling plague in 1503, yet his role differed in this epidemic. Much of his work and information about it was discussed or passed on through Calandra, who in the extant correspondence wrote most frequently to the Marchesa Isabella. Like Barbara of Brandenburg Isabella d’Este was proactively involved in managing the epidemic in 1506. Sarah Cockram has recently illuminated the power sharing relationship between Isabella and Francesco Gonzaga. Cockram cites an example demonstrating this role:

‘Isabella’s authority included the protection of trade, and in 1493 she reacted swiftly to erroneous news of a plague infestation in Mantua, perhaps spread by merchants wishing to affect the price of wool, as the report was blocking trade with Parma, Cremona, Brescia, and Verona. She countered this economic disruption, dangerous to the Gonzaga and their subjects, by sending express messengers to reassure the commissari and rectori of those cities, and kept Francesco informed of her actions.’

Later in the reign ‘in the years which followed the fall of the Borgia, the couple continued to work together as a political unit, tackling a terrible plague in Mantuan territory in 1506.’ During this plague Calandra also reported matters related to the Gonzaga family and their court: for example on 14 July when he wrote to Isabella that he would visit Andrea Mantegna to discuss the ‘La

---

116 Ibid.

117 Cockram, Isabella d’Este, p. 64. The text of this letter is also given on p. 198.

118 Ibid., pp. 159-60.
Faustina’ bust, promising ‘I will do the work in the most dexterous way I can.’ Calandra also provided Isabella with information about her children and their well-being. Therefore, he did not carry out the same type of errands for either Isabella or Francesco as Agnelli did for Ludovico, but supplying information about a variety of other concerns was still part of his position.

Like Agnelli Calandra wrote about important events in the city, for instance, he reported that some prisoners, who had escaped as they were starving, had been swiftly captured. He also recorded events he thought ‘worthy of remembering’ (digna di memoria), a phrase he used frequently when recounting the details. One theme in the anecdotes he reported was love stories but related to the events of the plague. On 25 April 1506 Calandra wrote ‘in these days a love affair has happened worthy of remembering.’ He went on to tell the story of a very beautiful young Jewish woman; her parents had died of plague and she was on her own, sick, and ‘destitute of every human and divine help, except that of love.’ A doctor named Lazaro, who was already passionately in love with her, though in vain, put aside any fear of danger or death and went to her home to care for her. Before she recovered he caught plague and they both were close to death, however, they had begun to recover. Calandra

119 ASMn., b. 2469, c. 361. ‘e circa la cosa de la Faustina farò l’opera con più dextro e aconcio modo sapero’. He sent a report of the meeting the following day, ASMn., b. 2469, c. 362.

120 ASMn., b. 2469, c. 137.

121 ASMn., b. 2469, c. 141. ‘A questi di é accaduto un caso amoroso digno di memoria qual me é parso de scrivere a Vostra Signoria. Una giovane Judea bellissima a chi erano morti di peste il patre e la matre, era restata sola, inferma, destituta da ogni auxilio humano e divino, excepto che da amore. Imperciò che un hebreo medico nominato Lazaro qual già bon tempo invano era di lei stato fieramente acceso, vincendo in lui amor ogni timor ogni periculó di morte entro in casa di lei e medicandola non prima l’ha sanata. Che egli si é appestato e ambedui sono stati presso a morte. Hora cominciano a rihaversi e se crede che in breve guarirano.’
concluded ‘this being an example, while they live of the great power and valour of love.’ Calandra reported another case of a couple on 27 April. He began:

‘Today we have discovered a very remarkable event. A young man and a woman were in love with each other. In recent days being ill with the sign they were sent to be cared for at Mapello. As soon as they began to heal, moved by loving impulses, yesterday they solemnly celebrated their marriage.’

The ceremony was allowed to happen as the doctor was absent, having gone to help someone named Fidele. The officials at Mapello said this example had moved five other couples to decide to get married with celebrations, music and dancing, but added that Alessio and the Collaterale Scalona would not agree to allow such celebrations to happen. Despite this he adds ‘who would have thought that love would reign in the midst of pestilence and in Mapello.’

Couching the reports on actions and events during this plague in the form of more literary stories was perhaps a reflection on Calandra’s personality and relationship with Isabella d’Este. While they may appear to be slight diversions from the more brutal realities of the disease or at least an attempt to present a less grim depiction of the toll the epidemic took on the inhabitants of the city, the anecdotes do reveal important insights. The example of the marriages at Mapello is particularly interesting as Calandra attempted to distance himself from the more harsh realities of governing a plague epidemic, as he reported that Scalona and Alessio would not have allowed the marriage to have taken place nor were they likely to permit the other planned weddings. As a health official himself Calandra should also have shown concern about such events,

122 Ibid. ‘Acì siano esempi mentre viverano de la gran possanza e valore di amore.’
123 ASMn., b. 2469, c. 151. ‘Hoggi havemo inteso qui uno caso assai notabile che un giovino e una donna inamorati un de l’altro; quali li di passati essendo infermi di segni furro mandate a esser medicate a Mapello: quando prima hanno comminciato a guarir tocchi da stimuli amorosi ivi heir celebrano solenemente le sposaliere.’
124 ASMn., b. 2469, c. 151. ‘Chi havia creduto che amore havesse havuto regno in mezzo la pestilentia e in Mapello.’
particularly the plans for celebrations. The position he presented himself as occupying, that of an overseer rather than an active participant in carrying out unpleasant procedures, continued as the epidemic worsened.

Calandra did report on many other events related to the identification and prevention of disease such as a case of plague in the house of a notary in the borgo of San Giorgio. The wife of the notary of the Commissario had been ill, but the sickness had been kept hidden until her death. He then stated that the notary acted against the orders of Alessio and the Collaterale as he gave lodging to a cousin from Mantua who was suspected of having the disease, but added he did not believe there to be any further roots of the illness.  

The same day, 10 May, Calandra wrote that a grida had been announced commanding in the strictest terms that all cases of sickness in the city be denounced immediately to the office of the Collaterale. If a suspicious case was discovered and a denunciation had not been made in that way, the sick person and their family would be thrown out of the walls, and the house and its contents would be burned without exception. He wrote that as it was believed the disease spread through fear but if the people reported sickness in the proper way they would then be sent to Mapello and their goods would not be destroyed.  

The option of being sent to the lazaretto was presented as an alternative or perhaps was an incentive.

Calandra also commented upon the type of assessments and actions taken though again took care to distance himself from the more unpleasant tasks. On 23 April, he commented that:

---

125 ASMn., b. 2469, c. 117.
126 ASMn., b. 2469, c. 195.
‘among the good and suitable provisions made by Alessio and the other consulatori and provisi against the plague and other evils proceeding from it there is one that seems to be worth writing to your lordship about, that is to avoid a miserable and severe hunger of a very great number of poor people, that until now is the most horrible spectacle in the world.’

A grain tax was then imposed with the bread to be distributed in the piazza.\textsuperscript{127}

On one occasion Calandra defended the work of Scalona and in the defence gave an insight into how ideas were discovered and recycled. Calandra wrote that despite the Collaterale doing his best to keep the city in order some malfeasants were making his work difficult. The root of the problem was that in the gran male the remedies seemed to be of little use because of one common mistake; people strove to hide the illness when they should disclose it and he gave two specific examples using Mantovani merchants who contravened this order.\textsuperscript{128} The first concerned a merchant who wanted to send his goods to the market at Cerese. However, before the merchant was given permission pizzamorti sent by the Collaterale discovered a dead body and a sick person, both of whom had signs of plague, in his home. The second concerned a Michele di Galvagni who sent his massara out of the Pradella gate without disclosing she was sick with a very serious (gravissimo) case of plague. Calandra expressed incredulity at this as Michele was ‘a good citizen, great merchant and a man of years and mature experience’, such that Scalona had taken advice from him

\textsuperscript{127}ASMn., b. 2469, c. 137. ‘tra le bone e opportune provisione che si fanno per Maestro Alessio e li altri consultori e provisori contra le peste e altri da quella procedenti: ne una che mi par digna di esserne scripto a Vostra Signoria che per subvenire a una miseranda et [...] fame di grandissima numero de persone povere che finhora e stato il più horribil spectaculo dil mondo.’

\textsuperscript{128}ASMn., b. 2469, c. 84.
about ‘the old ways and remedies.’ Alessio also commented on the case stating that the city was ‘full of pestilential fire’ because people did not want to know or admit they had plague. Michele di Galvagni had sent his massara with a terrible giandussa on her thigh to the house of a vegetable seller (orlotano), where it was discovered.

Scalona carried out many of the functions that Agnelli enacted and encountered some of the same problems. On one occasion he wrote to assert the quality of his work and to justify his position. He was primarily responsible for issuing travel passes and on 13 April wrote:

‘I believe that no one knows better than me the infected contrade and houses in Mantua. I say this because your lordship should know that if someone comes to me to get a fede di sanità so they can take some of their possessions to various vicarates I go and examine who lives in that house as far as I possibly can, to be able to give them a fede libera in scriptis.’

The reason for the defence of his work was that representatives from Revere and Ostiglia had written to Scalona informing him that they did not want to accept people with fede di sanità issued by him into their jurisdictions. He added that many other officials had done the same, ‘a thing that really seemed cruel’, and

---

129 ASMn., b. 2469, c. 84. ‘questo fa maravigliar ogniuno per esser Michele Galvagno bon citadino, gran mercante, homo e de anni e di experientia maturo, cossi che da lui pigliava li modi antichi di li remedi Maestro Jo Carlo.’

130 ASMn., b. 2469, c. 108. ‘questa cità e piena di fuocho pestifiero.’

131 ASMn., b. 2469, c. 91. ‘Credo che nesuno altro meglio di me sapia le contrate e case infecte di Mantua. Questo dico perché voglio che Vostra Signoria sapia che se alcuno vene da me per haver la fede de la sanità per potersi condure alcune possessione loro in diversi vicarii vado examinando più che posso fina al fondo in che questa é casa habitano per potersi fare la fede libera in scriptis.’
was significant enough that Francesco should be aware of it.\footnote{ASMn., b. 2469, c. 91. ‘et questo fanno molti altri officiali, cosa che veramente a molti pare crudele.’} It was not only a challenge to his authority as Collaterale, but was also by implication a challenge to the authority of the Marchese. The outer parts of the state did not readily acquiesce to the Collaterale’s orders.

In the course of their working relationship tensions emerged among the group. It appears Calandra began working more closely with Alessio, on one occasion reporting an apparently deficient area of Scalona’s work. On 30 April Scalona responded to an order, saying he would begin to rid the state of every suspect, dead or alive, and would begin by searching out the roots of disease to eradicate it using all the remedies both spiritual and temporal.\footnote{ASMn., b. 2469, c. 166.} Subsequently he made visits to Mapello and to areas of concern in the state. Three days later he reported that thirty-four people had died in the terra.\footnote{ASMn., b. 2469, c. 177.} Calandra then pointed out that Scalona was in effect neglecting the city and spending too much time in the state. However, after referring to a number of new cases in the city, Calandra argued that they should not be too worried about the Hydra-like pestilence as it would be extinguished before long by Hercules, meaning Scalona, who would not hesitate to cut off every head.\footnote{ASMn., b. 2469, c. 364.} Shortly thereafter he was critical of Scalona’s work again. In response to rumours then circulating in the city, Calandra argued that Scalona and his officials were too lenient in letting people into the city to trade, among other things.\footnote{ASMn., b. 2469, c. 396.} These criticisms and defences also reinforce the pragmatic role of the Collaterale in monitoring the populace for disease and in using his knowledge of infected places to allow some movement into the city.
There was, therefore, a degree of change and disruption during this epidemic. The *Collaterale* was relegated from the managing of the health office to a somewhat subsidiary role. He retained responsibility for giving out licences for travel and of monitoring cases of disease. However, Calandra had effectively taken charge of overseeing the work of all the *Signori della sanità* and of reporting the effects, shortcomings and successes for their work. Alessio was more involved in dealing with events in the city. In fact, he issued *gride* for the city and also took action to ensure and enforce the regulations, on occasion by making an example of certain people who contravened them; for instance, he oversaw burning objects and carrying out formal corporal punishments in the piazzas of the city.\(^\text{137}\)

**1527-8**

The next epidemic began in 1527 during a difficult period for the Italian peninsula with cycles of plagues, famines and wars. The most complete set of *libri dei morti* survive for this epidemic than for any plague before 1630. However, data from this register does not correlate with evidence found in the letters. As we will see, health officials reported at differing times high numbers of sick and suspected people. Yet the necrology, the only one which differentiates between plague and other deaths, does not record such high figures. Mazzoldi has drawn attention to the change in the monthly death rates from February 1528 when 286 died and March when 537 deaths were recorded, reaching a crescendo of 666 in April, before the records stopped. The disease had diminished in the course of July and by 25 August 1528 only four plague deaths were registered.\(^\text{138}\) This is similar to the case of Milan in 1523 where as

\(^{137}\) ASMn., b. 2469, cc. 312, 337, 341. These incidents will be discussed in chapter 5.

Cohn has demonstrated the percentage of deaths to plague was much less than the large death figures given in chronicle reports.\textsuperscript{139}

An additional problem is that a comparatively small number of letters survive to examine this epidemic allowing only sporadic insights into these plague years. On 14 August 1527 \textit{Maestro} Antonio Gatiro wrote about the fair at Santa Maria delle Grazie.\textsuperscript{140} The initial problem was the actions of a Ludovico Gonzaga as according to Gatiro, Ludovico and others like him acted as though they were the \textit{Marchese} of Mantua. Therefore, in consultation with \textit{Maestro} Paris, Alessio and Gian Giacomo Calandra \textit{Castellano} (the same as in 1506), they decided to order the fathers of Santa Maria to close the monastery and church. Curtailing the actions of Ludovico was further justified by the news that plague was multiplying in many parts of the Veronese territory and preventing the fair would deter anyone from those parts coming to Mantua. He added that they needed to be extremely vigilant at the present time, citing the example of a figliolo of Philippo Cavalero who came from Bologna and had died of plague in Cereso.\textsuperscript{141} Another cause for concern was that a brother of the Carmine had died but not before he had mixed with ‘all at the convent in Mantua.’\textsuperscript{142} On 31 August, Gatiro wrote again to discuss the fairs and markets. He argued that an order to suspend fairs at Carpi and near Correggio should be made because plague was increasing in those areas, as he had done at Santa Maria. Gatiro then turned to events in the city, saying ‘thank God’, from his last letter to the present one there was not even a small sign of plague and in addition to this good news events in Curatone and Pietole were improving.\textsuperscript{143}

\textsuperscript{139} Cohn and Alfani, ‘Households and Plague’, p. 191.

\textsuperscript{140} It is not clear what position Gatiro held, however, he was not the \textit{Collaterale}.

\textsuperscript{141} ASMn., b. 2509, c. 339.

\textsuperscript{142} Ibid., c. 339.

\textsuperscript{143} ASMn., b. 2509, c. 341.
Two weeks later Gatiro detailed the arrival of a boat in Mantua. The previous day the barge arrived from Ferrara with a brother of an Adoardo di Armino, notary to the Signori Consiglieri of Mantua. Following orders given by Gatiro, the Captain of the Catena port did not want to let the boat through, and additionally it had a health pass from Cereso not Mantua. The movements and relationships of Armino were further explained; a relation of Armino died the previous day in Romanoro with two giandusse. Gatiro added that he made all possible provisions and had caught four porters in the city and had enclosed them in a house.144

Four days later on 19 September Gatiro had more news to report: a brother of the monastery of Santa Maria delle Grazie died of plague. As a result, with the advice of Alessio, he again sequestered the brothers in the monastery adding they wanted to be perfidious and ambiguous claiming the death was not plague. The doctor Maestro Alessandro, however, made the positive diagnosis and was certain of his judgement. Nevertheless, Gatiro wrote to the brothers that he intended to be clear and would send doctors and surgeons from the city to examine them, and also because he suspected that the disease was not extinct in Curatone, but was being hidden.145 The following day Gatiro reported that for confirmation he had sent a doctor Maestro Bernardino along with a peasant (vilano) from Mapello to the monastery. They concluded that the brother died of plague and so ordered the vicario of Curatone to keep the monastery closed and well guarded.146 Another twist came two days later (26

---

144 ASMn., b. 2511, c. 342.
145 ASMn., b. 2511, c. 343.
146 ASMn., b. 2511, c. 344.
September) when the judgement that the brother had died of plague was reversed as the body was found not to be marked with the sign.  

Gatiro also reported on cases in the city. On 17 June 1528 he wrote that until lunch time eleven people had died without suspicion of plague, and only one suspicious death had occurred in Borgo di Porto; but the victim had *petecchie* and was sick for fifteen days. Two days later on 19 June another fourteen had died without suspicion of plague but three deaths with the sign in three houses were discovered that day. On 14 July a Carlo Nuovoloni reported more cases; that night the son of a Bolognese who was at court died of plague in the street and his family left without informing anyone. Nuovoloni thought it likely they were going to Rezolo where they had lands and added he would send a message to the *commissario* of Rezolo to make sure they stayed in their residence and did not mix with others.

On 19 July Gian Giacomo Calandra sent the list of deaths and commented that the number of deaths had started to fall. He reported on same day that one of the guards had died of plague. The Captain of the guard believed the man to have the sign of plague and so made him see the health office’s doctor and now two others were ill. A missive the following day related that that morning *Maestro* Paris had informed Calandra and the Captain that plague had been discovered in the monastery of Santa Marta and in the house of a Ludovico

---

147 ASMn., b. 2511, c. 346.  
148 ASMn., b. 2511, c. 95.  
149 ASMn., b. 2511, c. 96.  
150 ASMn., b. 2511, c. 101.  
151 ASMn., b. 2511, c. 15.  
152 ASMn., b. 2511, c. 18.
Catabenno. The case of the monastery was problematic as there would be some difficulty in providing for the sisters as they were all poor and of low status (*ignobile*). In the case of Catabenno one of the servants had been sent to Mapello as they showed signs of plague. However, Ludovico doubted that the servant should have been sent to Mapello and he behaved as normal by visiting friends. A further discovery was made by *Maestro* Paris; there was a need to find provisions for the many poor who had fled to the Maddalena through hunger, and who were now among the sick.\(^{153}\) On 26 July a third missive reported the arrival of people with and without *fede di sanità*, and enclosed the list of the bulletins for that day.\(^{154}\)

It would appear Calandra acted as an intermediary between the *Marchese* and other officials. On 27 July he wrote about a concern raised by the *Signori della Sanità*. They wanted him to pass on a request from the *Collaterale* who was ill; he wished to be allowed to enter his home (presumably in the city) where he could be looked after, adding it would be closed so no one could mix with him other than those already in the house.\(^{155}\) Roughly a week later on 30 July Calandra informed the *Marchese* that that night the *Collaterale* died of a fever; it does not seem that he was suspected or indeed died of plague. Calandra then went on to discuss other problems. In the final section of the letter he wrote that *Maestro* Paris and the other gentlemen encouraged (*exhortamento*) the *Marchese* to appoint a *Collaterale* quickly, as it was an important office during plague periods and other matters would also require his attention.\(^{156}\) He continued in the intermediary capacity the same day to report

\(^{153}\) ASMn., b. 2511. c. 21.

\(^{154}\) ASMn., b. 2511, c. 23.

\(^{155}\) ASMn., b. 2511, c. 24. The *Collaterale* is not mentioned by name in the letters, only by title. I have not yet found letters signed by the *Collaterale* during this epidemic.

\(^{156}\) ASMn., b. 2511, c. 26.
the *Signori della Sanità* had informed him that a woman in the house of a *Maestro* Baptista builder of the Palazzo del Te had died of plague.\(^{157}\)

On 2 August Calandra wrote to the *Marchese* and the letter contained details of several issues affecting Mantua. He then reminded him not to delay in appointing a *collaterale*:

‘for the things that happen in these times, because the office of the *collaterale* is to be informed of all the areas and places of Italy about the things relevant to health, and to know who should be allowed in and should not of those who come (to Mantua) from different places. Because every day such doubts occur, that they (the *signori della sanità*) do not know how to resolve.’\(^{158}\)

He went on to describe more problems related to the health status of the populace and to the work of the *Collaterale*; soldiers were arriving from Piacenza who entered Mantua without a *fede di sanità*, but the majority said they were Mantovani and the *Signori della sanità* and the Captain of the gate awaited the *Marchese*’s orders. This was followed by a list of people who had entered Mantua on that day, with and without *fede*.\(^{159}\)

Thus, several people reported on deaths in the city which would have been the task of the *collaterale*. A Girolamo Scoperto wrote on 19 July 1528 that no more than ten had died of plague while the previous day no new cases had

\(^{157}\) ASMn., b. 2511, c. 28.

\(^{158}\) ASMn., b. 2511, c. 33. ‘per le cose che accadano in questi tempi perché lo officio del ditto Colateralle é de esser informato de tutte le terre et lochi de Italia circa le cose pertinenti alla sanità, per saper quelli se devano ammetter et quali no, de quelli che vengono de diversi lochi. Perché ogni hora accade tal dubio in che loro non se sanno risolvere.’

\(^{159}\) ASMn., b. 2511, c. 33.
been found.\textsuperscript{160} On 10 August more reports of cases of plague were given by an Antonio; he wrote that a Spaniard Ferante, who worked with weapons, died of plague in the corte, the Gonzaga complex of the castello of San Giorgio, and as a result it was enclosed.\textsuperscript{161} On 25 August 1528, Scoperto reported that no more than two had died of plague and only one house was suspected adding he hoped that this was a sign things were improving. Further, the following Saturday 200 people would be released from their homes.\textsuperscript{162} There was an additional sense of anarchy as people were let into Mantua both with and without health passes. For instance, on 6 August 1528 Calandra reported a list of people who entered Mantua that day with fede and those who entered without.\textsuperscript{163} The following day more people both with and without fede came into Mantua, including a barber who had a licence\textsuperscript{164}, and this information was again given on 8 August.\textsuperscript{165} From the sporadic evidence available from the years 1527 and 1528, the collaterale was still an essential cog in the wheel of the health office, in whatever form it took.

**Conclusion**

The collaterale and his office played a crucial role during plague epidemics. Yet the core of his work did not markedly change in the course of the epidemics discussed in this chapter. It centred upon the issuing of fede di sanità and in monitoring disease in the city, the state and beyond. Problems encountered by successive collaterali highlight the tensions between the city and areas of the contado, as they had to defend the thoroughness of their work.

\textsuperscript{160} ASMn., b. 2511, c. 63.

\textsuperscript{161} ASMn., b. 2511, c. 112.

\textsuperscript{162} ASMn., b. 2511, c. 71.

\textsuperscript{163} ASMn., b. 2511, c. 36.

\textsuperscript{164} ASMn., b. 2511, c. 37.

\textsuperscript{165} ASMn., b. 2511, c. 38.
when people with licences issued by them were refused entry to various areas in the contado. The role was contested during the plagues of 1506 and 1528. In the first instance this was due to the involvement of two other court officials who at points tried to subsume aspects of Scalona’s tasks, causing confusion and some disagreement. However, in the later epidemic other conditions contributed to the sense of disorder and panic, not least the death of the collaterale himself, which threw into sharp relief the importance of having a man of good character, a uomo da bene, in that role. The dominant position Agnelli had in the late fifteenth century, both in terms of contact with the Marchesi and in being the chief health official, did not continue into the sixteenth century.

The evidence presented above also contests the idea that health offices or rather officers charged with the city’s health during epidemics, had the sole purpose of dealing with instances of disease. The Mantuan health officers during these plagues did not operate a focussed and dedicated office; from Agnelli and his sending of fruits to the reporting of love stories and other incidental events by Calandra, these officials had other tasks and concerns to address. The incidental events are also relevant to the argument put forward by historians that less virulent epidemics allowed for the development of more innovative procedures; as we have seen at least for Mantua this is not the whole picture.\textsuperscript{166} Health officials did stay in the city during the minor epidemics discussed above, but did not pioneer more complex methods to counter the disease. Later chapters will assess the search for and application of remedies and cures, which will further develop the argument that minor epidemics did not result in more sophisticated approaches. Therefore these plagues that have been considered as minor illuminate the workings of a developing health office. The epidemics of 1506 and 1528 are important: as fifty years later when the plague afflicted Mantua, health officials looked back to 1506 and 1528 for guidance on how to restore the health of the state.

3. Mal Contagioso in Mantua, 1574-6

On 26 March 1576 the Collaterale Giovanni Aliprandi wrote to the ducal secretary Aurelio Libramonte to explain why he had not kept him informed of the deaths in the city: the libri dei morti were not in the hands of Aliprandi’s officers but of those who worked for a certain Gazuolo. However, that day the deaths recorded ‘had surpassed the usual number’ and it seemed necessary to give a daily account of deaths to the Duke. At the end of the letter he lists seventeen deaths the previous day, and fifty-two on the 26 March.¹ Aliprandi went on to comment that in Mantua many things were being said about Venice which he could not believe to be true. Signore Moro, the Mantuan ambassador in Venice, had assured him that these stories were all prattle, and that if anything notable occurred Moro would inform him. Aliprandi concluded that he would write to the health office of Venice to give them an account of the Mantuan state so they would not be more suspect (of being infected) than they were at that time, adding that ‘God knows’ if the courier would be able to pass through the Veronese territory.²

¹ ASMn., b. 2598, c. 11. There are 51 deaths in the necrology for this day, 26 March 1576, Affari di Polizia, libro dei morti, vol. 12. ‘La nota di quelli che morivano ogni giorno, avvisandomi non havei mancato di dargliela, et che sopra questo particolare non habbia mai havuto risposta alcuna et che il libro de morti non sia in mano di miei ufficiali ma di quelli del Galzuolo. Mi è parso bene vedendo che hoggi hanno trapassato il numero solito, darne aviso a Vostra Signore acciò lo possi far sapere a sua Altezza et avisarmi se vuole che ognì giorni le dia conto de quelli che sono scritti.’

² Ibid. ‘In Mantova si dicono molte cose di Venetia, le quali non posso creddere siano vere poi che il Signore Segretario Moro mi assicurarà con sue lettere che sono tutte cianze, et che occorendo cosa notabile me ne avviserà. Scriverò a quelli Clarissimi Signori della sanità di Venetia dandole conto del stato nostro acciò che le parole che si dicono qui, et fuori non ne facciano più sospetti di quello che siamo fin hora, ma Dio sa se il Corriero potrà passare per il Veronese.’
This marked a crucial moment for the Mantuan state during this plague which struck the north and south of the Italian peninsula between 1574-7.\(^3\) In the north the disease spread from Trent and its territory to Venice and Verona, then on to Mantua and Milan in 1576.\(^4\) In Mantua approximately one fifth to one sixth of the population fell victim, with 1576 being the worst year. Belfanti argues that the epidemic had a particularly devastating demographic effect as it mainly affected young adults.\(^5\) The medical definition of what constituted a plague epidemic provoked debate and was manifest most dramatically in Venice where the differing beliefs of the health board and the Paduan doctors Mercuriale and Capodivacca led to the cessation of traditional health office practices with disastrous consequences. A division between health officials and academic medical opinion on the definition of true plague did not occur in Mantua. Rather it appears the Mantovani prevaricated in affirming they were infected. Contemporary accounts and later histories of the epidemic blame Mantuan nobles and Mantuan goods for carrying plague to her neighbour Milan. In the Milanese plague literature Mantovani from several sources were identified as spreading the disease to parts of the Milanese territory. Paolo Bisciola reported that a group of Mantovani noblemen arrived in Melegnano but they were infected and were taken to the lazaretto where they died, however, a woman left presumably infected but did not realise and so the disease spread.\(^6\) The Milanese gate guard Giacomo Besta wrote that on 27 July 1576 some infected Mantovani stayed at an inn named the Falcon in Melegnano and, as in Bisciola’s account, it came to light a woman left the inn and continued to spread plague to other parts of the Milanese territory.\(^7\)

\(^{5}\) C. M. Belfanti, ‘Mantova e la peste del 1575-76’, pp. 65-6.
\(^{6}\) Cohn, *Cultures*, pp. 100-1.
\(^{7}\) Ibid., p. 107.
Yet despite being in the heartland of northern Italy and the infamous role accorded to the Mantovani, historians have yet to explore how they were affected, what measures the Mantovani employed and whether they differed from elsewhere. As a consequence of the temporal distance from the previous plague infection in Mantua and the geographic spread of the 1574-7 plague, the Mantovani were forced to re-evaluate their public health practices to eradicate the disease. Evidence for this can be found in the wealth of documentation produced by the health officials. In conjunction with the letters, there are printed broadsheets with varying types of instructions and information, recipes for successful remedies for cleansing goods, copies of other health offices’ regulations, and several documents describing the health office’s strategies at varying points of the epidemic. This chapter examines the initial period of uncertainty and the arrival of the disease in Mantua, primarily through the correspondence of Giovanni Aliprandi, before proceeding to the crisis point when Duke Guglielmo appointed a temporary health board, the Conservatori della sanità, and will then examine how they functioned as a group.

From at least early autumn of 1574 Aliprandi was aware of plague cases in neighbouring states. Trent was identified as an initial source of infection in northern Italy. On 12 September 1574 Aliprandi wrote to the Bolognese authorities that from the third of that month Trent could be considered free from all suspicion of plague. He had also sent this information to the Milanese and the Cremonese and raised the issue of using fede di sanità as a precaution because the disease could arise in different places. This led to increased surveillance of those moving in and out of Mantua as shown in a handwritten copy of a grida written on 14 October 1574 extant in the health office archival documents. It prohibited all boatmen, both Mantovani and foreigners, with the exception of gentlemen known to be Mantovani, from bringing boats to the city without a fede di sanità on pain of loss of the boat, torture by three pulls on the }

8 Archivio di Stato di Bologna (hereafter ASB.), Assunteria di sanità, Carteggi, Lettere diverse in materia di sanità, no number.
rope and whatever else would be pleasing to the Duke. It indicates a heightened level of caution but the terms are, nevertheless, very general; unlike later gride issued both by and against Mantua, it does not mention any specific areas of infection.⁹ On 12 November 1574 Alipriandi wrote that someone in Mantua had been informed by the Podestà of Trent that it was free from plague.¹⁰ A month later on 20 December by order of the Senate, Aliprandi removed the gate guards’ duty to check for fede di sanità.¹¹

In the course of the following year Aliprandi continued to relate news of plague cases and suspected areas. On 31 January 1575 he reported that the deputati della sanità of Ferrara had written to him four days earlier stating that Milan and Venice were now allowing foreigners to enter their territories without a fede di sanità, and as a result Ferrara was following suit. Consequently Aliprandi, in consultation with the Senate, ordered the gate captains to allow foreigners and merchants entry to Mantua without a fede di sanità.¹² Two days later the Commissario of Quistello in the Mantuan state wrote with some alarming news: in the past month all those who died had been sick with the same illness that lasted for eight days, adding those who died after six days were found to have physical markings or petecchie. Aliprandi had consulted two doctors and was awaiting their advice as to what the disease could be.¹³ On 7 February news arrived from the Sanità of Brescia that plague had been discovered in the Roncone territory of Trent. As a consequence Aliprandi, again after consultation with the President of the Senate, ordered the gate captains to bar entry to anyone from that area.¹⁴

---

⁹ ASMn., b. 3048, c. 8.
¹⁰ ASMn., b. 2594, 12 November 1574.
¹¹ ASMn., b. 2594, 20 December 1574.
¹² ASMn., b. 2594, 31 January 1575.
¹³ ASMn., b. 2594, 2 February 1575.
¹⁴ ASMn., b. 2594, 7 February 1575.
In July 1575 Trent was singled out as a dangerous focus of infection and a flurry of information was exchanged between health offices in different states. In a letter on 1 July Aliprandi recounted that the *deputati alla sanità* of Verona had banned people from Trent entering their territory, as plague had been discovered there but had been kept secret. The Paduan notary Alessio Cannobio observed that Trent managed to keep the news hidden from others until 24 June 1575 when a number of houses were infected. After discussing the news with the Senate, Aliprandi then gave what he described as the ‘usual orders’ to the Mantuan gate captains. The *Sanità* of Brescia also sent Aliprandi information about Trent and a copy of a *grida* listing other infected areas. On 8 July Verona sent word that plague was making progress not only in Trent but also in the nearby towns and therefore Mantua needed to be vigilant for anyone coming from those areas. In response Alipandi had written to officials in the north of the state to discover if anyone had attended the fair at Trent: the *Commissario* of Castiglione Mantovano replied that one person who had been there was now very sick but did not specify the illness. On the same day the *Commissario* of Medole informed Aliprandi that now parts of Brescia were potentially infected as a number of people died after returning home from the fair at Trent. With some relief Aliprandi relayed the news that officials in Castiglione Mantovano had visited the sick person and found them to have a fever and signs that suggested pestilential disease, but not plague. In a brief missive Aliprandi stated that the Ferrarese ambassador in Milan had informed

---

15 ASMn., b. 2594, 1 July 1575.
16 Cohn, *Cultures*, p. 117.
17 ASMn., b. 2594, 2 July 1575.
18 ASMn., b. 2594, 5 July 1575.
19 ASMn., b. 2594, 8 July 1575.
20 ASMn., b. 2594, 9 July 1575.
21 ASMn., b. 2594, 9 July 1575.
22 ASMn., b. 2594, 10 July 1575.
the authorities back in Ferrara that the plague had also been discovered north of Milan in the Swiss canton of Leventina, the Val Catanta and the surrounding Swiss territory. The Commissario of Medole reported that the man sent to ascertain the situation in the suspected area of Brescia had returned and reported that it was healthy.

The second half of 1575 saw a distinct shift in actions as Aliprandi and Duke Guglielmo issue a number of proclamations to protect Mantua’s borders. They ordered the cessation of markets in the contado; restrictions on selling or bringing used clothing in to the city; restrictions on merchants taking goods to markets in the state; and regulating the boat traffic into the Catena port. On 15 August 1575, in reference to publishing a grida to prohibit a fair at Curatone as it would bring a number of foreigners, Aliprandi remarked ‘in my youth there were never so many festivals and as a consequence I am not so well informed about where these festivals happen.’ To resolve the problem he followed what had been done in Milan and had written to all the castellanze in the state banning any festivals, fairs or celebrations where large numbers of people, particularly foreigners, would gather.

A grida published on 4 August 1575 reveals how intricate the regulations had become by giving considerably more detailed instructions and information.

---

23 ASMn., b. 2594, 11 July 1575.
24 ASMn., b. 2594, 14 July 1575.
25 ASMn., b. 2594, 13 August 1575.
26 ASMn., b. 2594, 27 September 1575.
27 ASMn., b. 2594, 23 August 1575.
28 ASMn., b. 2594, 14 September 1575.
29 ASMn., b. 2595, 15 August 1575, Giovanni Aliprandi. ‘In mia gioventù non sono mai stato troppo festivuolo e per conseguenze sono poco informato, dove si facciano queste sagre.’
about areas suspected as being infected. It demonstrates the broadening of the health office’s work and marks another important stage in the expansion of directives. At this point the measures were intended to prevent Mantua from becoming infected. The *grida* begins by stating that Duke Guglielmo desired to ‘preserve the health of our state and dominion.’ The areas known or considered to be infected are numerous: on a local and regional level the territory of Milan, areas around Trent and smaller towns to the north; further afield, Sicily was banned and on a more international level so were London and Vienna. People travelling from the areas listed, with or without goods or animals, could not enter or stay anywhere in the Mantuan territory without a special licence from the *Collaterale*. Those who contravened the regulation did so under threat of the gallows and confiscation of goods with one third going to the ducal camera, a third to the *Collaterale* and his officials, and the final portion to the informant who would remain secret. All boatmen, millers, fishermen, gate guards and those who dared to bring anyone, goods or animals without a *fede di sanità* from areas not suspected were under the same penalty. Those who rented rooms, both secular and ecclesiastic, including innkeepers and tavern keepers, were forbidden to provide accommodation to anyone from the areas listed, under the same penalties. Foreigners were prohibited from entering or staying in the city and territory without a *fede di sanità*, stating they were from a healthy area. Special permission was required either from the *Collaterale*, the *Podestà* or the *Commissario* of the area for paying guests as well as those visiting people for reasons of friendship or kinship.

Another group of potentially threatening people were then addressed. All foreign beggars, street singers, herbalists, comedians and similar people were forbidden entry to Mantua. While those already within the state were given three days from the publication of the *grida* to leave under penalty of three rope pulls for men or a flogging for woman and children. Anyone who provided lodgings to such people did so under threat of the same penalties. The *Capitano di Campagna* and his soldiers, the knights and police agents (*birri*) of the *Capitano di Giustitia* and the *Capitano del divieto* were to carry out the
punishments and then remove offenders from the territory under threat of losing their office. The *Capitani custodi* and gate guards were ordered to refuse entry even to those who possessed a *fede di sanità*. Anyone who had commercial dealings with those from suspected areas and did not inform the *Collaterale* after the publication of the *grida* did so under threat of the gallows and confiscation of goods. Reporting those who contravened the order was encouraged as informers would remain anonymous and would be rewarded with the aforesaid portion of the confiscated goods. Using a *fede di sanità* issued to someone else, either for the person or for goods, was also a punishable offence. If the person used the *fede di sanità* to enter Mantua and it was discovered that he or she came from one of the banned areas the punishment would be death. If the person came from an unsuspected area then the punishment was a fine of 50 *scudi*; no exceptions or protestations of ignorance were allowed. Finally, anyone wishing to leave Mantua had to obtain a *fede di sanità* from the *collaterale*. These controls may partly explain why the disease was not worse in the autumn and winter period. The emphasis, as stated in the opening lines, was on prevention and was based on restricting the movement of people from suspected areas, and also those considered to be engaged in a potentially dangerous profession, or whose provenance could not be easily established. \(^{30}\) How frequently any of these punishments were implemented is unclear. \(^{31}\)

The orders were applicable to varying sections of the community in Mantua and involved a number of officials. The *Collaterale* was the most prominent official which is not surprising as his office had responsibility for the movement of people within Mantua. Aliprandi’s actions mirror those of previous *collateralì*; including a tightening up of borders, both internal and external, and the exchange of information through official channels and news provided by

\(^{30}\) ASMn., b. 3048, c. 23.

\(^{31}\) The health office archival materials for the period under discussion here do not contain judicial records. However, it may be possible to discern punishments for contravention of public health regulations in the *Tribunale di Giustizia Civile e Criminale e Dipendenze* section of the archive.
travellers, workers and informants. Again, as in previous epidemics he dispensed *fede di sanità* and licences that were central to the regulations and allowed a restricted level of trade and travel. It is worth noting that during this epidemic his office also received a portion of any fines.

In the final chapter of his book, *Libro del conoscere la pestilenza* published in March 1576, the Mantuan doctor Giovanni Battista Susio gives an insight into the role of the *Collaterale* during epidemics. First, Susio states that the advice he gave in the text was for the good of everyone and provided a general view of the work of health officials.\(^{32}\) Once chosen by their prince or lords, the gentlemen had to understand that their office was first and foremost to loathe (*schifare*) disease in other areas that could spread to their territory via contagion.\(^{33}\) He stressed the practical and administrative role of health officials. Their responsibility was being vigilant to the presence and threat of disease from other areas, and then taking appropriate preventative action. He warned against following the views of the people, or riffraff (*popolaccio*) as he often referred to them, too closely because as soon as any exterior marks such as *petecchie*, buboes, other apostems or *carboni* appeared they called it pestilence.\(^{34}\) Given

\(^{32}\) Giovanni Battista Susio, *Libro del conoscere la pestilenza* (Mantova, 1576), c. 68. He contributes to the debate on what constituted *vera peste*. In a letter dated 18 March 1576 he informed Duke Guglielmo Gonzaga that the book had been printed and that it required the table which he had recently finished, ASMn., b. 2598, c. 40. Therefore the text had been completed during the initial and comparably mild infection, and was printed just as the epidemic was intensifying in the city. However, in the correspondence of Giovanni Aliprandi, Susio treated a number of patients in the winter period, for instance on 28 October 1575 Susio reported the deaths of two women he had been treating to Giovanni Aliprandi, ASMn., b. 2595, 28 October 1575, Giovanni Aliprandi; which is perhaps why he was so aggrieved at the criticisms levelled at his first book that he issued a retort in 1579, *Libro secondo. Del conoscere la pestilenza. Di m. Gio. Battista Susio. Doue si mostra che in Mantoua non è stata l’anno MDLXXVI infermità di simil forte, & si difendono molte cose che furono scritte nel primo libro*, printed in Brescia.

\(^{33}\) Susio, c. 68.

\(^{34}\) Ibid.
the complicated nature of the disease, dealt with earlier in his text, doctors were best placed to give a diagnosis, not the people. He followed with praise for the diligence of the present Collaterale Aliprandi. According to Susio, Aliprandi sought all good advice and in many difficult times brought about by the malignity and ignorance of others he did not go beyond the scope of his office, and with skill and love for his country ‘tried to know the truth.’

Both the gride and Susio refer to Aliprandi as the singular Conservatore della sanità, yet he consulted with the Senate on a number of occasions. It is probable that some of those who were appointed as Conservatori della sanità in March 1576 played a secondary role in the initial period of suspicion and mild infection. On 12 September 1575 Aliprandi wrote that he had met with the President and members of the Senate to discuss the provisions necessary to conserve the city from the nearby pestilence. He then set out detailed plans for guarding the city gates. The Jewish community did not want to pay the 6 scudi for guards at the Predella, Cerese and Catena gates. The Catena was identified as being of particular concern as a great number of people passes through it but there was not a paid guard to regulate entry. A temporary resolution to the problem was to employ two merchants to guard each gate. The provisions for the confini were yet to be decided upon. On 18 September Aliprandi wrote that he had put a ‘health guard’ at the San Giorgio gate, paid for from money given by the Jews. Therefore at this stage in the epidemic the ground work was being laid for a more formal group of health officers, with a clear hierarchy, unlike during the plagues discussed in the previous chapter. Meanwhile an additional layer of officers employed by the health office were stationed at weak points.

35 Ibid.
36 ASMn., b. 2594, 12 September 1575.
37 ASMn., b. 2595, 18 September 1575, Giovanni Aliprandi.
Another striking difference was the volume of information relayed by other health boards that became more detailed as the plague spread and worsened. As has been indicated by Cipolla and other scholars the number of health boards grew during the sixteenth century. There is abundant evidence for this increase in letters sent from other health offices referring to themselves in such terms, not only from named individuals as had been the case in previous epidemics, but also in the number of references made by the Mantuan Conservatori to incidents reported elsewhere. A consequence of this increased dialogue is the wealth of extremely detailed information about events in a number of places in Aliprandi’s letters. On 19 August 1575, for instance, Aliprandi sent a lengthy missive relaying information sent by the health office in Verona. He advised that in Trent, from the beginning of the month until the 18th, 2200 people had died and in the first week of August fifty-six perished. Further, four infected houses had recently been discovered. Trent was split into four quarters and there were 247 suspected houses in total.

Maintaining channels of communication to transport essential news was another persistent problem. On 5 September 1575 Aliprandi discussed the arrival of a letter from the Deputati della Sanità in Verona: their representative reached the border town of Castiglione Mantovano where local officials were loathed to accept it and therefore Aliprandi sent instructions explaining how to properly purge it. The letter eventually arrived in Mantua and the Sanità argued that the city of Verona was not so infected that it merited being banned by Mantua. Aliprandi quickly took the letter to the President of the Senate who

---

39 ASMn., b. 2594, 19 August 1575. The letter also contains information about cleaning methods and how the poor were being treated. In one lazaretto there were 338 suspected, who would be liberated in a few days. In another lazaretto there were 170 sick and in a third another 146 sick. Forty men and twenty women were employed to clean things. Each day the poor were given a measure of grain and also wine. They did not have any plague doctors (medici sopra la peste), and there was in disorder (gran confusione) in the city. Similar information was given about events in Rovere.
discussed it with the other Senators and concluded that they would send some doctors to investigate; he added that a Doctor Valla would be sent, along with those who had gone before indicating the Mantuans also participated in the exploratory trips to other towns and cities.40

On 9 September the Sanità of Verona had once again written to Aliprandi to explain in detail the causes of concern in the city and their plans to resolve them. After the ban placed on the city by Mantua some sequestered people, described as poor and in need who had suffered considerably (hanno patito assai), had died. Doctors and surgeons who examined them did not find any cases of mal contagioso, only petecchie maligna and certain signs that would usually be cause for suspicion. They decided to enclose the houses ‘as is usually done each time there is a small suspicion’41 because the disease continued to spread. Once these suspicious cases were resolved the rest of the city would be free and clean; with the proviso that the plague sick would be sent to the lazaretto and any suspected person would be sent to a separate place. The Sanità of Verona hoped this remedy would bring good health.42

Aliprandi reported on 12 September that a messenger had arrived from Venice bringing news that as plague had spread (fa gran progresso) in Verona they had banned it and were going to send doctors to assess the situation.43 On 17 September, Aliprandi wrote that the previous Saturday a group of six, comprised of doctors and surgeons, from Venice arrived in Verona: they found fourteen infected contrate and that after seven days 185 people had died of

40 ASMn., b. 2595, 5 September 1575, Giovanni Aliprandi.
41 ASMn., b. 2595, 9 September 1575, Giovanni Aliprandi. ‘come furono ogni volta che glie pur un minimo sospetto.’
42 Ibid.
43 ASMn., b. 2595, 12 September 1575, Giovanni Aliprandi.
plague and *carboni*. In the same letter, perhaps confirming the need to protect borders against the Veronese, a Conte Marogola had returned from Verona and soon thereafter two of his servants died. Aliprandi wrote to the local official to ascertain the condition, and if it was true then the market of Sermide would be banned and the bridges on the Po would be lifted. Yet, on 22 September, he heard from the *Vicario Generale* of Sanguaneto that the *Deputati della Sanità* of Venice had written to say they had liberated the Veronese, allowing them to enter anywhere in the state of Venice with their *fede di sanità* and that therefore they could go to the market at Sanguaneto. Aliprandi intended to write to the Venetians to discover what was happening.

In October 1575 reporting suspicious cases in the city as well as the state amplified. Aliprandi not only received information about suspicious cases elsewhere but in turn had to relay information about Mantua. On 8 October Aliprandi informed Libramonte that he had written to Parma, Brescia, Cremona and Ferrara to inform them that a young man had died in a small house in the Mantovano far from the city. As the man was suspected of having plague, the house and its contents were burned. On 11 October 1575 Aliprandi stated that the Senate recommended that he report that some poor in the city were ill with *Petecchie*, and could possibly die if a doctor was not provided for them. The chronicle *La insalata cronaca Mantovana dal 1561 al 1602* by Giovanni Battista Vigilio includes a lengthy account of the plague epidemic, which drew notice a century later from Scipione Maffei in the *Annals of Mantua*, published in 1675. Maffei wrote that the epidemic lasted a long time, was 'very cruel and is

\[\text{La insalata cronaca Mantovana dal 1561 al 1602, by Giovanni Battista Vigilio, eds. C. Mozzarelli and D. Ferrari (Mantova, 1992), p. 48. Section on the plague, pp. 47-54.}\]
minutely described by Vigilio.49 The section of La insalata describing the plague begins under the heading ‘terrible memory’ (brutta memmoria). Vigilio wrote that the first suspicions of plague in Mantua began in September 1575. On the 15 October after the death of a notary, Giovanni Lucido Massi, four pizzamorti were appointed, given a salary and stationed at his home near the Gatta Marza area of the city50; however, this did not result in an official recognition of infection.51 Therefore, from the middle of October 1575 Aliprandi and the Senate were aware of an infection of some kind within the city.

At this point Aliprandi’s focus also moved from other parts of the state to cases in the city. On 17 October he wrote that a woman’s death had been reported; she had a carbone on a shoulder and a further cause for concern was that her daughter had died in the same location some days previously. He commented that the death could have been the result of not having been seen by a barber or surgeon who could have medicated her.52 Later that day he updated the case: Ercole, the office surgeon, had examined the corpse and found no suspicious signs.53 Aliprandi also raised the need to find resources for a doctor and surgeon to visit the poor.54 The following day another two people had been reported: one had been ill for eight days with a carbone on one leg and

50 This chronicle is the basis for much of the comment on this epidemic: such as Amadei in his Cronaca universale della città di Mantova, Carlo D’Arco published the section on plague in Studi statistici sulla popolazione di Mantova (Mantua, 1839) and also in more recent articles by Belfanti and Lodigiani.
51 La insalata, p. 49. He also mentions the appointment of a group of Conservatori della sanità, and comments on the publication of a grida issued by them on 29 March 1576 motivated by the epidemic.
52 ASMn., b. 2595, 17 October 1575, Giovanni Aliprandi.
53 ASMn., b. 2595, 17 October 1575, Giovanni Aliprandi. Also wrote that he spent time with the Senate, discussing what provisions to make.
54 ASMn., b. 2595, 17 October 1575, Giovanni Aliprandi.
died in the same house but in a different room where others had died in the
previous few days; the second person died within three days but without any
other signs, which Aliprandi believed to be *mal pestilentiale*.\(^55\) He also gave a
detailed report about a woman found dead outside the Cereso gate. She had
entered the Mantovano with a *fede di sanità* from Ferrara with a group of
people, but they left her behind as she was old and had been sick with a fever
for ten days.\(^56\) These cases, and others discussed below, led Aliprandi to express
his concerns that the illness was close at hand, such that ‘we are scared of
everything and as a consequence we are being very prudent’; for instance he did
not want to let anyone be buried without having been checked first.\(^57\)

Another indicator of the increase in health offices was official visits made
by representatives of other health offices. On 12 November 1575 Aliprandi wrote
that ‘many communities have sent their doctors to this city to discover if we are
healthy’, adding that they left satisfied and very surprised about the gossip
(*delle cianze che vanno attorno*); presumably that Mantua was infected.\(^58\)
Several days before the letter quoted at the beginning of this chapter, a
delegation of doctors and health officials from the Brescian health board visited
Mantua. Aliprandi reported that they had left on 24 March apparently satisfied
with what they found. He commented that ‘I gave them all the satisfaction it
was in my hands to give them’, as did Susio, a doctor Bertholdo, and the surgeon
of the office.\(^59\) Such confirmation however, is questionable as the visit ended just

\(^{55}\) ASMn., b. 2595, 18 October 1575, Giovanni Aliprandi.

\(^{56}\) ASMn., b. 2595, 18 October 1575, Giovanni Aliprandi.

\(^{57}\) ASMn., b. 2595, 19 October 1575, Giovanni Aliprandi. ‘Noi siamo tanto vicini al male che d’ogni
cosa abbiamo paura, et per conseguenze andiamo molto circonspetti.’

\(^{58}\) ASMn., b. 2595, 12 November 1575, Giovanni Aliprandi. ‘se non che molte comunità hanno
mandato li suoi medici in questa Città per chiarirsi se siamo sani.’

\(^{59}\) ASMn., b. 2598, c. 10. ‘Et hoggì partiranno per quanto m’hanno detto, et pare che partino
sodisfatti quanto al sospetto della peste. Le ho dato tutto quella sodisfazione ch’e stata in mia
mano da poterla dare, il simile mi dicono have fatto Susio et Bertholdo et il Cirurgo del ufficio.’
two days before the escalation in actions and in the midst of one of the worst months of the epidemic.

Other qualitative and quantitative sources, the chronicle La insalata cronaca Mantovana dal 1561 al 1602 by Giovanni Battista Vigilio and the city’s necrology, corroborate the crisis point precipitated by the concern with increasing numbers of deaths highlighted by Aliprandi. Within his narrative account Vigilio also included several lists: the number of deaths in the city and lazaretto from September 1575 to June 1577; the number and dates of those who completed quarantine and returned to the city; and also those who died in the city and were suspected (di sospetto) from June to December 1576. The list of deaths per month is a striking feature of Vigilio’s chronicle and he gives a final total of 6393 deaths, 931 of which were in the lazaretto. As Ann Carmichael cautions when looking at narrative histories of plague epidemics we must be aware that they are often retrospective and ‘typically impose a narrative order on a past plague, assigning a beginning, middle, and end, and selecting which facts and memories are needed to capture the essence or meaning of the plague.’60 However, with Vigilio’s text it has been possible to compare and verify that the monthly death totals he gave match the city’s necrology. Even a numerical error which occurred in the necrology was actually copied by Vigilio: an error when numbering entries in the necrology increased the number of deaths in December 1575 by ten, as the final death is recorded as number 363 but there are 353 deaths listed. Given the match between the chronicle and the necrology the figure of 6393 would seem to be a reasonably reliable number.

60 A. Carmichael, ‘The Last Plague: The Uses of Memory in Renaissance Epidemics’ in Journal of the History of Medicine, vol. 53 (1998), p. 134. In a review of this chronicle Trevor Dean argued that Vigilio was an outsider looking in at the court, and was primarily concerned with praising the Gonzaga family to whom it was dedicated, in European History Quarterly, vol. 24 (1994), p. 611.
The necrology provides more detail on individual cases than the chronicle. However, before analysing the *libri dei morti* several problems must be addressed. The records were usually kept and compiled by the office of the *Collaterale*. Roberto Navarrini suggests it is possible that records were kept from the 1450’s. Yet the first reference in an official document to the *libri dei morti* is in a decree issued by Francesco II in 1504. The information the necrologies contain was copied from reports by either the *Capo di contrata* or a medical person attached to the office. They are not as medically detailed nor as sophisticated as those produced in Milan, Venice or Florence and do not vary in format or content until at least the 1630’s. For our purposes, it is possible to utilize the information they contain to examine the duration of illness before death and to determine the neighbourhoods of the city with high mortality rates during this epidemic, to provide a background for the actions taken by the city authorities.

The layout of information in the necrologies follows a basic format of a first name, family name, occasionally occupation, the area of the city, the illness or cause of death, duration of illness and age. The illness or reason for death almost invariably was or included a fever, with little distinction between types of fever. A further problem with this necrology, unlike those for Venice or Milan, is no differentiation was made between deaths from plague or *mal contagiouso* and other illnesses, such as by a cross, or does it state if the deceased died in the *lazaretto* or in the city. Libramonte described the format of the daily death reports, stating that they were divided in to those in the city and those outside at the *lazaretto*. Those in the city were in two parts: the first were non suspicious deaths, the second were suspected deaths. Unfortunately, these details were not transcribed into the necrology. To find deaths specifically attributed to plague in the necrologies we have to turn to the epidemic in 1527-

---


62 ASMn., b. 2598, c. 401. Notes of this sort are scattered through the correspondence. Perhaps Vigilio had access to these notes when compiling his chronicle.
8, when plague deaths were clearly identified. For instance, in June 1527, there were twenty-two plague victims all of whom died in eight days or less, with an average illness of four days, and in July there were nineteen plague deaths with an average duration of 3.7 days. This is in stark contrast to the extraordinary level of detail given by doctors in the Milanese necrologies, which have been studied in detail. Cohn has analysed the descriptions given by doctors to demonstrate a variety of symptoms, ‘at least twenty-two terms are employed to name the pestilential swellings in the Milanese death records’, and their position on the body.

The Mantuan records do not have medical details comparable with the case descriptions in the Milanese necrologies. Unfortunately the medical reports given by doctors and surgeons were not fully transcribed into the necrology. In the Mantuan archive a file contains letters and papers pertaining to the latter part of 1575 that give details of a number of plague cases and other deaths. One of the contributors was Ercole Lughignani, the surgeon employed by the office of the Collaterale. An undated letter from Lughignani details the case of a Masso family outside the Predella gate, the same part of the city mentioned in La insalata, which was pinpointed as the first plague case or source in Mantua. Lughignani had been ordered the previous day to visit the Masso house where he found both Masso’s wife and young daughter with very high fevers and many bad signs. He expected the daughter would die and found the wife to be mad (fuor de se), but questioned her about the duration of the fever and if they had any other illness in the household, to which she replied no. After the death of the daughter he returned and discovered many livid, very big and ugly petecchie on her body. He questioned her mother who initially denied having any markings,

64 Cohn, Cultures, p. 45.
but eventually was forced to admit she had a *carbone* in the join of the left knee and the beginning of another below it.

I have not been able to find cases without dates, or a number of cases dated the first week of November 1575 in the corresponding necrology. However, I have found seventeen cases which match deaths recorded in the necrology. If deaths within seven to eight days are considered to be suspicious we can see when information was entered into the necrology valuable medical detail was excised. Doctor Raphael Copino, a member of the College of Doctors, reported that in the neighbourhood of Santa Croce the son of *Maestro* Girolamo Costa died in five days. He was first troubled with worms; then three *carboncelli* were found on the left side of his chest. The corresponding entry in the *libro dei morti* is dated 19 November and was the 223rd death recorded that month as ‘Francesco son of *Maestro* Girolamo Costa in the neighbourhood of Montenegro died of fever and worms, was sick for twelve days, aged four years.’ Santa Croce and Montenegro are parish and administrative names for the same area of the city. There was considerable difference in the duration of illness. However, it illustrates when information was entered into the necrology much medical detail was extracted, possibly reinforcing the administrative rather than medical purpose of the office which kept these records.

On the 5 December 1575 in the parish of San Leonardo, Lughignani reported that the wife of Bartholomeo Casoto died in five days of a malignant fever with a swelling under her right armpit. The death was entered in the necrology under 6 December as the 83rd death that month; a Domenica wife of

---

65 ASMn., b. 2594, no number and undated.
66 ASMn., b. 2594, no number and undated.
68 ASMn., b. 2594, no number.
Bartholomeo Casotto in the *corno* area of the city died of fever in five days and was forty-two years of age. In the necrology the previous entry was a Bartholomeo Casotto, her husband, who also died of a fever in five days at age fifty. On the same day in the San Gervasio parish the surgeon reported Cecilia di Boldrini died in two days of a malignant fever with a swelling under her right armpit. This was entered on 6 December as Cecilia wife of Benedetto di Boldrini from the *corno* neighbourhood who died of a fever in three days and was forty years of age. Deaths recorded by Lughignani that do not have a date are listed by households where multiple deaths occurred. For example, in the house of a cobbler named *Maestro* Ludovico in the Pescaria Vecchia area of the city three died: his oldest son of a malign fever, his wife of the same illness and the younger son of an acute fever with a *carbone* on a leg. In the same neighbourhood next to a *Maestro* Sebastiano da Glossi, the wife of a Marangone and two children died of a malign fever. In the same report a précis of the Masso case was given again. He wrote that in the house of a Masso four died, one of his sons with two *carbone*, a daughter with a swelling, and his wife with two *carbone*. The other son was not seen by him. This one page report describes ten deaths which could have been plague or *mal contagioso* but which are not accounted for in the *libro dei morti*. Not only has valuable medical detail been left out, it is also possible that a number of deaths were not added to the necrology. Therefore, Vigilio’s total death toll of 6393 is perhaps a lower estimate.

Although medical details such as bodily skin disorders have not been added, it is possible to use the information given to reveal other insights. Belfanti and Del Panta have used data from the register to demonstrate that the

70 ASMn., b. 2594, no number.
71 ASMn., Affari di Polizia, *libro dei morti*, vol. 12. Her daughter is the next name in the necrology, ‘Insabetta daughter of Benedetto di Boldrini’ who also died of fever in 3 days aged 8’.
72 ASMn., b.2594, no number.
epidemic affected young adults the most.\textsuperscript{73} The duration of illness before death was also an important identifier and we can use this information to see a significant change in the two plague periods. Again considering deaths within a week attributed to fever as being suspicious, we can see from the graph below (Figure 1) in the two periods of elevated mortality, from November to December 1575 and in March 1576, the number of deaths within eight days of illness, and within four days increased. This gives further credence to the view expressed by the Milanese Somenzi that ‘early on its city authorities had ‘neglected’ to call the plague a plague.’\textsuperscript{74}

Figure 1: Deaths recorded in the necrology, October 1575- April 1576.

The table below (Table 1) shows the total number of deaths by plague and other causes in each of the four quartiere of the city, the three borghi and where no place was given.

\textsuperscript{73} See Belfanti, ‘Mantova e la peste’, pp. 65-6; L. Del Panta, \textit{Le epidemiche nella storia demografica italiana (secoli XIV-XIX)} (Turin, 1980), pp. 46-7, see p. 47 fn. 6 for a table with this data.

\textsuperscript{74} Cohn, \textit{Cultures}, p. 168.
Table 1. Monthly death totals per quarter and *borghi* of the city, 1575-6, from *libro dei morti*

As the necrology includes the *contrata* or neighbourhood where the death occurred, we can analyse the incidence of deaths across areas of the city. Deaths recorded in the San Pietro quarter increased dramatically in March 1576, with almost three times number of deaths than the previous month. The graph below (Figure 2), shows the number of deaths in the five *contrate* of that quarter of the city.

<table>
<thead>
<tr>
<th>Quartiere</th>
<th>October</th>
<th>November</th>
<th>December</th>
<th>January</th>
<th>February</th>
<th>March</th>
<th>April</th>
</tr>
</thead>
<tbody>
<tr>
<td>S. Pietro</td>
<td>38</td>
<td>46</td>
<td>59</td>
<td>52</td>
<td>54</td>
<td>141</td>
<td>56</td>
</tr>
<tr>
<td>S. Jacopo</td>
<td>62</td>
<td>115</td>
<td>98</td>
<td>60</td>
<td>51</td>
<td>112</td>
<td>51</td>
</tr>
<tr>
<td>S. Nicolo</td>
<td>82</td>
<td>59</td>
<td>89</td>
<td>57</td>
<td>65</td>
<td>173</td>
<td>75</td>
</tr>
<tr>
<td>S. Andrea</td>
<td>60</td>
<td>119</td>
<td>84</td>
<td>65</td>
<td>63</td>
<td>207</td>
<td>66</td>
</tr>
<tr>
<td>Borghi</td>
<td>11</td>
<td>15</td>
<td>19</td>
<td>12</td>
<td>20</td>
<td>27</td>
<td>11</td>
</tr>
<tr>
<td>None</td>
<td>2</td>
<td>4</td>
<td>4</td>
<td>5</td>
<td>1</td>
<td>14</td>
<td>3</td>
</tr>
<tr>
<td>Total</td>
<td>255</td>
<td>358</td>
<td>353</td>
<td>251</td>
<td>254</td>
<td>674</td>
<td>262</td>
</tr>
</tbody>
</table>

Figure 2: Deaths in the five *contrate* of S. Pietro, March 1576
This is relevant as the Ducal Palace is in the Aquila neighbourhood in the San Pietro quarter of the city. The rising death toll in this part of Mantua, the governmental heart of the city, must have been another contributing factor to the official declaration of plague at the end of March 1576. Further topographic and demographic research is necessary to set this information more deeply in an urban context. Although the Mantuan necrologies are, in comparison with those compiled in Milan, extremely basic they shed light on the uneven spread of the disease in the city.

The necrology ends abruptly on 7 April 1576, the month of the highest mortality. We can use Vigilio’s chronicle to list monthly death figures for the duration of the epidemic, but we are unable to explore how or if the symptoms or length of illness changed from this point.

![Figure 3. Deaths per Month September 1575-June 1577, from Vigilio's La insalata, p. 48](image)

75 See appendix 3.
76 It may be possible to analyse parish records such as Stefano D’Amico has done for Milan, however, this is beyond the scope of this thesis. See Le contrade e la città: sistema produttivo e spazio urbano a Milano fra Cinque e Seicento (Milan, 1994).
The increase in mortality called for a more serious response and Duke Guglielmo appointed a group of *Conservatori della sanità*. Vigilio named them as Guilio Cavriani who was replaced by Paolo Bardellone as president, the *Collaterale* Giovanni Aliprandi, a doctor Nereo Strada, Massimo Gazino, Conte Claudio Bagno, Ascanio Arrigone and Maestro Battista Ottino. He commented on the publication of a *grida* by them on 29 March that banned the mendicant poor and ‘many other things’ due to the suspicion of plague.

The composition of the *Conservatori* follows Cipolla’s argument that health boards were manned chiefly by administrators. However, they communicated daily with doctors, barbers surgeons, apothecaries and others to discuss and implement ideas. As we shall see doctors, particularly those belonging to the College of Doctors, played a more vocal role in the daily workings of the health board during the plague in 1576-7 than in previous epidemics. Carlo Marco Belfanti describes the *Conservatori* as a kind of health agency which given the unusual situation had complete control over life in the city. However, this statement requires some qualification. From their letters, the health office had authority to impose taxes or exact service from people, including the College of Doctors, and likewise had authority to appoint doctors, barber surgeons and others, to carry out certain tasks. Yet, they did not have automatic uncontested authority over these other professions. The Mantuan state differed from the Venetian case where as Palmer demonstrated the social status of the *Provveditori alla Sanità*, had declined by the early sixteenth century. Men from different offices and governmental positions were integrated under the guidance of one of the highest officials, the President of the Senate. Arguably this approach was more effective than a separate and specific office as in Venice or indeed Milan; however, this is not to underestimate any

---

77 *La insalata*, p. 49.

78 Ibid.

disagreements or problems which may have occurred through the temporary appointments.

As we have seen in the first part of the sixteenth century, in particular in 1506, the Collaterale began to be relegated by other officials, certainly in terms of communicating with the Gonzaga; although he remained a vital official. In 1576 even after he was superseded, the Collaterale was still heavily involved with the daily work of the health board. Initially, and at least until late April he corresponded with the secretary Libramonte about plague related matters. On 24 March he began the joining together of parish and civic workers by reporting that:

‘I gave the order, with participation of the Senate, that all the capi di compagnia should go on guard with their parishioners, and make a list of the sick who are in need for any reason and bring it to me.’

There was evidently a suspicion of plague ‘in these times’ as the goods of those who died had to be closed in a locked room with the windows open, day and night, and the key given to the Capi di contrada. People who lived in one room or who did not have a bed but slept on straw had to have their goods cleansed, and he added that the goods would not be destroyed in the process.

Giulio Cavrini, according to Vigilio, was for a brief period of less than a month head of the Conservatori. However, for reasons that are unclear he was replaced by Paolo Bardellone in late April 1576. The transition is evident in the volume and content of Aliprandi’s correspondence. He reported the concerns

80 ASMn., b. 2598, c. 10. ‘Ho dato commissione con participatione del senato a tutti li Capi di Compagnia che vaddino con li suoi parochiani, che sono nella sua guardia facendo la lista dell’infermi che sono in necessità causata da quel si voglia cagione et quella portino a me.’

81 Ibid.
and actions of the health office until 25 April, when Paolo Bardellone accepted the position of president of the Conservatori and visited the office to show them his letter of instruction given by Guglielmo, perhaps hinting at a less than easy transition.\textsuperscript{82} After this point the extant letters detailing the work of the Conservatori are signed by Bardellone, even on occasions when illness precluded his participation in the daily work. Aliprandi’s role at the centre in running the office, occasionally in consultation with the Senate, was at an end. The letters describing the course of the epidemic also demonstrate a further move away from, not only the Collaterale as the head of the office, but also from direct access to the Duke as his secretary Libramonte was an intermediary. In a letter dated 22 May, Libramonte commented that the first gentlemen had succumbed to plague; a crucial indication that the disease was indeed true plague.\textsuperscript{83} He also presented an unusual, and perhaps erroneous, picture of the psychological state of the city stating on 22 May that the city was improving and that the inhabitants now lived without fear, while in the towns people were having celebrations (feste).\textsuperscript{84}

Thus the majority of the correspondence describing this epidemic was produced by two main protagonists, Aliprandi and Bardellone, who at varying times had responsibility for reporting events and decisions to Libramonte and ultimately to Duke Guglielmo. Permission or assurance was sought from the duke for the implementation of a number of regulations; additionally the Conservatori petitioned him when problems of jurisdiction arose, such as the appropriation of religious buildings to house the sick. Therefore the Conservatori did not act with full autonomy. They mediated between various groups in the course of their work as the previous health officials had done to some extent. The difference in 1576 was this involved more groups, greater dialogue and in-depth discussions, and the co-operation of a number of secular and ecclesiastic bodies.

\textsuperscript{82} ASMn., b. 2597, c. 146.

\textsuperscript{83} ASMn., b. 2597, c. 416. Cohn, Cultures, p. 170. See section on ‘vera pestis’, pp. 162-76.

\textsuperscript{84} Ibid.
In addition to the letters, the *Conservatori della Sanità* produced a number of documents describing the various facets of the arduous task they faced. The date of their appointment given by Vigilio corresponds with a document held in the health office archive dated 27 March. It describes eight *Ordini* decided upon by the *Provisori alla Sanità* and the *Collaterale*. This document was not a published proclamation. First, four doctors and surgeons were appointed to each quarter of the city and paid ten *scudi* per month. Poor foreign beggars were banned from Mantua and its territory, and no one was allowed to provide them with lodging or charity. Those who did had three days to report it to the relevant authority and contravention meant torture by the rope. Two men had to be chosen from each parish to visit houses with ill people and to report them and any requirements they had, which would be provided for. Anyone who had a stench in their home or had rubbish, including dung, in the street had to clean it, as specified in a previous proclamation, and to keep the street clean. The monastery of San Pietro d’Ongaria was designated as the *lazaretto* and a list of required personnel given. The *Capi di Compagnia* had to seek out and report all the ill under their guard, from the 28 March this included the Jews. The search for the poor in the city was to be renewed by those deputised. Finally, the money needed to meet the requirements of the orders was deposited in the *Monte della Pietà*. In conclusion, Aliprandi wrote that the orders were decided upon that morning by the *Conservatori* and that if anything else occurred to them or if others brought ideas to them, he would give Libramonte notification of it. These orders are a reinforcement of the approaches we saw detailed in the *gride* with the addition of some important ideas; such as the creation of a *lazaretto* and the provision of medical care for the poor in the city. The substance of the eight *ordini* and the earlier *gride* can be found in the more extensive and detailed account of the methods to control and eliminate plague or *mal contagioso*, the *Capitoli delle provisioni del male contagioso Del’anno 1576*. It is a valuable example of public health theory from a city which had not experienced a plague outbreak, certainly not of equivalent

---

85 ASMn., b. 3048, c. 121.
severity, for fifty years. This fascinating document will be discussed in the following chapter.

Monitoring disease from individual plague cases to other states remained a core component of the work of the newly formed group of Conservatori. Again, the exchange of information was crucial and, as we have seen, Aliprandi had access to a level of information unlike previous Collaterali. The import of such details continued and intensified under the Conservatori, as the summer of 1576 was perhaps the worst of the epidemic across the peninsula. In a practical sense this made the communication of news more difficult because of travel restrictions. Messengers taking information to Venice as quoted at the beginning of the chapter raised such concerns. On 8 October Bardellone reported that messengers were complaining that they could not find accommodation in San Benedetto, neither in the inns nor from the holy fathers. Another problem involving travel was the fede di sanità, which were a cause of contention as their authenticity could not, at least initially, be certain. Aliprandi reported that in some castellanze and towns in the contado those who left Mantua with fede di sanità, and therefore were given a clean bill of health were made to carry out quarantine periods in their homes. Aliprandi states this was in direct contravention of the authority of the Conservatori and suggested action be taken to ensure that those places did not think themselves to be more important than the city. This problem was not unique to Mantua as Stevens Crawshaw points out in 1576 Venetian officials wrote to Padua and ‘each of the cities

86 E. Ghidoni, ‘La peste e le poste’, pp. 121-35. Ghidoni also points out the effect restrictions on communication had on the delicate diplomatic negotiations regarding Guglielmo Gonzaga’s imperial titles, p. 123. He points out that Guglielmo used the state of Mirandola as an intermediary area where important correspondence was sent.

87 ASMn., b. 2597, c. 442.

88 ASMn., b. 2598, c. 39.
within the terraferma of their displeasure that Venetians issued with *fede* were not allowed entry ‘to pass’.’ 89

The search for news and to corroborate and confirm evidence was a constant concern. On 10 December the Governor of Solferino sent news about the health status of Brescia where several days before two people were discovered with a *giandussa* and some others with *petecchie*. 90 Four days later Bardellone reported information from the Marchese of Castiglione that in Brescia a number of suspicious deaths had occurred and the other household members were quickly moved to the *lazaretto*. As a consequence Bardellone sent one of his doctors to investigate. He questioned doctors and apothecaries, and also sought out friends to probe and discovered no new cases had been reported. Therefore as nothing new had happened one could call the city free from disease (*liberissima*). Further, those sent to the *lazaretto* were doing well and the officials were waiting to purge and clean suspected houses. News had also reached Castiglione that things were going well in Milan as it was eight days since anyone had died in the *capane* or in the city, but things were still uncertain in Pavia. 91 On 31 December Bardellone reported that they had written to Volta, Medole and Capriana to find out the health status of Brescia, adding that if they obtained information through other means they would let Libramonte know, so that he would be as well informed as possible. 92

One perhaps extreme example of the collection, interpretation and usage of information about the spread of plague began in late August 1576. As mentioned above the Milanese attributed the spread of plague to Marignano on

89 Stevens Crawshaw, *Plague Hospitals*, p. 81.
90 ASMn., b. 2597, c. 598.
91 ASMn., b. 2598, c. 610.
92 ASMn., b. 2597, c. 648.
the Mantovani, through infected goods and noblemen travelling from Mantua in July 1576. An opinion the Mantovani sought to change. The Mantuan ambassador in Milan, Silvio Calandra wrote to the ducal secretary on 27 August 1576, reporting some unusual news he thought necessary to pass on:

‘Some circumcised Spaniards were caught who said they were converts to the Moslem faith, and were sent by the Turk to spread plague in the Christian world, and they and their companions were the reason for the scourge that all the Christian world was suffering from.’

A few days later, on 30 August, Bardellone reported a similar story. Two carters working in the Milanese territory left just before the passes were closed. They were examined over a period of days and confirmed that the Milanese blamed the Mantovani. Bardellone wrote that after examining them, on 2 September, the Milanese Lords were wrong to blame Mantua for having infected them. In the same letter he informed the Duke that the Commissario of Medole reported Brescia was definitely infected with mal contagioso, and that he would write to Solferino to confirm it. The following day on 3 September Bardellone reported information he discovered through a chain of religious informants:

‘Today the father Inquisitor has told me that the Abbot of San Bartholomeo had learned that a Prior of the church who had come from Piacenza, recounted that in Milan two Spaniards had been detained. They have confessed to being paid with another forty by the Turks to go around all of Italy spreading the plague, and having named another three Spaniards who were also arrested, and as two of them

93 ASMn., b. 1693, c. 230. ‘Sono stati presi alcuni spagnoli circoncisi i quali si dice che sono rinegati, et mandati dal Turco per attaccar la peste in Christianita et ch’essi altri loro compagni sono cagione del flagello che si patisce per tutta la Christianita.’

94 ASMn., b. 2597, cc. 349-350.

95 ASMn., b. 2597, c. 356.

96 ASMn., b. 2597, c. 356.
were in Mantua, this could be true, and could change the opinion of
the Milanese lords, who believed it was spread by a Mantuan carter.’

Speculation on plague spreaders also occurred in other states such as in Milan
where rumours surfaced about people spreading a plague poison on doors,
particularly in an area near Porta Nuova. Cohn has shown that the priest Bisciola
was aware of these rumours that resulted in ‘a city-ban, however, prohibited
the spreading of these rumours and replaced them with the counter-claim that
Spaniards trying to raise havoc had unwittingly spread the disease.’ The
Spaniards were again the subject of plague spreading gossip as rumours about
people intentionally and maliciously spreading plague poisons on buildings also
emerged in Padua.

The Mantovani attempted to remove blame not just from themselves but
from the peninsula and from the Christian world completely by implicating the
Spaniards in conjunction with the Turk. This is perhaps an example of plague
spreaders or untori. They are more commonly associated with the epidemics of
the seventeenth century, in particular Manzoni’s plague, in Milan in 1630. Paolo
Preto has argued that for the quattrocento and most of the cinquecento medical
science confronted the problem of plague without fixating on poison and diabolic
intervention. In the central period of the Renaissance, doctors and politicians
seemed to be more concerned with preparing human remedies for the illness,
rather than speculating on potential plague spreaders. However, something

97 ASMn., b. 2597, c. 357. ‘Hoggi Il padre Inquisitore mi ha detto, che dall’Abbate di Santo
Bartholomeo ha inteso, che un suo Frate Prior di detta Chiesa, che vien da Piasenza riferisse,
sicome in Milano sono stati detenuti due spagnoli c’hanno confessato esser pagati con altri 40 dal
Turco perché vadino per tutta Italia attaccando la peste, et havendo nominato tre altri spagnoli
sono stati presi parimente, et che due sono stati in Mantova, questo potrebbe essendo vero, far
mutar opinione a quelle Signori di Milano, che gli sia stata attaccata dal Carrocciero Mantovano.’


began to change in 1576. In his book on plague in Venice, Preto cites five examples of testimonies about *untori*. The first was by a Matteo Zane who reported to the Venetian Senate in December 1576 that plague had been brought to Venice by way of the Levant and some merchants from Algiers. Other examples describe people spreading substances on doorways, such as the blood from plague sores. Therefore, there were rumours implicating the Spaniards and also non-Christians of spreading or at least being infected with plague during this epidemic circulating in the north of Italy. The dual conspiracy of a group of forty Spaniards employed by the Turk is perhaps an unusual example of this external plague spreading threat; it was sufficiently alarming but also quite general. Yet, this information did not manage to alter the opinion of the Milanese.

In fact other examples closer to home give credence to the concern about infected sheets. On 21 May Ludovico Larga wrote from Luzzara, on the southern edge of the state, to inform Mantua that the previous day someone had died, and it was said with two buboes. He also understood that two small children had died the day before and the doctors believed it to be *mal contagioso*. Further, two infected sheets brought from Mantua were thought to be the cause. The following day he confirmed this and provided further details: two boys died on the Saturday and a young girl the next day. He explained it was true that in total seven other people died, however, he went on to discuss other factors such as duration of illness which would rule out *mal contagioso* in those cases. Libramonte also sent the information to the Duke on 22 May, confirming that the three died as a result of having slept on a pair of sheets transported from Mantua, but as they were enclosed in a house, the authorities hoped no further

---

101 Ibid., p. 11.
103 ASMn., b. 2600, 21 May 1576, Luzzara.
104 ASMn., b. 2600, 22 May 1576, Luzzara.
cases would follow.105 On 27 May, Bardellone wrote that he had received a copy of the regulations made by the deputati della sanità of Luzzara from a Signore Bugno. In this document they argued that mal contagioso had come from sheets carried from Mantua.106 Nonetheless, despite this dispute, in the following days Bardellone wrote that he sent barber surgeons to Luzzara107 and then also sent a prisoner to act as a pizzamorto.108 On 12 June a group of men from Luzzara came through Mantua for the harvest and when questioned about how health matters were proceeding in Luzzara, they reported that things were going very well.109

The waters were muddied again when the Podestà of Luzzara wrote to Libramonte in an attempt to change the poor opinion of him, as word had reached Aliprandi that Luzzara had taken action against the city by banning interaction both of travel and commerce with anyone from Mantua.110 The Deputati of Luzzara denied this charge completely.111 The events in Luzzara throw light on the complex relationship between Mantua and its contado caused by the flow of traffic and of obedience to regulations of the Mantuan Conservatori. Some areas within the state such as Luzzara had their own health office, which could come into conflict with the Conservatori, not necessarily about what actions they took in their own jurisdiction, but about what they did which appeared to be in opposition to or could damage the reputation of the city.

105 ASMn., b. 2598, c. 418.  
107 ASMn., b. 2597, c. 217.  
108 ASMn., b. 2597, c. 222.  
109 ASMn., b. 2597, c. 240.  
110 ASMn., b. 2598, cc. 54-5.  
111 ASMn., b. 2600, 21 April 1576, Luzzara.
Interactions between the city and the contado were not always a source of controversy and dispute. On 24 July Bardellone reported that the men of San Martino de Gusnago had informed the Conservatori that their Deputati della Sanità did not want them to transport their grain to the Fortezza of Ceresario, as it was infected with mal contagioso, and because they did not want to incur a penalty they requested advice about how to proceed. Bardellone remarked that these calamitous times brought many obstacles as a number of their workers (loro lavorenti) were dead, therefore, it seemed reasonable to allow them to bring their grain to Mantua.\textsuperscript{112} On another occasion the officials at Gazuolo wrote informing the Conservatori that they had sacked a pizzamorto as he was found in the house of a gardener, therefore, he had been caught mixing with people which was forbidden. The Conservatori praised their actions, but suggested further corporal punishments would be necessary to discourage this behaviour, as it was an action not to be taken lightly.\textsuperscript{113} The Conservatori showed some concern for jurisdiction over other health offices in the contado; for instance, on 10 July they wrote to Libramonte to ascertain the extent of authority in Soave as they had drawn up provisions for the health officers there.\textsuperscript{114} On 14 December the Massaro of San Benedetto visited the office to explain that the community was suffering because the market had been suspended due to suspicion of plague. As the majority of those in the lazaretto of San Sillo were shortly completing their quarantine, he requested that trade be allowed to resume. Bardellone commented that it seemed to them to be an honest request, but they awaited the Duke’s response.\textsuperscript{115}

The Conservatori, like previous Collaterali, also addressed travel requests from citizens to maintain a level of interaction and movement, or passed them on to Libramonte and the Duke. Several such requests suggest strong links with

\footnotesize
\textsuperscript{112} ASMn., b. 2597, c. 294.
\textsuperscript{113} ASMn., b. 2597, c. 308.
\textsuperscript{114} ASMn., b. 2597, c. 284.
\textsuperscript{115} ASMn., b. 2598, c. 610. For more on this lazaretto see Chapter 6. p. 200.
an area in the Ferrarese state named the Stellate. On 12 October 1576 Bardellone reported a request made by some merchants who wanted to know if they could transfer goods through Serravalle to the Stellate.\(^{116}\) The following day 13 October, Bardellone discussed requests he had previously passed on to the Duke. He made reference to a letter from 4 September when he had given licences to four people who requested to leave Mantua, these requests were dispersed around the contado in Revere, Sermide, Ostiglia, and Quistello.\(^{117}\) The state of the city was also dependent upon subsistence being provided and the Conservatori had to source what was necessary. On 16 October 1576, for example, Bardellone reported that the city had started to run out of hay and straw, and the fenaroli had requested permission to go to collect a portion of what they had; some offered to stay on their boats and not to alight on land, and others wanted to go and see their merchants in the Ferrarese borders. The Conservatori sought guidance on the matter as it was so important to the conservation of the city.\(^{118}\) On 2 November 1576, a merchant Maestro Galeazzo da Campo said he had ‘a very great need’ to visit the border with Ferrara at the Stellate, to take money and attend to his affairs there. In order to be given a licence he offered to go and return by boat and not go on land, if that was suitable.\(^{119}\) On 6 November a Signore Ghiarardo wanted to go back to ‘the border of Ferrara known as the Stellate’ for his own concerns, but this would also benefit Mantua as he could bring merchandise and victuals back to the city, without disembarking on land, except at the Quatrelle.\(^{120}\)

Further problems occurred with the transport of goods, which again demonstrate the complex and continuous need to gather information and also to

---

\(^{116}\) ASMn., b. 2596, c. 445.

\(^{117}\) ASMn., b. 2597, c. 449.

\(^{118}\) ASMn., b. 2597, c. 457.

\(^{119}\) ASMn., b. 2597, c. 496.

\(^{120}\) ASMn., b. 2597, c. 507.
ensure the correct information was given out. On 22 November Bardellone wrote that letters from a Hippolito in the Veronese confini said Mantua was again banned by Verona because of an incident a few days before. A Veronese merchant with a fede di sanità came to Mantua and stayed in the hosteria del Moro, where he was given a bed. He returned to Verona with merchandise from Mantua, and died the following day of mal contagioso. As a result Mantua and the Mantovano were placed under a ban and the merchandise burned. Bardellone was concerned that this would cause great damage to Mantua’s merchants and to their poor. The Conservatori decided to write to the Duke to explain that things were getting better in the city and the ban was unfair (contra ragione). The hosteria was healthy and it was not until after the Veronese stayed there that the hoste and his family became sick and died. The fault lay with the Veronese and their merchant, and not with the Mantovani. The Conservatori wanted to be clear about this and defend themselves from this unjust deed, adding that they were sure that no city was cleaner than Mantua. 121

**Conclusion**

It is necessary to bear in mind that until the end of March 1576 Mantua was not officially infected with plague. Thus when the actions taken by the Collaterale Aliprandi from the summer of 1574 until that point are compared with the activities of the Collaterali and the additional health officials in the early stages of the plagues in the late quattrocento and early cinquecento, we can observe the considerable advances in health office infrastructure across northern Italy. In the course of the epidemic Aliprandi and then the Conservatori had access to an impressive quantity of information from a variety of sources and this collection of information marked a vast difference from previous epidemics. Not only did they correspond with the health offices elsewhere, they sought out as many sources of information as was available to them; such as the doctor who Bardellone sent to question his colleagues and friends. What is more,

121 ASMn., b. 2597, c. 559.
the detail in terms of how many people were ill or had died in a particular area of a town or city is again striking. Reciprocal information extended to explanations about how a health office planned to maintain the good health of the city; as when the Veronese wrote to argue against being banned by Mantua and cited their counter plague strategies as evidence. Just as the Mantuan’s collected and passed on information about other infected or suspected areas, they also had to make sure the correct information was in circulation about Mantua. This was not always possible, for example when Aliprandi remarked that many representatives from other areas had come to the city to ascertain its health status they were surprised to find the current rumours about Mantua were incorrect.

When Aliprandi turned his attention to suspicious cases in the city he relied upon reports from the doctors and surgeon in his employ. These death reports formed the basis for the necrology which was used as a barometer to indicate the level of infection in the city. This is another area where Aliprandi’s correspondence differed from that of previous health officials. They described the physical markings or symptoms of specific people as a matter of course in reports to the Marchese or duke, but were less likely to provide detailed information about deaths attributable to plague. From the analysis of data taken from the necrology we can see the number of deaths within three to four days increased most dramatically in March 1576 which perhaps explains why the Mantovani did not officially declare they were infected until that time.

One comparative with earlier plagues was that the Conservatori did allow movement and attempted to accommodate the requests made by citizens, or passed them on to Libramonte and the Duke. A fundamental concern and motivation for these actions was the potential damage they could cause to the city, either by reputation or in commercial terms. The requests made during this epidemic reveal a strong connection with an area near the Ferrarese border as
several merchants were permitted to travel there to collect goods or conduct business. Requests could also be dependent upon the health office in a particular area of the state. The Conservatori did not have full control over the Mantuan contado and had to establish links and work with other health offices that were not necessarily subordinate to them. This is akin to the situation in the Venetian terraferma where Palmer has argued there was a degree of confusion in the operation of plague controls for most of the sixteenth century; in the Venetian case they were forced to establish a hierarchy of their Rettori and the local officials in the towns and cities. In Mantua however, the Conservatori consulted with the Duke to determine the level of influence they could exert over different areas. This may challenge Belfanti’s argument that the duchy ‘intensified political centralization’ and tightened its control over the contado in the sixteenth century. As we have seen the Deputati in Luzzara were in dispute with the Conservatori and repeatedly asserted that sheets from the city were to blame for the spread of disease. Nonetheless, the city was reliant upon the wider state to supply and sustain in it during the crisis. We now turn to examine in greater detail the actions more acutely related to plague in the city of Mantua itself.

122 See above, p. 21.
123 See above, p. 28.
4. ‘Events pertinent to matters of health’: i Conservatori della Sanità

Once appointed in March 1576 the Conservatori della sanità acted swiftly to manage the effects of the epidemic engulfing Mantua. To build effective defences and strategies they drew upon local examples, past experience and on civic and religious institutions and structures. The fullest expression of these results is found in i Capitoli delle provisioni del male contagioso dell’anno 1576; an unpublished manuscript describing seventy-five actions (capitoli) implemented or discussed by the Conservatori. The orders applied to the whole territory and were directed at ordinary citizens, at doctors, surgeons and barbers involved in caring for the sick in the city and in the lazaretto, and to regulating the gravediggers, those who transported the ill, notaries, merchants and traders, both Christian and Jewish, and also to the sick themselves. By necessity they permeated and fractured social bonds, as kinship and friendship were not sufficient reasons to harbour or visit the sick. The document is a valuable example of the processes and ideas behind government sanctioned public health practices of the late sixteenth century. However, it is important to note that these were the Conservatori’s stated, and certainly intended, aims.

The collation of public health directives by health offices was not particular to Mantua during this epidemic. The Mantovani obtained and retained shorter documents similar in content to the capitoli from Vicenza and Asola, as well as a copy of a text from Ferrara similar to the Ordini created by the Conservatori on 27 March 1576. The purpose, dissemination and format varied, for instance, the Sanità of Modena printed a booklet, Ordini fatti dai Sig. Deputati alla Sanità di Modona per il sospetto della peste, & per la conservazione della sanità delli suoi Cittadini & luoghi, which was in effect a

\[1\] ASMn., b. 3048, Asola cc. 135-157; Ordini Ferrara, cc. 27-30; Vicenza cc. 31-46. See p. 92 for reference to the orders applied in Luzzara.
précis of the Modenese public health practices. The forty-three points deal with aspects of disease prevention and are similar to the Mantuan capitoli: doctors and barbers would be provided for the poor; streets had to be kept clean; undesirable characters were banned from the city; certain foodstuffs such as dead fish, frogs and eels were forbidden; and providing lodging for foreigners was banned. Working with animal skins was prohibited, with a fine of fifty scudi, which also applied to boatmen working in the territory. This was double the twenty-five scudi fine that applied to all capitoli where a penalty was not already defined. The orders reflect great concern with the territory and the mountain passes controlled by the Modenese; for instance, the number of guards would be doubled on a Saturday as it was a busier day. The Modenese were explicit in streamlining travel as outside the city only two inns on the route to Bologna and two on the way to Reggio were allowed to operate. One interesting point is that gentlemen were not required to have a fede di sanità as their word would be sufficient, as in the Mantuan proclamation in 1574. At the end of the document it stated that the orders would be given in printed form to the guardians, officials, innkeepers, Massari of the towns and to others judged necessary to inform. The intended recipients may be one reason there was an emphasis on territorial details; the information was tailored to the target audience. Producing a printed pamphlet incorporating a range of public health procedures would have been an effective way to disseminate such information particularly to the outer parts of the state. It is difficult to assess how widespread such documents were, however, it is sufficient to highlight the collation of counter-plague orders by health offices in a variety of formats and with a number of functions during this epidemic.

---

2 Archivio di Stato di Bologna, Assunteria di sanità, bandi forestieri, cc. 35-40.

3 The copy of the printed Modenese Ordini is held in the Archivio di Stato di Bologna. A search on Edit 16 renders no matches for this document; therefore extensive archival research would be necessary to attempt to address the question of how common such documents were.

4 The Milanese produced a printed pamphlet on 12 August 1585 titled Capitulatione con i Signori, intorno alle occorrenze della Sanità, held in the Archivio di Stato di Milano, Atti di governo, Sanità, numero 7, Gride esterni. This also explains counter plague actions and was intended for
The Mantuan Capitoli was not published and was an account of the methods adopted by the Conservatori rather than a didactic or instructional tool for dissemination. It is a unique document from a Mantuan perspective as it reveals the spectrum of public health measures against plague. The contents show both practical and symbolic components were deeply integrated into the Mantuan system which parallels the wider definition of public health argued for by Sandra Cavallo. The manuscript is difficult to date precisely. On the front cover it states that they began on 27 March 1576 and as the Conservatori were newly appointed and given the short Ordini written by Aliprandi, this can indeed only be a starting date. The details of the majority of the capitoli described below derived from the work of the health office from late March 1576 when the disease intensified in the city and in the summer months when the Conservatori were directly engaged in managing the epidemic. Letters written by health officials show in that period actions had yet to be decided upon, methods were refined, accommodations made and balances struck or recalibrated to ameliorate the health of the city.

Often the actions of health boards are examined in part, for example, as evidence of the use of medical concepts or for the social controls they employed. In this vein the Capitoli have been partially discussed by a small number of historians. Alfonso Corradi made reference to aspects of the Capitoli and the proclamation of related gride in his survey of disease in the Italian peninsula. In an article on the 1576 epidemic Mario Lodigiani briefly discussed the Mantuan lazaretto and the social controls. Cesare Mozzarelli used the

---

5 Cavallo, Charity and Power, pp. 47.


diversity of terms in the Capitoli, such as curati, capi di campagna, genti huomini, and cittadini, as evidence of the diversification of social position and the process of aristocratization within Mantuan society. However, these orders have yet to be examined in their entirety as a coherent plan. Therefore, it is first necessary to describe the contents in detail.

**i Capitoli delle provisioni del male contagioso dell’anno 1576**

The opening lines explaining the purpose of the Capitoli give some sense of the changing concepts of the disease. The first part of the description states that the Capitoli were provisions made for the city and the state of Mantua to help prevent the illness then present that was spread by contagion. Three lines were added above elaborating on this description as ‘discussions made on the mal contagioso or true plague or illness which afflicts the city of Mantua and is caught (si tiene) by contagion’, and that also came from God.

The first four capitoli in effect ensured the basic organisation of the city to what was considered an acceptable or necessary state upon which the rest of the orders were built. First and foremost their recourse was to appeal to God with orations and fasts. All the Religioni and Schole of the city were to have Mass with litanies, to pray and have the people pray for liberation from the disease. The Bishop and the Conservatori had decided that processions were to take place through the city at least every fifteen days. Two additions were made to it; first there would be singing and praying to Jesus and the saints to free the

---

8 Mozzarelli, Mantova, pp.76-7.

9 ASMn., b. 3048, c. 65.
state from the torment (*afflizione*), and secondly that care should be taken to avoid disorder.\(^{10}\) The second *capitolo* states that the *Conservatori* should meet every morning and evening in a house in a convenient location to hear the people and provide for their needs as required.\(^{11}\) The next addressed the expulsion of foreign beggars from the city and state. The *Magistrati del Stato* were to inform local officials in the smaller towns of the order, and anyone who had given lodging to a beggar had three days to report it or would be penalised by three pulls on the rope. The order was to be redacted by the local notary and the *Conservatori* informed by letter. It was subsequently added that the innkeepers should also inform the *Collaterale* and his office, under threat of arbitrary punishment.\(^{12}\) The fourth dealt with individual and civic cleanliness. People found to have smells in their home or a stench in the street in front of their home, including dung, were given three days to clean it. The street had to be swept at least once a week with rubbish taken to the Gatta Marcia where, if necessary, it would be burned or buried. The order would be enforced diligently by the officials of the *Conservatori* and carried a penalty of two gold *scudi*.\(^{13}\) No one was allowed to move residence, either to another property belonging to them or somewhere rented, or to take any goods, without a licence; as the *Conservatori* had to know what Parish people and their families were in and that they were healthy.\(^{14}\) People were also forbidden from leaving the city either alone, with family or carrying goods of any kind to stay in a town without licence, with an arbitrary punishment decided by the *Conservatori*. The purpose of this was so the *Conservatori* were aware of the health status of people moving out of the city, or if a death had occurred in the group, in order to avoid circumstances from which contagion could arise. The same order was sent to the *castellanze* and towns.\(^{15}\) Restriction of movement between the city and *contado*

\(^{10}\) A\^{S}Mn., b. 3048, cc. 64-74. *Capitolo* (hereafter Cap.) 1.

\(^{11}\) Cap. 2.

\(^{12}\) Cap. 3.

\(^{13}\) Cap. 4. The penalty was changed from ‘as above’ to a monetary fine.

\(^{14}\) Cap. 5. The phrase regarding taking things was added.

\(^{15}\) Cap. 6. Again, the phrase regarding goods was added.
extended beyond changing habitation, as those who wished to enter the city to buy necessities or for other needs had to leave the same day. If the person remained overnight, the following day they had to obtain a *fede di sanità* which required two witnesses stating they had been in a healthy place. It was added they should then leave the city under threat of arbitrary punishment.\(^{16}\)

Focus then moved to forms of trade. Both Christians and Jews were banned from buying or selling used goods of any kind and from taking them to other houses to sell, buy, give or lend without a licence from the *Conservatori*.\(^ {17}\) No one was allowed to take suspected used goods out of the city for their own use, for their family or to purge them without written permission from the *Conservatori*. With permission people could stay specifically in their own home or apartment while completing a quarantine period, under threat of the gallows. It was added that this was so the *Conservatori* could write to the area concerned and inform them of the move.\(^ {18}\) Everyone, lay or ecclesiastic, was obliged to immediately report any illness in their home or monastery to the *Conservatori* or *Collaterale*, or suffer a penalty of ten gold *scudi* and the threat of corporal or arbitrary punishment.\(^ {19}\) Pawning goods at the Jewish bankers or the *Monte della Pietà* in private or in public was forbidden, with the exception of gold, silver, jewellery, pewter, copper and metals, which had to be cleaned in vinegar, as was any money exchanged, under threat of arbitrary penalty of the *Conservatori*.\(^ {20}\)

---

\(^{16}\) Cap. 7.

\(^{17}\) Cap. 8.

\(^{18}\) Cap. 9.

\(^{19}\) Cap. 10. Reporting to the *Collaterale*, was added, while the punishment ‘the confiscation of goods and of three pulls on the rope’ was scored out and replaced.

\(^{20}\) Cap. 11.
People suspected of having plague who were given permission to stay in a town had to remain in their house or apartment without associating with anyone for eleven days, under penalty of the gallows. Two conditions were added: a licence from the Conservatori was necessary, and they would be accompanied by an officer designated by the Conservatori and would not stop anywhere else on route. Obtaining a licence and a quarantine of eleven days also applied to any goods taken. If the person needed anything, with the agreement of the local official or commune, a neighbour would provide them with what was required. Those quarantined would provide money for this which had to be cleaned in vinegar. The commune had to take note of any money owed which had to be repaid when the quarantine period ended, or if the person died then the debt was passed on to their heirs. A section was added reiterating that the area where the person moved to would keep account of any expenses until they were liberated, and also that representatives from the area were obliged to visit the person to ensure they were looked after.\(^\text{21}\)

Each day parish priests, the capi di compagnia unless legitimately otherwise occupied, and two gentlemen or citizens had to visit their parish to search for any case of illness. They had to inform the Conservatori of the names, location and illness immediately. If any case of illness was kept hidden, all their goods would be confiscated, they would be sent to the lazaretto and their movable property burned.\(^\text{22}\) Four doctors (medici fisici), one for each quarter of the city, were chosen to care for the sick and to notify the capi di compagnia of their location; more would be appointed if necessary. Accompanied by a surgeon, they would go each day to visit and treat the sick. A note of the pharmacist and any medicines administered had to be kept. If the doctors discovered someone they judged to be of suspicion or with an illness that could cause contagion, they had to immediately inform the Conservatori, enclose them in the house and put a sign so people would know it to be infected. No one

\(^\text{21}\) Cap. 12.

\(^\text{22}\) Cap. 13. The stipulation of any kind of illness was added.
was permitted to leave the house under threat of the gallows. If the house was suitably aired the sick could remain there during their quarantine with permission from the Conservatori who would appoint a neighbour or someone to see to their needs. If not they would be taken to the lazaretto where they would stay until the prescribed period was over, in this case forty days, and the Conservatori would pay for their expenses and medicines until they were returned to their former health.  

Any healthy person who because of kinship, friendship, or another reason had been in a closed house or with a person sick with mal contagioso, knowing them to be ill, was obliged to remain closed in their home for a period determined by the Conservatori. If they did not do this, and the Conservatori found out they would be subject to arbitrary punishment depending on the crime committed. Again once a person was found to have mal contagioso, the doctors and surgeons had to make diligent inquiry as to where the patient had been and with whom they had been in contact. The doctors and surgeons were obliged to go each day or at least every second day to the office of the Conservatori to discuss any problems in the city so provision could be made. All the barbers in the city and, it was added, surgeons were obliged in the course of their daily work, such as bloodletting (ventosare o salassare) or generally medically assisting someone to report immediately their status and illness to the Conservatori. Otherwise they risked being banned from practising their profession and a physical punishment of three pulls of the rope; again the justification was that the Conservatori had to know all cases of sickness and who

23 Cap. 14.
24 Cap. 15. The phrase ‘knowing them to be’ ill was added. The verb was altered from ‘stare’ to ‘ritirarsi’ in their home.
25 Cap. 16.
26 Cap. 17.
had cared for them.\textsuperscript{27} If someone became infected in a rented house then the healthy people had three days to move house with their families and possessions, with licence from the \textit{Conservatori} and the infected house would then be closed.\textsuperscript{28} If areas under the Mantuan dominion became infected, the local official (\textit{Podestà, Commissario, Vicario, Console, Massaro or Deputati}) had to inform the \textit{Conservatori} immediately and provide for the situation in that area. Local officials had to keep the \textit{Conservatori} informed of the health status and they would provide help with doctors, barbers and other necessities to suppress the disease in places it could arise, without exacerbating the condition of the city itself.\textsuperscript{29}

Prison guards had to monitor the incarcerated and inform the \textit{Conservatori} and the \textit{Capitano del Giustitia} of any illness, so that arrangements could be made to stop others becoming infected. The penalty for not reporting infection was loss of office and arbitrary punishment.\textsuperscript{30} The \textit{Conservatori} prohibited the sale of dead fish, spoiled salami or food that was imperfect such as unripe fruit, spoiled wine or bad meat in the city. Again the \textit{Conservatori} would determine the penalty and would consult the doctors as to what foods were acceptable according to the season.\textsuperscript{31} Tanning skins of any kind was not allowed unless in the suburbs or at a distance from the city, under a penalty of ten \textit{scudi d’oro} and loss of the skins for each offence.\textsuperscript{32} Likewise the treatment of silk, for one’s own use or for others, was forbidden within the city but allowed in the \textit{borghi} and at a distance from houses close together, under

\textsuperscript{27} Cap. 18.

\textsuperscript{28} Cap. 19 The word ‘fittadri’ indicates someone who rented a property, in F. Arrivabene, \textit{Dizionario mantovano-italiano} (Mantua, 1891), p. 304.

\textsuperscript{29} Cap. 20.

\textsuperscript{30} Cap. 21.

\textsuperscript{31} Cap. 22.

\textsuperscript{32} Cap. 23.
penalty of the silk being confiscated and a fine of twenty five scudi d’oro. Those who worked with floss silk in their homes or anywhere in the city, in any way, were forbidden from doing so, under a penalty of loss of all the floss silk and the flower, and three pulls of the rope. If the material had been soaked and properly dried and treated outside, then it could be brought into the city.

All quacks, mount backs, jugglers and comedians (cerretani, canta in banca, giocolieri, comedianti, e eremiti) who drew crowds were banned from practising their art under threat of the corporal or other arbitrary punishment. The city’s public schools teaching grammar, reading and writing as well as fencing and dancing were suspended. Public celebrations that usually happened in the city and towns in holy periods were prohibited and it was not permitted to dance at weddings, under threat of grave penalties. Added to this, was the bettole where thieves congregated. Playing ball games or other kinds of strenuous games was prohibited, under a penalty of fifty gold scudi. The authorities reasoned that heating and cooling of the body caused by such games could cause a malignant fever. While the disease continued it was also forbidden to purge or to have someone purge material, or other woollen goods with urine under loss of the material and other penalties decided by the Conservatori. They advised using good quality soap for this purpose, as cleaning with urine could cause a smell which could make people ill. Bookshops, cheese shops, haberdashers and the like were forbidden from buying rags or old rope or giving such materials to anyone else. Haberdashers who used baskets and

---

33 Cap. 24.
34 Cap. 25.
36 Cap. 27. ‘Scrima’in GDI, vol. 18, p. 294, is defined as ‘arte e technica della scherma.’ A marginal annotation stated a grida directed at the bettole of the Cinque Ragiole was proclaimed in 15 September 1576.
37 Cap. 28.
38 Cap. 29. ‘Sarza’ is defined as ‘stoffa nota’, Vocabolario mantovano-italiano, Cherubini, p.154.
cobbler were forbidden from going round the city practising their trades, and were subject to an arbitrary penalty by the Conservatori.  

The markets in the castellanze and towns of the ducato were suspended to avoid the disturbances which could spread plague, but each person could trade separately to avoid this. It was forbidden to increase the price of goods from normal levels, without licence from the Conservatori, and those who carried out money transactions had to clean the money in vinegar. Inheriting goods without licence from the Conservatori was prohibited. Notaries were instructed to lock their redacted documents in a room, or if impossible, to lock the documents away in the archive of the notaries so that if the notary became infected they would be safe. Doctors, lawyers and judges were instructed to do the same.

No more than three people could gather to negotiate business or to get some air, keeping at least one braccia distance from each other. The same distance applied in Church during Mass, divine offices or prayers which would be kept short. Men and women in church were advised to take long breaths as that would not cause illness. During processions a similar distance had to be maintained. The cessation of manual labour associated with the wool and silk industry was a delicate matter on which the Conservatori sought advice. Serious consideration was needed since their industries supported so many of the poor.

40 Cap. 31.
41 Cap. 32.
42 Cap. 33.
43 Cap. 34.
44 Cap. 35.
and removing these sources of income would require other means of support *(fargli le spese)* which would be a considerable undertaking.\(^{45}\) Jews were subject to the aforementioned capitoli but if it was necessary the *Conservatori* would create others since they were most likely to infect the city, by buying, selling and pawning all sorts of things.\(^{46}\)

The next capitolo concerned the *lazaretto*, which was then located at the Carmelite monastery of San Pietro d’Ongaria, beyond the Porto gate. The sick or suspected were to be carted there by wagon or taken by boat where they would be looked after until ‘they return to their former health.’\(^{47}\) A doctor, surgeons and barber surgeons were appointed as required to diligently look after the sick and would be paid according to their skills. Any neglect of their work would render them subject to severe punishments decided on by the *Conservatori*. A pharmacist was to stay in San Giovanni Bono or elsewhere close by to provide the required medicines.\(^{48}\) One or more nurses, depending on the need, were appointed with a superior. Failure to carry out their tasks would be punished severely and the *Conservatori* also set their salaries and provisions.\(^{49}\)

A number of staff were appointed to supply food for the sick in the morning and evening according to patient needs, including a cook, and they would be salaried and given expenses.\(^{50}\) A respectable person (*uomo da bene*) would be designated as a steward charged with the daily running of the

\(^{45}\) Cap. 36.

\(^{46}\) Cap. 37.

\(^{47}\) Cap. 38.

\(^{48}\) Cap. 39.

\(^{49}\) Cap. 40.

\(^{50}\) Cap. 41.
lazaretto with responsibility for dispensing bread, wine, meat and other sustenance needs. An accurate record had to be kept of the goods coming into the lazaretto and the number of mouths to be fed. A baker was employed to make bread daily which would be distributed by the steward, and a butcher was designated to provide veal for the sick and beef for the healthy: with the exception of the doctors, surgeons and the steward who could buy veal, depending on supplies. Wood was to be provided for fires both to cook food and accommodate the needs of the sick; and the fires would also purify the air and dry the corpses.

Guards were placed at the lazaretto to ensure no one, either the sick, convalescents or those who looked after them could leave until judged able to do so by the Conservatori, under threat of the gallows. Further, no one, unless employed at the lazaretto, was allowed near the sick, any closer than twenty braccia, this was almost double the initial distance of twelve braccia. Anyone visiting the sick, because of kinship or friendship also had to remain at the same augmented distance.

If a patient or a member of staff died, they had to be buried at a safe distance (lontani honestamente) from the rooms of the sick and in a deep hole so that the smell of the dead would not infect the remaining people. They were to be buried on the day of death, or if necessary the bodies could be taken for

51 Cap. 42.
52 Cap. 43.
53 Cap. 44.
54 Cap. 45. ‘Sugano’, from sugare which is defined as ‘asciugare’ in Arrivabene, p. 803.
55 Cap. 46.
56 Cap. 47.
burial to other Churches. Extra transport would be provided to take the bodies to the places of burial. Six, eight, or more men of good character (uomini da bene), depending on the need, were employed as pizzamorti: they were warned not to steal and the punishment for that was hanging. Until released by the Conservatori they would receive a wage and expenses (spese conveniente). They also had to take the dead to the parish graveyards, as indicated by the Capi di Compagnia, where the bodies were to be buried deeply as outlined in the previous capitolo.58

A boat, or more if needed, would be stationed at the Ceppetto gate to take the sick and their belongings to the lazaretto. The boatman, also a man of good character (uomo da bene), should not commit fraud nor leave the area or mix with other people, and would be given a salary and expenses.59 The Conservatori would provide carts, boats or whatever would be most comfortable for the patients. The carters and boatmen were instructed to go slowly and carefully, and the sick to be put on straw. To make them recognizable those transporting the sick had to wear a black band on their clothes and have a black band in front of their horses. Similarly the pizzamorti had to wear a black band on white clothes to make them more visible. These men were forbidden to associate with anyone under threat of the gallows. Further, the carters had to put a bell on their horses, and the pizzamorti had to carry them to alert people that they were transporting the infected.60 The carters and pizzamorti were regulated by two soldiers who had to wear a halberd (labarda in spalla) and had to report any insolence or neglect of duty to the Conservatori, who would mete

57 Cap. 48. ‘le buse profonde’- bussa is defined in Vocabolario mantovano-italiano, as buca, p.51, which is a hole or pit.
58 Cap. 49.
59 Cap. 50.
60 Cap. 51.
out punishments. The sick were not allowed to leave their home to go to the lazaretto until the Conservatori granted permission or gave a licence under threat of arbitrary punishment. The carters, their carts, horses and pizzamorti were given a house where they had to remain unless working, under threat of arbitrary punishment, identified by a sign warning people that the pizzamorti lived there. The Ceppetto gate had to be opened to transport the sick as necessary. A boatman with a clean barge was appointed to take the clean goods to the steward of the lazaretto, but was not to go near the sick or suspected places. If the boat was not available, then a donkey or porters would be used.

People who inherited goods (beni mobile e stabili) from a relation who died of plague could not claim the goods without a licence from the Conservatori. If they did so, they would be considered as suspect and taken to the lazaretto with the goods, and would forfeit them. This would ensure the Conservatori knew that those goods had been purged and cleansed, and the houses cleaned. All infected goods were to be taken to an area outside the city, close to water and sand, where they would be cleansed by being exposed to air and or water for a period the Conservatori and the purgatori decided upon. The purgatori had to keep records of the goods and to whom they belonged. No one else was allowed in the area without a licence. The men and women employed for that task were paid and given expenses, but were not to leave the area and if found to have committed any fraud would be punished.

61 Cap. 52.
62 Cap. 53.
63 Cap. 54.
64 Cap. 55.
65 Cap. 56.
66 Cap. 57.
67 Cap. 58.
Those employed to remove infected goods from houses were not allowed to go anywhere other than their usual residence, under penalty of the gallows. They had to wear a blue cross on a white garment to make others aware of their job. A licence was required to enter a house and an inventory of goods drawn up and given to the notary selected by the Conservatori. Finally, those emptying houses were to be dressed in such a way that they could not hide anything under the clothes; a suitable style of garment would be chosen by the Conservatori. Two details were added; it would be a simple garment and they had to take note of everything in the house with the exception of rags (strazzes) which would be burned in a designated area.\footnote{68} If people heard the pizzamorti or officers of the Conservatori when in their homes, they were not allowed to approach them or send servants out; the punishment being twenty five gold scudi or those who could not afford the fine would be punished by three pulls of the rope.\footnote{69} People who died in the city of suspected plague would be taken for burial by pizzamorti accompanied by an officer who had to stay at least twenty braccia from the body. It was added that a surgeon should also see the body to determine the cause of death.\footnote{70} To prevent potential crimes, at least three gallows and pillories were to be erected to punish criminals in the city.\footnote{71} Every day the sick, wretched poor and those enclosed in their homes were to be given charity (elemosina), which included adequate bread as decided on by the Conservatori and money, at least two soldi a day per person, to buy other foods. The charity was distributed by those appointed with a parishioner or gentlemen, who would be punished for any fraud at the will of the Conservatori. Responsibility for providing further charity was deferred to those who usually did so; Signori of the city, the gentlemen, citizens, tradesmen, confraternities, monasteries, priests and others, to which it was added for ‘universal benefit’.\footnote{72}

\footnote{68} Cap. 59.  
\footnote{69} Cap. 60.  
\footnote{70} Cap. 61. This distance was altered from ‘un buon pezzo’.  
\footnote{71} Cap. 62. It is unclear from the correspondence how frequently the gallows and pillories were used during this epidemic.  
\footnote{72} Cap. 63.
The Conservatori also appointed a chaplain to minister to those in the lazaretto. When hearing confession he had to maintain at least six braccia from the patient. If someone died the chaplain was obligated to say Mass and would be paid by the Conservatori. A number of temporary wooden huts were erected in the countryside for convalescents, where men and women were separated and each person or group according to their required quarantine period and health status. The Conservatori specified that these buildings should be made rain-proof with straw or reeds. A steward, cook and other servants were employed to bring in food and provide for the patients’ needs as was necessary to preserve their health and happiness until their quarantine was completed. If the convalescents required something and had money then the steward would supply it, as long as the money was placed in vinegar. At least two Conservatori had to visit the lazaretto each week to ensure the sick and convalescents were being treated well, and to make sure that their needs were attended to. If the workers were suspected of anything strange they were to be punished severely. One visit per week was not sufficient; visits had to be carried out twice a week or more, as the officers had to be vigilant to keep the sick and convalescents happy.

All pecuniary fines resulting from the capitoli were divided into three; one third was given to the informers and the remainder to the health office to dispense to help the poor ill with mal sospetto and those in the lazaretto. People who wanted their cleaned and purged goods returned had to pay a portion of the costs, ten per cent of the value, except if less than twenty-five

\footnotesize

73 Cap. 64.
74 Cap. 65.
75 Cap. 66.
76 Cap. 67.
77 Cap. 68.
lire. The additional capitolo seventy was an order to write to the outlying areas of the dominion not to let foreigners and their goods in without a fede di sanità, and to inform the Conservatori of the goods and people so that they could decide on the appropriate action. Guards were put at the gates of the city, either gentlemen or citizens, who were not allowed to let anyone enter or leave without a fede di sanità from Mantua, the Castellanze or other deputies. Again, this was in order to know the health status and movements of those in the state The Conservatori chose two men of good reputation (buona fama), one from the office and one from the popolo, to assess all the goods to be purged, and to assign a price for them and who would reside outside San Giovanni Bono, with a salary decided by the Conservatori.

People with surplus grain were obliged if required to give it to the Conservatori who would distribute it among the poor. The Conservatori would pay a reasonable price depending on the quality, but if the people did not want to sell it to the Conservatori, it could be taken from them without payment. No one of any status, either a citizen or religious person, could visit a sick person, kinsman or a friend, without permission from the Conservatori under penalty of twenty-five scudi for each offence. Doctors, surgeons and barber surgeons were exempt. If anyone required a doctor, for example to be purged, this was possible with permission or if it was an emergency it had to be reported quickly, again with a penalty of twenty five scudi, in order that all cases of sickness in the city were reported. All children under fourteen had to stay at home and were not allowed out on the street or anywhere else. Likewise servants (famigli o massare) were not allowed to go about freely, and if sent on

78 Cap. 69.
79 Additional Cap. 70.
80 Cap. 70.
81 Cap. 71.
82 Cap. 72.
an errand the head of the house had to write a note (poliza del servigio) detailing the errand. If they could not write then it was tolerated, but the servant had to return home immediately. Women could not go out other than to Mass and to divine offices, maintaining the distance as described in a previous capitolo. To ensure no one came in without a fede di sanità and so they were aware of the health status of those coming and going, gentlemen, citizens or others were to be put as guards at the gates of the city. The penalty was ten scudi per person for those who let someone in without a fede di sanità, and if the person was found to be of suspicion, then the penalty was twenty-five scudi and three pulls on the rope. Finally, it was forbidden to attack anyone employed by the Conservatori or who worked for them, with deeds or injurious words, or to impede them in their work, subject to the arbitrary penalty of the Conservatori. A final instruction was that heads of all houses, secular and ecclesiastic, had to submit to the Capi di Compagina a list of all people (bocche) in their home, with a penalty of twenty-five scudi for those who did not.

Discussion

The document explains how the city was to be equipped against the disease from monitoring people to the cleansing of suspect goods, and from organising regular religious processions to reorganisation of permissible trade strategies. It is certainly possible to consign many of the capitoli as evidence of the militant health police which have often been described. A closer examination, however, reveals degrees of flexibility. Amendments were made to the body of the text indicating the adaptation of orders as events unfolded that varied from the addition of an extra capitolo, marginal notations stating when a specific order was made a grida or augmentations to the substance of

---

83 Cap. 73.
84 Cap. 74.
85 Cap. 75.
regulations. In capitolo forty-seven for instance, the prescribed distance to be maintained by both those transporting people to the lazaretto and any relatives or friends visiting was increased from twelve to twenty braccia. In capitolo sixty-two those accompanying the body of someone who died with suspicion of plague (di sospetto) in the city for burial had to be twenty braccia distant, which was originally ‘a good distance’ (un buon pezzo). Ten of the capitoli have been annotated to indicate they were the subject of gride between April and September 1576. Additional details could also be given to augment or justify orders. In the first capitolo the sentence which describes how the processions should proceed was added. The fifth capitolo prohibiting people changing accommodation without licence was subsequently justified as it enabled the Conservatori to keep track of the health and location of the city’s inhabitants.

The city was the central focus for the majority of the regulations and those aimed elsewhere, such as the lazaretto and outer parts of the state were designed for its preservation. Their efficacy was dependent upon the creation, reinforcement or cessation of layers of divisions with attendant obligations directed at various members of the community. The most obvious and deliberate physical division was the creation of a lazaretto area detailed in the middle section of the document. Other temporary divisions were created when people were confined to their home for quarantine purposes. The city itself became a contested place where a new layer of social divisions was applied. Access to the city was restricted, with entry dependent upon confirmation of knowledge of good health where people could not converse in groups greater than three, while maintaining a distance from each other. Those employed to work for the health office, such as pizzamorti or carters, were likewise distinguished by their uniforms. From these cross community divisions followed attendant obligations dependent upon the health status of the individual.

86 Cap. 3 on 29 March; Cap. 4 on 3 April; Cap. 8 on 29 March; Cap. 15 on 3 April; Cap. 18 on 6 April; Cap. 26 on 29 March; Cap. 27 on 15 September; Cap. 28 on 12 July; Cap. 34 on 16 April; Cap. 60 on 3 April; Cap. 63 on 29 March.
The comprehensive description and attempted codification of directives marks a significant change from previous epidemics. The Conservatori made a record of their practices at the beginning of their tenure in the form of the eight-point Ordini, the apex of their plague orders in the Capitoli and as the epidemic waned they produced a list of orders tailored to eradicating the remnants of the epidemic entitled ‘Provisions that must be made to extinguish mal contagioso.’ First, relief for the poor, both the healthy and sick, in the city was to continue; the healthy but needy (sani bisognisi) were to be given bread each day, and in addition to the bread the sick poor were to be given money to buy meat and medicine, and at least two doctors and two surgeons or barbers were needed to care for them. Provisions were to be made for the homeless poor so they did not wander around the city. All illnesses had to be reported each day so the health office surgeon could visit them. If any new cases of illness were discovered the sick would immediately be sent out of the city so that their homes and goods could be cleaned quickly; to this end a proclamation already published about stolen goods would be reiterated, with the promise of impunity for the informer and the promise of greater rewards for those who reported infected goods. Another grida would be made ordering those who had cloths (panni) to have them purged, under threat of confiscation of the goods which would also help to discover any stolen goods or infected people. The order would be pronounced in the castelli and towns at least twice, on market day and in church. Guards of the city were to be maintained, so that neither people nor goods could enter without a properly justified fede di sanità; that is the people or goods had been in a place without suspicion for forty days. As it was such an important job the salary of the guards would be increased to four ducati or a little more a month, and those who broke the order faced the penalty of losing their office. The gate of the Torre nuova was to remain closed for some months. No one was allowed to enter the state without a properly justified fede di sanità with serious penalties for the officials who did not adhere to it. Health officers in the state were advised not to issue fede di sanità unless certain the recipient

87 ASMn., b. 3048, cc. 118-20.
was not suspected; that is no deaths or illnesses of any kind occurred in their home for forty days before. Thefts of suspected goods would be severely punished. As it would be conducive to good health during the upcoming period of lent people could eat meat and dairy products if it allowed by the Church. The *Magistrato* responsible for limiting prices of foodstuffs had to ensure prices did not increase excessively. All foodstuffs sold in the city had to be ‘good and perfect’, so that the poor did not suffer by buying bad meat, rotten salami, dead fish, rotten cheese, bad fats, spoiled wines and ‘other similar things that can offend nature and for the conservation of the person.’  These orders represent a diminution of health office directives to a level more comparable with the *Ordini*, but place greater emphasis on the control of movement in the wider state. However, we cannot assume that these instructions were followed or applied completely. The *capitoli* offer one view of the public health strategies ordered by the *Conservatori*. Between the *Ordini* produced on 27 March 1576 and the *Capitoli* document produced in August or September of that year the *Conservatori* considerably broadened and augmented their methods. We now turn to the letters of the *Conservatori* to examine how aspects of this strategy developed.

The second *capitolo* set out the moral task of the *Conservatori*; to administer to the needs of the people ‘with mercy and rigour according to events pertinent to matters of health.’ Each day they met at an office to co-ordinate tasks, collate information brought to them, to allow people to approach them with requests and perhaps also to report transgressions. This was unlike Venice where each *sestiere* had a Lion’s mouth letterbox into which individuals could place anonymous reports against others. The actual whereabouts of the office was not clearly specified. However, within a few weeks Aliprandi reported that the location was very inconvenient and the space was too small and asked

88 ASMn., b. 3048, cc. 118-20.

89 Cap. 2.

for permission to move to the house of a Torcello, as the owner had left the city.\footnote{ASMn., b. 2598, c. 33.} One of the documents redacted by a health office notary, Domenico di Pisi, refers to the office of the Conservatori being in the neighbourhood of the Aquilla, within the island of the city.\footnote{ASMn., Archivio Notarile, Pisi, Domenico, di Pietro, 7214-7216 bis, 30 April 1576.} Later that year on 9 November Bardellone wrote that the Conservatori had to find a place to use as an office in the winter and had thought that rooms under the Bishop’s Palace would be suitable. But there was a difficulty as those rooms were consecrated and one could not carry out criminal trials and give sentences in cases involving corporal punishment or drawing of blood; so they would be happier to be accommodated somewhere near the ‘secular lords.’\footnote{ASMn., b. 2597, c. 498.} Therefore, the Conservatori were readily accessible in the city to those in need of assistance and also to those working for them. On one occasion Bardellone lamented the fact he had to go to the office morning and evening.\footnote{ASMn., b. 2597, c. 270.} Thus health officials not only remained in the city to carry out orders but were on the front line to observe the efficacy of their orders.

One practical purpose was issuing fede di sanità and people could approach the health office to request to move elsewhere by donating money or potentially some form of service. For example, on 3 April 1576 Giovanni Francesco Pusterla paid the usual elemosina to the office and was granted permission to move to a villa in the countryside. He offered to pay another 10 gold scudi to be allowed to travel to Montecelli in the Parmesan territory.\footnote{ASMn., b. 2598, c. 17.} In May 1576 Bardellone reported a Jewish woman requested to move to the contado; she wanted to go to Luzzara, but the Conservatore Nereo Strada was concerned that she may preach heresy to the ‘ignorant contadini.’\footnote{ASMn., b. 2597, c. 110.}
outcome of her request is unknown. Later that month, Bardellone made reference to a grida banning Jews renting accommodation in the contado\textsuperscript{97}, which was then amended and limited movement to castelli was allowed.\textsuperscript{98}

Employees of the Conservatori had to report to the office regularly. On 23 April Aliprandi noted that doctor Spagnolo had reported the quarter of the city under his care was in a good state and no one was seriously ill.\textsuperscript{99} In the same letter Aliprandi added that the list of deaths from the previous day was late as some of the Capi di Compagnia could not write the information down as the office was closed. Additionally that day there were arguments at the office as some butchers were selling meat at a much higher price than the sanctioned set price, and some of the meats they were selling were dangerous in the current infirmity.\textsuperscript{100} The Conservatori also noticed when people did not present themselves at the office. On 30 April Bardellone wrote that Ercole the surgeon, presumably Ercole Lughignani, had not given note of deaths for two days, as he said he had nothing to report.\textsuperscript{101}

The Conservatori used officials, parish priests, citizens, and employed medical operatives to overlap and intersect monitoring cases of sickness in the city which was also linked to providing charity to people sequestered in their homes. All sectors of the community, both secular and ecclesiastic, had to report any instances of illness they encountered. This had the dual purpose of limiting potential contact with mal contagioso, and tracing its potential pathway

\textsuperscript{97} ASMn., b. 2597, c. 169.

\textsuperscript{98} ASMn., b. 2597, c. 171.

\textsuperscript{99} ASMn., b. 2598, c. 58. Spagnolo was one of the four doctors mentioned in the Ordini document, ASMn., b. 3048, c. 121.

\textsuperscript{100} ASMn., b. 2598, c. 78.

\textsuperscript{101} ASMn., b. 2597, c. 161.
quickly when cases were discovered. In practice this could be problematic. On 7 August Bardellone reported that the *Capi di Compagna* had been told to report illnesses found in the course of their work to the *Conservatori* and also to the surgeons. This was to avoid news of sudden deaths (*la morte improvisa*) and had been prompted by the case of a *Maestro* Giulio Sarto: he had died with a very big *carbone* on one shoulder but had been out in the streets the previous day. In another instance of confusion, on 9 November 1576, Bardellone complained that the discord between lists of infected houses from the previous Saturday was, he believed, due to the negligence of the *Capi di compagnia* who did not give note of the houses they closed or liberated to *Maestro* Pietro Giovanni, who collected this information. The following day Bardellone sent the list of the closed houses and of the sick, adding that he did not know if they were correct but he used all possible diligence to ensure they were.

The speed and accuracy of the monitoring systems is evident in the following cases. Social spaces and activities continued to be a source of contention despite attempts to regulate interactions. On 4 December, Bardellone wrote that late that night a *Cavaglierie* of the health office found an Ettore Cantoni, who had a big mouthful of turnip, and a Carlo di Rizzi sitting close to a prostitute named Camilla. This scene occurred behind the wall of the Pusterla where Camilla was supposed to be sequestered in a house. As they had contravened the *grida* that commanded people should be at least four *braccia* apart, the *Conservatori* decided to give them two pulls on the rope in public. However, the letter does not specify which of the three were to be punished. Also, the distance prescribed in the *capitoli*, of one *braccia*, had been increased.

---

102 ASMn., b. 2597, cc. 311-2.
103 ASMn., b. 2597, c. 515.
104 ASMn., b. 2597, c. 522.
105 ASMn., b. 2597, c. 589.
On 28 July Bardellone reported that a woman had been found dead the previous day under the gate of the Corte Vecchia near the house of the Ghisi. She was described as ‘a free woman, called a tart’, who had been enclosed and had successfully finished her quarantine in the house of Pietro Pellacano in the street of the fossati di bovi, on the 14 June. Previously she had lived in the house of a Bolognese courtesan in the via dell’Angelo. After being released from quarantine the prostitute was not allowed back into the home of the courtesan, therefore, she did not have a residence and had been wandering around the city. The Conservatori believed she had become ill and unsuccessfully tried to find someone to let her in to a house, but died in the attempt.  

Information gathered from neighbours was an additional and vital resource for the Conservatori. On 12 May Bardellone reported that morning a Maragnone and his wife had been punished. They had consorted with some sequestered women then gone around the city openly, and also the wife was a procurress (ruffiana) to the scandal of the neighbours. Another case on 6 June demonstrates another problem in controlling and monitoring public activities. Bardellone recounted that six witnesses had testified that an Agostino Veronese, the innkeeper of a place named la gatta in a neighbourhood near the contrada of the swan, had a number of women of ill repute (mala vita). As a result there continued to be gatherings and uproar within his inn, much to the great displeasure and scandal of all the neighbours. Agostino, who was imprisoned, confessed that the prostitutes lived in his inn but protested that he did not know what they were up to. The Conservatori argued that this was not plausible as his hovel (bettola) was so cramped he must have heard what the women were doing and decided his punishment would be three rope pulls or ten scudi as he was a poor man. Three of the witnesses reported seeing two men leave the inn one evening with one of the prostitutes, and then wandering around the neighbourhood. The prostitute named three men, a Bartholomoeo, the cook at

106 ASMn., b. 2597, c. 301. ‘era una libera chiamata la putella’.

107 ASMn., b. 2597, c. 185.
the inn, a young boy named Giovanni delli Ottaviani from Ostiglia who was sixteen and a young man named Alessio, the son of a Forabosco. They were examined and admitted to being at the inn and consorting with the prostitute. As punishment the cook offered to go and work in the lazaretto for two months without pay, while Alessio was acquitted of any crime. It seems as though Giovanni was too young to be punished. At the end of the letter Bardellone commented that as the weather was mixed, it was hot then cold, the Conservatori intended to produce a grida prohibiting playing ball games and other tiring games, as had been done in similar times before, but asked for permission first. Bardellone then sent a printed copy of the gride relating to thefts from closed houses and to tiring games and dancing, adding ‘this being a time to guard oneself as much as one can from the opportunity to sin.’ On 12 June Bardellone wrote that the innkeeper of la gatta had said he would gladly be a police agent (sbirro) at the lazaretto, rather than suffer the penalty of the rope, as he did not have the ten scudi to pay the fine. The timing of the case of unregulated gathering at la gatta and the creation of the grida prohibiting dancing and social engagements not conducive to good health is not coincidental.

Another incident where a number of regulations were broken involved a Giovanni Maroardo. Giovanni was married to the niece (nipota) of a Don Federico dall’Acqua, the parish priest of Santo Simone. Don Federico was sick with mal contagoiso and was sequestered in his home. Giovanni entered the house with the people who were attending to Don Federico, and as the priest was close to death Giovanni decided to take a key (una chiavetta) for a small room the priest

---

108 ASMn., b. 2597, cc. 230-1.
109 ASMn., b. 2597, c. 240.
110 ASMn., b. 2597, c. 241.
had round his neck. When the priest died Giovanni went in to the room and, according to witnesses, removed two sacks of flour on the first occasion. He returned another four times to remove goods including tablecloths, two shirts, two old tunics (cotte) belonging to the priest and one woollen shirt, on another visit he took a bowl and brass jug, a clavicord, and on the fifth and final time ten pewter plates. Giovanni had confessed to taking the goods, but denied taken anything else and maintained that he had taken the goods because the priest had said he wanted to leave those things for his niece, Giovanni’s wife; Bardellone added that some said she was his daughter. As Don Federico had died without making a will, the goods would go to other members of his family. Giovanni was to be condemned to be hanged.\textsuperscript{112} Yet he was saved from that fate, and after finishing a period of quarantine was initially to be imprisoned. The Conservatori then intended to send him to work in the lazaretto as punishment, and on 11 July Bardellone enquired if the Duke had reached a decision regarding this. Giovanni’s sister Ana had approached Bardellone to ask if she could buy her brother’s life with ‘a part of the little she had’, but she did not say how much (la quantità).\textsuperscript{113} Several days later Bardellone clarified that to avoid the penalty of being sent to the lazaretto Giovanni’s sister came on behalf of his wife, who had two young infants and could not go to the office to offer payment of twenty-five gold scudi.\textsuperscript{114} This case, as is evident from the punishment, was considered worse than the transgressions of the inn keeper. Maroardo contravened a variety of the capitoli regulations: not only did he enter the closed house of a plague victim, Giovanni came into close contact with him to remove the key, then presumably he returned to his own family which could have spread infection. Thereafter he returned multiple times to take a variety of goods, some of which could have also carried disease, contravening the regulation banning taking goods belonging to an infected person.

\textsuperscript{112} ASMn., b. 2597, cc. 282-3.

\textsuperscript{113} ASMn., b. 2597, c. 285.

\textsuperscript{114} ASMn., b. 2597, c. 287.
Giovanni’s case has similarities with those described by Giulia Calvi using the trial records of the Florentine Public Health Magistracy. She highlights one case, that of Andrea Passignani, an unemployed youth who was punished for crimes of theft with the death penalty, the only example she finds in the 300 cases examined. Andrea’s social situation is a particular one; he was in effect an outsider. Calvi argues that:

‘because of the viscous connections between neighbours and family members, as well as the intrigue of complicity and bargaining, Andrea stands out as a desolately modern character who had broken all ties with his native land. As he stole purely for his own profit, he was severely punished.’

Giovanni did not steal purely for his own gain. After consideration of his ‘viscous connections’ in the city, Giovanni was also saved from being hanged and instead his punishment, either service at the lazaretto or the monetary offer from his family, was subverted to be part of the wider public health fight.

The Conservatori could invoke a variety of punishments which applied to people who contravened the orders and also to the officials and temporary workers who did not carry out their tasks properly. The confiscation of goods was applied when the goods in question were considered to be potentially dangerous, such as those belonging to a suspected or infected person, or the materials used in industries or jobs which were banned such as involving textiles. However, only the barbers, selected military officers and staff such as the pizzamorti were threatened with the loss of their office or right to practise their trade. Often two possible penalties were described and if the offender could not pay the fine then a physical penalty followed. The order for the construction of more gallows and pillories in the city would serve as a clear warning. Amendments to the punishments which the Conservatori could apply were most

\[115\text{ Calvi, Histories, p. 12.}\]
frequently described as arbitrary and by being less defined perhaps increased the scope of their authority. This supports Cavallo’s assertion that bargaining was a part of the processes used to defend or restore good health in a plague stricken area\textsuperscript{116}, and not only in quarantine periods as she suggests. As in the examples of Andrea and Giovanni, punishments were adapted on the basis of public health needs, and were subsumed into the wider practical application of orders.

Residents in the city were required to contribute by not engaging in prohibited activities and in reporting those who did. Another component of the strategy encouraged limited participation in specific events such as processions and attendance at religious services. In a discussion of the capitoli Mario Lodigiani has drawn attention to the apparent incongruity of holding processions with the wider policy of social control. Limiting social contact, particularly with those thought to be potentially dangerous, was an integral part of the overall approach. However, when events could contribute towards improving the city a middle path was found. On 1 April 1576 Aliprandi wrote that they were considering suspending schools for children. Yet, a balance was struck with religious services as in the same letter he wrote that a decision had been made that sermons could last no longer than half an hour and the doors had to be kept open.\textsuperscript{117} A concern of this nature arose when on 29 May Bardellone wrote that the priest of San Francesco had agreed to stop preaching, which the Conservatori understood he did frequently, in order to stop a gathering of people. However, another priest went to the office to argue that on the contrary frequent prayers were an excellent way to intervene with God for the liberation of the city. A reduction of people attending the service was one resolution and the Conservatori sought Ducal guidance in the matter.\textsuperscript{118} The Bishop, Marco Gonzaga, was also concerned with the regularity and continuance of religious

\textsuperscript{116} Cavallo, Charity and Power, p. 48.

\textsuperscript{117} ASMn., b. 2598, c. 14.

\textsuperscript{118} ASMn., b. 2597, c. 216.
services. In a discussion regarding the organisation of a processions discussed below he believed that it should be a time for orations and suggested that the sacrament be placed in churches for ten days, in order that the people could go and pray: an additional incentive was that it would offer some contrast to the celebrations and dances that were harmful. Not only were religious structures used, for instance, monastic buildings were used to house the plague sick, the involvement of the church expanded considerably from previous epidemics, and took many forms including consultation about the most efficacious remedies.

Such co-operation was evident in Milan with the works of Carlo Borromeo and in Verona, where links between the health board and church were strong. In Bologna, printed broadsheets were issued detailing expected comportment when attending Mass, both in external behaviour and internal intent. On 28 July 1576 directions were published for priests of the diocese, which included holding processions within churches and ensuring the people prayed for the cessation of the plague in infected areas as well as for the continued health of Bologna. Further, as in Mantua, the monitoring of the population by the parish was expected and priests were required to warn their parishioners to be vigilant and not to provide lodging for anyone who did not have a *fede di sanità*. Also in Modena the parish was again a way to provide the people with information, as a *grida* prohibiting the lodging of foreigners was to be displayed in local churches. Stevens Crawshaw argues in Venice in 1576, Parish priests had the task of reporting cases of sickness to the health board, and also had authority to give out *fede di sanità*, to ‘monitor the social status and health of those put into quarantine, and to provide alms for the poor enclosed.’ Religious communities

119 ASMn., b. 2599, 15 June 1576.
120 Cohn, *Cultures*, pp. 229-32, and p. 284.
121 ASB., bandi Bolognesi, c. 215.
122 ASB., bandi Bolognesi, c. 216.
and authorities were directly involved with counter plague strategies in a variety of ways. The tenor of involvement was different in each area and these disparities deserve investigation as they reflect the character of a particular community or area, and also undermine the concept of an unbending or uniform, state controlled, Italian system.

Despite it being the subject of the first captiolo, there is no evidence in the letters to support the claim that processions took place every two weeks; perhaps suggesting this was an idea adopted after the worst of the epidemic had passed. Processions were staged at various points during the epidemic for different motivations: traditional processions which celebrated dates on the religious calendar such as the feast of Corpus Christi; processions involving those cured at the lazaretto organized and curated by various Confraternities; and celebratory processions at the end of the epidemic. Adaptations were made and sanctioned by the health office in conjunction with other groups to ensure they posed minimal danger to health but also contributed to the overall attempt to cure the city. They could provide some glue to mend some of the fractures in the social fabric and to contribute to the cessation of the epidemic.

When the time came for processions that were already part of the civic calendar debate ensued. The first to cause concern was the proposed celebrations for the feast of the Ascension. On 21 May Bardellone wrote to find out if Guglielmo wanted the usual procession to take place. Later in the same letter he wrote that the Sanità of Brescia intended to send a deputation of doctors to Mantua who would likely arrive on the feast of the Ascension. Three days later Bardellone had received instruction from the Duke; a celebration would take place but without the usual procession. Unfortunately he does not

---


125 ASMn., b. 2597, c. 203.
provide additional detail, but further information may yet be found in archival documents. The visit by the Bresican doctors may have had some influence on this decision.

The next event discussed by the Conservatori, the Bishop and Duke Guglielmo was the feast of Corpus Domini. The Bishop of Mantua wrote on 11 June to find out if the usual procession would take place. He recognised the need to avoid a gathering of people, but added that he believed in the present uncertain times ‘one must keep the people in the devotion and fear of God.’ On 12 June Bardellone also raised the question about the usual procession and commented that it had been reported to the Conservatori by the Bishop and by many citizens who visited the office that the people greatly wished it. A suggested condition that would allow it to proceed was that only Clergy were allowed in the church of Santa Paola and that guides (mazzieri) be appointed to control the crowd, so that they did not follow the procession in confusion but in rows of four or five people. On 14 June Bardellone wrote that the Duke had decided to allow the procession to take place to please the people. Bardellone was unwell and unable to participate, but suggested some of the six possible men to carry the Baldachino. Further arrangements were decided upon by 15 June. They decided that to ensure proper order was maintained by those following the Baldachino the health office would arrange for around fifty men (maccieri) to be stationed fifty or sixty braccia from each other on the route to make sure the participants following behind the procession did not break the order or cause disorder. Two gentlemen health officials would patrol on horseback to control the men stationed on the street. Bardellone also suggested

126 ASMn., b. 2597, c. 207.
127 ASMn., b. 2599, 22 June 1576.
128 ASMn., b. 2597, c. 240.
129 ASMn., b. 2597, c. 240.
130 ASMn., b. 2597, c. 242.
a proclamation be announced on the day to be certain all were aware of the orders.\textsuperscript{131} The Bishop wrote that he had seen the orders given by the Duke, and together with Bardellone would ensure they were followed.\textsuperscript{132} On 20 June Bardellone stated members of the Senate would carry the Baldachino to the altar of San Pietro.\textsuperscript{133} Two days later on 22 June Bardellone informed Libramonte that the procession had gone rather well according to the instructions given by the Duke.\textsuperscript{134} He commented that many women were in attendance, though very few nobles.\textsuperscript{135} This concurs with capitolo seventy-three which allowed women to attend Mass and other divine offices,\textsuperscript{136} which suggests that Mantua was not as strict as Milan where women were prohibited from participating in processions.\textsuperscript{137}

An officer of the Confraternity of the Most Holy Trinity, a Pietro who also signed his letters as Il Catelano, made reference to the planning stage of the procession\textsuperscript{138}, and afterwards remarked upon the success calling it ‘the most beautiful, the most moving, the most orderly that I have ever seen.’\textsuperscript{139}

Therefore, participation in events which could benefit the city was permissible for some. The series of deliberations and discussions which took place over the staging of the procession show a number of important issues. Perhaps most important is the co-operation between the Church and

\begin{footnotesize}
\begin{enumerate}
  \item\textsuperscript{131} ASMn., b. 2597, c. 245.
  \item\textsuperscript{132} ASMn., b. 2599, 15 June 1576, Bishop Marco Gonzaga.
  \item\textsuperscript{133} ASMn., b. 2597, c. 252.
  \item\textsuperscript{134} ASMn., b. 2597, c. 253.
  \item\textsuperscript{135} ASMn., b. 2597, c. 253.
  \item\textsuperscript{136} Cap. 73.
  \item\textsuperscript{137} Cohn., Cultures, p. 104. For a description of the procession by Besta, p. 107.
  \item\textsuperscript{138} ASMn., b. 2599, 18 June 1576, Piero Catalano.
  \item\textsuperscript{139} ASMn., b. 2599, 22 June, 1576, Piero Catalano, Il Catalano. ‘la più bella, la più divota, la più regolata che mai fusse vista.’
\end{enumerate}
\end{footnotesize}
Conservatori in carrying out the orders given by the Duke. It is also interesting that the Corpus Domini procession was allowed to take place, unlike the Ascension Day celebration. A possible explanation could be the mortality rate in the city. Unfortunately we do not have data from the libro dei morti to determine what the daily death figures were for late May and June 1576. However, Vigilio’s monthly figures do show a notable drop from 417 in May to 309 in June which may have been sufficient to deter the Conservatori from pressing for a procession for Ascension Day. However, precautions were taken to limit participants and to maintain order. Further, as the decision was ultimately made by the Duke, who delivered the programme for the Corpus Domini procession to the Conservatori, the motivation to ensure this specific procession took place lies elsewhere. Edward Muir has argued the Corpus Domini procession in Venice was tied to and was an expression of governmental authority.\textsuperscript{140} In Turin Sandra Cavallo has shown that following a miracle in 1453 involving the host, the feast of Corpus Domini was ‘immediately appropriated by the secular and ecclesiastical authorities’, and in the sixteenth century involved an extensive procession in the city.\textsuperscript{141} This reasoning can also be applied to the event in Mantua; a combination of ducal, municipal and ecclesiastic imperatives led to the carefully curated procession.

The capitolo describing regular processions was an idea adopted retrospectively. Thus not all the orders in the capitoli were definitive or indeed took place. Some problems caused by the epidemic were too complicated for a simple resolution and one such area was the wool industry. The Conservatori considered the immediate implications of their orders recognizing the obligation of the state to provide for those who would suffer through loss of livelihood. Similarly concessions were made to certain processes involved in the textile industry which could be practised outside the city in suburbs (borghi) away from houses in close proximity. Penalties were severe for those who chose to, or

\textsuperscript{140} E. Muir, Civic Ritual in Renaissance Venice (Princeton, 1981), pp. 223-5

\textsuperscript{141} Cavallo, Charity and Power, pp. 36-7.
through necessity had to, contravene them. The consequences of the public health strictures were a contributing factor in the decline of the ailing Mantuan silk and wool industry. As Belfanti argues the wool merchants were so constricted by ducal administration, particularly the bans on exporting goods, it proved difficult to sustain their occupation.\textsuperscript{142} The implementation of trade controls and in the case of the textile industries bans created further concerns as they had a duty to provide for those who lost their source of income. Additionally the application of punishments for those who contravened their regulations both underpinned their authority and provided revenue that could be used to sustain the poor.

Concern about the manual wool workers and how they could sustain themselves was a tension that was never fully resolved. On 4 April Aliprandi wrote that many poor workers in the wool industry had been let go by their merchants and were dying of hunger. He could not see any other way but to force the gentlemen, citizens and merchants to contribute to help them. The Bishop had replied to the \textit{Conservatori} saying he would appeal to the monks of San Benedetto and other rich monasteries, so that ‘the pious work could be done.’\textsuperscript{143} The following day a resolution of sorts had been reached and was broached with the relevant parties. The \textit{Conservatori} had considered the plight of the manual wool workers and suggested the poor could be given a \textit{fede di sanità}, then go to the merchant they usually worked for who could give them some work to do safely. They proposed this to the wool merchants and were awaiting a response.\textsuperscript{144} The following day, 6 April, Aliprandi reported that the \textit{Rettore} and \textit{Consoli de Mercanti da lana et da seta}, had agreed to this arrangement and were happy for the \textit{Conservatori} to proclaim a \textit{grida} to this


\textsuperscript{143} ASMn., b. 2598, c. 20.

\textsuperscript{144} ASMn., b. 2598, c. 21.
However, on 23 April Aliprandi reported that some merchants refused to participate, and went on to say the Conservatori had thought that since the Duke had flour he could perhaps give a thousand sacks to the merchants so that they could distribute it to the poor.\footnote{ASMn., b. 2598, c. 25.}

The Conservatori placed responsibility for providing daily elemosina for the poor to a number of other groups and organisations in the city. It is an important disparity between areas such as Venice where such social concerns had become an integral part of the work of health offices. Paul Murphy has examined the life and career of Cardinal Ercole Gonzaga who while acting as regent for the young Guglielmo implemented religious and governmental reforms earlier in the sixteenth century. Murphy has argued that the ‘particular political situation’ was a further complicating factor for confraternities in Mantua as:

‘the symbiotic relationship between the structures of ecclesiastical authority and those of the local civil government made for a particularly effective means of transforming lay religious practice, the control of confraternities in particular, so that it conformed more completely to the needs and aspirations of the ruling Gonzaga family and the new models of piety fostered in the Tridentine era.’\footnote{Murphy, ‘Politics and Piety’, p. 45.}

This ‘symbiotic relationship’ is also evident in the actions taken to counter the plague epidemic. Church officials and confraternities were expected to contribute through religious ceremonies, elemosina for the good health of the city, and were also involved with the return of those cured at the lazaretto back into society.

\footnote{ASMn., b. 2598, c. 58.}
Unresolved tension about how to best care for the poor workers dependent upon the wool industry was evident in the letters and content of the capitoli related to this problem. Another aspect of the capitoli which underplayed the problematic reality was the burial of plague dead. Burials were to take place outside the city, in accordance with the practice of removing potential sources of infection from the city. On 6 March 1576 Aliprandi made reference to having given the order to the Capi di Compagnia that they were forbidden to bury anyone who died in a short time without licence from him, under grave penalties. The body had to be checked by a surgeon who would report to Aliprandi if plague was the cause of death. After the appointment of the Conservatori Aliprandi reported that the Bishop had sent word that the cemetery of San Pietro had no more space to bury the dead, and for this need they suggested using the church of San Cosmo and Damiano where there was a space under the church where the dead could be buried, though it required some building work to make it suitable. On 12 April, in a post script to a letter and after detailing a fight between two men, Aliprandi asked anxiously if the Duke had made a decision regarding burying people in that church, reiterating the lack of space at San Pietro.

The topography of the city could also cause problems when burying plague dead. On 28 May Bardellone wrote that the previous day three people died of mal contagioso, but at that time the bodies could not be taken to the designated grave yard due to high water. The Conservatori beseeched the Father of San Francesco to accept bodies for burial until the water lowered (l’acqua calasse). He was happy to agree to this and had graves made behind the chapel. However, that night when the pizzamorti arrived with the bodies the door was locked. They found the gate keeper and asked him for the key, but he did not want to give it to them; the other friars did not want the plague dead to be buried there.

---

148 ASMn., b. 2598, c. 8.
149 ASMn., b. 2598, c. 20.
150 ASMn., b. 2598, c. 38.
as then people would be afraid to attend their church. Bardellone and the Conservatori asked for Ducal guidance in the matter as they did not have authority over the friars and were unsure how to proceed. The problem was the lack of burial space for the plague dead in the city, while the high water made it impossible to transport the bodies to the designated burial area.\(^\text{151}\) On 1 June the Conservatori reported the Bishop’s reply: he sent word that he had used every diligence possible to find a place to bury those who died of *mal contagioso*, and the brothers of Santa Agnese had agreed to allow them to use their graveyard.\(^\text{152}\)

Later that year on 8 October 1576 Bardellone wrote that he had come to speak with the Duke about a number of matters, however, as Guglielmo had already left he broached the most important by letter. The first issue that required attention was a *grida* he had compiled for the towns in the state and motivated by a case in Bigarello. Two people had died in the house of a Maestro Pierto Salvano, but the bodies were neither seen nor reported by the Vicario of Bigarello and subsequently others died of *mal contagioso*. Therefore Bardellone thought it necessary to produce a *grida* ordering that bodies could not be buried until examined and given a licence by the officials of the area.\(^\text{153}\)

## Conclusion

The Conservatori produced documents pinpointing the regulations relevant to a particular stage of the epidemic. When appointed they produced the eight short *Ordini* to record their actions then to eradicate the remnants of disease produced another list of orders tailored to that purpose. The *Capitoli*,

\(^\text{151}\) ASMn., b. 2597, c. 213.

\(^\text{152}\) ASMn., b. 2597, c. 222. For burial regulations in Venice see Crawshaw, *Plague Hospitals*, p. 194.

\(^\text{153}\) ASMn., b, 2597, c. 438.
produced in the late summer or early autumn of 1576, are the most extensive example of the collation of orders and policies considered and adopted in Mantua. However, it is extremely important to consider when it was produced, as we have seen that not all the capitoli were carried out as described in the document. The inclusion of a directive to have processions every two weeks, which did not occur during the epidemic, reinforces the theoretical or didactic purpose of the text.

The Capitoli were based upon a system of monitoring and information gathering and exchange. Within the confines of the city the Conservatori built upon existing administrative and ecclesiastical structures to create networks of information providers with the purpose of monitoring the health status of individuals within the city; such as the coupling of the administrative head and parish representative of an area of the city to search for the poor, which was augmented in the Ordini by the appointment of medical teams to each quarter of the city. Doctors, surgeons and barbers employed by the city had to report on a regular basis to the health office, as did pharmacists who provided remedies. The combining of professional categories continued with the order that parish priests along with a gentleman, or suitable citizen, had to effectively patrol areas of the city. Additionally responsibility for reporting cases of sickness and people who contravened the orders was placed on the residents of the city. The Conservatori could not have functioned without their participation in both these respects.

The flow of information and of obedience to regulations issued by the Conservatori sheds light on the day to day running of the office. Movement was limited, with the purpose of monitoring, yet this did not prohibit travel completely; it was possible with the acquisition of special permission from the health office, which could be dependent on a monetary exchange or a condition of a quarantine period. Therefore there was potential for negotiation written
into the regulations. This is akin to the system in Seville where Bowers has shown merchants could use their knowledge of local systems to their advantage in circumventing restrictions.\textsuperscript{154}

Like the terms of the \textit{grida} or of the other types of regulations, the \textit{Capitoli} in essence present a series of preventatives and outcomes for when the preventative structures broke down, with attendant punishments and consequences. Thus it can perhaps be described more accurately as a framework for action. Using the letters we can see beneath this to explore how the structures developed and how they functioned in practice. A degree of flexibility in application is implied by the alterations and additions to the \textit{Capitoli}, and when examined in conjunction with the correspondence we can see the ambiguity or oversimplification of some \textit{Capitoli}. In the following chapters other aspects such as quarantine practices and the \textit{lazaretto} will be examined which will contribute to the argument that in the course of the summer of 1576 the \textit{Conservatori} sought out the most efficacious remedies to restore the health of the city, some of which are found in the \textit{Capitoli} framework.

\textsuperscript{154} See above, pp. 19-21.
5. Causes and Remedies

On 1 May 1576, soon after accepting the position as head of the Conservatori, Bardellone wrote in praise of their diligent work to prevent the disease spreading, adding he would also ‘use all my power to impede the progress.’ He continued:

‘Among the other human remedies we judge it important not to allow the poor to suffer, not only the sick but also the others in the city, so that by the absence of necessities they do not succumb to the now common illness.’

One week later Bardellone made further reference to how the infection spread:

‘these doctors and many others say that the reason this mal contagioso continues to spread is from the healthy mixing with those the stricken, or because of the sheets and goods of those dead or sick, that are used.’

During plague periods health offices had the task of identifying how the disease disseminated and then searching for and applying cures. The search for remedies was not simple and depended upon geographic, economic, medical, social, and environmental factors. This fascinating aspect of the work of health offices is explored in this chapter. After examining how health officials were involved in identifying the type of disease, we shall focus on the search for medicinal remedies and assessing their efficacy; identifying types of infected goods and

---

1 ASMn., b. 2597, c. 110. ‘..et fra gli altri humani remedii stimiamo essere ottimo di non lassiare patir li poveri non solamente amalati, ma li altri della città ancora, acciò che per il diffetto del vivere non caschino nelle infirmitade hora vulgari.’

2 ASMn., b. 2597, c. 173. ‘Perché questi medici et molti altri dicono che una delle cagioni che questo mal contagioso va mantenendosi procede o dalla conversatione che hanno li sani con li infermi di questo male, over perché li panni et robbe de quelli che sono morti o stati amalati sono adoperate.’.
the processes of purgation; and the implementation of quarantine periods from individuals to the city and state. An overarching theme of the chapter is the involvement of a diverse range of groups and individuals in these processes. Therefore we will examine how health officials worked through negotiation to discover resolutions in the best interest of public health, and explore how the concept of public health developed.

The first stage at the beginning of an epidemic was to ascertain the nature of disease and how it spread. It has long been established that health boards worked from a contagion based view of plague spread. More recent scholarship has found a middle ground between the health officers and doctors causative explanations that were once thought to be oppositional. As John Henderson argued there was ‘no clear-cut distinction between the lay contagionist with his empirically based policies and medical men who believed only in ‘mal aria’.” In the dominant Galenic medical system atmospheric conditions were one cause, with earthquakes causing mutations of air that could spread disease. However, as Cohn has demonstrated doctors in the fourteenth and fifteenth centuries ‘stressed the remarkable, even unique contagion of this disease through touching, breathing, or supposedly by sight’. Vivian Nutton has argued that ‘there is evidence enough that there was a lively contemporary debate on various aspects of contagion already by 1540’ in medical circles; an environment that would give rise to Girolamo Frascatoro’s articulation of ‘seeds of disease’ in 1546. Nutton cites an example of a discussion by the College of Physicians of Padua and the Venetian government on the causes of a deadly fever Padua was suffering from in 1541, where the ‘leading physicians of Padua

3 Lazaretti will be examined in the following chapter.
6 Cohn, Cultures, p. 9.
7 Nutton, ‘Seeds of Disease’, p. 27.
saw nothing incongruous in using the metaphor of seeds alongside that of the putrefaction of the air. In Mantua, a belief in plague spread via personal contact or via infected goods dominated the actions taken during the epidemics under discussion. However, these views were articulated and in some instances were reassessed, refined and indeed were reinforced by health officials.

In the late fifteenth century Carlo Agnelli was not involved in discussing the causative mechanisms of the disease, in terms of a miasma or contagionist spread, but was more concerned with applying his knowledge through identifying the symptoms of potential plague cases and acting accordingly. His main priority in terms of the origin of disease was in a geographic explanation; Ferrara was identified as a particular area of concern and the disease was referred to as the plague of Ferrara. Once the city of Mantua was infected he worked on the basis of identifying suspected threats and removing them. In early May 1468 a thief, then called a treacherous thief, was captured, having stolen infected goods from the house of a blacksmith named Cristoforo. Agnelli described them as being of little value, though the silk and linen was ‘a real nest of plague.’ Through the process of obtaining a confession, that included torture, Agnelli stated that the thief should understand the great damage his actions could have caused. The thief said he acted alone, but several days later on 14 May Agnelli reported that the family of the thief had been removed to a temporary plague hut outside the city. He used this particular phrase again. On the second occasion Agnelli wrote of the necessity to ‘remove those nests of plague in Rivalta.’ Rather than bundles of cloth, he referred to a number of infected houses that he sent

---

8 Ibid., p. 28-9.
9 See above, pp. 34-5.
10 ASMn., b. 2410, c. 239. ‘nido proprio di peste’.
11 ASMn., b. 2410, c. 242.
12 ASMn., b. 2410, c. 243.
13 ASMn., b. 2410, c. 249. ‘Per levare quelli nidi di peste erano a Ripalta.’
*pizzamorti* to empty and clean to ensure that no other cases of infection would arise from them. He added, ‘God willing’, there would only be three houses to clear that did not have many things in them. Descriptions of a nest or nests of plague and the attendant processes effectively describes the procedures Agnelli employed; the tracking of objects or people who were potential disease carriers, the removal of suspected people, and cleansing infected places to ensure the infection did not return. The metaphor of nests refers to the possibility for the growth of new cases of disease caused by previously infected objects through ineffective cleaning or illicit interaction with the sick, and in this way is similar to the metaphor of the Hydra used in 1506. So, although Agnelli did not explicitly discuss or dispute the mechanisms of the disease, his actions and language demonstrate a predominantly contagionist view of plague spread, through experience.

In the course of the sixteenth century health officers took part in discussions in the early stages of an outbreak to identify the type of disease they faced, and discussions of this nature often continued during the epidemic to defend or reject certain types of actions. Health officials also took advice from and consulted with a range of other people. In 1506 the convocation to identify the type of pestilence and necessary remedies involved administrators, doctors and citizens, and the lines of disagreement were not drawn between the lay and medical community, but between those who had experience of the disease and those who did not. However, astrological signs and prognostications played a role unlike in any other plague under discussion. In writing about possible causes of plague Calandra stated that, in contrast to *Marchese* Francesco’s steward, he put little belief (*essendo io pocho credulo*) in the predictions of a brother Benedetto. Calandra wrote to the steward to inform that him a chart had been drawn up which revealed a sign that the air was infected and corrupt, and this would be very bad as the remedies they had been using would be of little use.

---

14 Ibid.

15 See above, p. 58.
He found it very difficult to believe that the people who had died of the illness until that point had succumbed to a disease that could not have come from contagion, adding he would have a copy of the designs made and send it to the Marchese. As the epidemic continued there was further rejection of possible environmental causes. On 19 April 1506 Calandra wrote that on that day nine died in total, four of plague, and for that they were happy and had cause for great hope; there would be a conjunction of the moon, and things should improve thereafter. He also sent the drawing of the astrological prediction, adding that he put more faith in the diligent provisions made by Alessio. Consideration was given to the alternative source of mal aria but health officials did not seriously subscribe to this identifying cause. The use of astrological charts perhaps reflects a contemporary cultural trend rather than a fundamental deviation from understanding how the disease spread or in how such assessments were made. The Marchese Francesco clearly had an influence in pressing for the use of the charts, and as a consequence Calandra grounded his responses and arguments in the work carried out primarily by Alessio.

Alessio also believed the disease (tal contagion) did not come from corrupted air. He stated that one could see through experience that those who were plague stricken caught it from infected things or from having had close contact with the infected. The belief in contact transmission was reinforced by complaints and exasperations about events in the city. On 10 May 1506 Calandra wrote that it seemed to Alessio and the Collaterale that:

‘the main cause of the daily growth of the disease in this city is the almost universal error that I wrote to your lordship about yesterday, which is almost everyone allows the disease to show before the

16 ASMn., b. 2469, c. 117.
17 ASMn., b. 2469, c. 120. For Francesco Gonzaga’s astrological interests see Bourne, Francesco Gonzaga, p. 158 n. 122 and p. 241.
18 ASMn., b. 2469, c. 126.
disease is discovered, and for this it was necessary to find a remedy. So that the disease does not continue indefinitely they have ordered those men of good character, who have the task of distributing bread as charity in their neighbourhoods, together with the capi di compganie, to search each morning most diligently from house to house for all the sick.¹⁹

Through the diligent work of these men, they hoped to discover all cases of illness quickly. Calandra went on:

‘today they have published a grida ordering in the strictest terms that anyone who has sick people in their house, of whatever kind of illness, must report them immediately to the office of the collaterale. If anyone dies or is discovered close to death, who has not previously been reported, they will be thrown out of the walls unburied, all their family will be dispersed and the house and goods, without exception, immediately burned. And because it is believed this disease proceeds from fear those who, having more care for their lives than to hide the disease, are discovered and sent to Mapello, their goods will not be destroyed.’²⁰

¹⁹ ASMn., b. 2469, c. 195. ‘parendo a Maestro Alessio e al Collaterale che gran causa del crescere ognidi il male in questa terra fusse quello già quasi universale errore, che hieri scrissi a Vostra Signoria che quasi ognuno si lassa venir meno prima che scoprire il male: e che a questo fusse necessario ritovare remedio: aciò che'l male non procedi in infinito: hanno commesso a quelli homini da bene che hanno impresa di distribuire il pane per elemosina in le loro contrade insieme con li capi de compagnie che ogni mattina per alcuni dì. Se informino diligentissimamente de casa in casa de tutti li infermi usando in ciò ogni dexteritade per scorgere bene tutti li mali.’

²⁰ ASMn., b. 2469, c. 195. ‘Oltra questo han oggi facto publicare una crida che commanda strettissimamente a chiunche ha amalati in casa de qualunche sorte de infirmitade; li denunci subito al officio dl collaterale che se alcuno o morira o si scoprirà vicino a morte che prima non sia stato denunciato: serra gettato fora de la mura insepulto e scoperto: e tutto la famiglia serra dispersa: e la casa e robba gli serra senza remissione subito brusata e per che si crede che
He concluded that he hoped these remedies would be effective (proficui), along with the others they had already carefully made.\textsuperscript{21} The potential impact and severity of the regulations was recognised: on 12 May 1506, Alessio commented on ‘the need to use cruel cases for the public good’ and stated that he hoped that with God’s help and the vigilance and care of Scalona they would soon find the foundation and cause of the malignant contagion.\textsuperscript{22} There was a strong belief that the source or sources of the disease could and would be found. The foundation of the epidemic could have been an environmental source causing \textit{mal aria}, but is unlikely given the focus on people and goods and the implicit rejection of the prognostication pointing to corrupted air.

On 17 June 1506 Calandra wrote ‘to prohibit as far as possible the gathering together of citizens’ Alessio ordered a \textit{grida} to be published the following day stipulating that no one could leave his house to go to the countryside for any reason, unless they had an urgent need in which case they had to explain it to the \textit{Collaterale}.\textsuperscript{23} Once this proclamation was made they hoped within a very short time to have conquered the plague (speramo esser \textit{vincitori contra la peste}), as the doctors said that trade among citizens was very pernicious and worked against their plans to expunge the infection from the state. Again health officials consulted others to identify and implement the most efficacious remedies, and this is also an example of advice from doctors against contact with potentially infected people or goods, not sources of \textit{mal aria}.

\begin{footnotesize}
\begin{itemize}
\item[\textsuperscript{21}] ASMn., b. 2469, c. 195.
\item[\textsuperscript{22}] ASMn., b. 2469, c. 200. ‘pur bisogna usare el crudele [...] casi per el ben publico e spero con lo adiuto de dio et in la vigilantia e sollicitudine de Maestro Jo Carlo presto trovare el fondamento e le radice de questa malignia contagione.’
\item[\textsuperscript{23}] ASMn., b. 2469, c. 312. ‘per prohibir più che sia possibile il converser insieme de li citadini..’
\end{itemize}
\end{footnotesize}
What discussions, if any, took place among health officers to discover the reason behind the spread of plague in 1527 and 1528 unfortunately remain obscure. Calandra’s insistence in prompting the Marchese to appoint a new Collaterale, as his responsibility was to know what parts of Italy were infected, suggests a concern for spread by people and goods. By the San Carlo epidemic, astrological explanations or prognostications had been abandoned, and focus returned to what was termed human remedies, dependent upon ideas of contagion and again focusing on the geography of plague. As quoted at the beginning of the chapter Bardellone attributed the continuing progress of the disease on the interaction between the healthy and the sick, and people using goods belonging to those sick or dead of mal contagioso. On 10 May further suggestions were made about the spread of disease. Bardellone commented that the Conservatori would continue to have wooden huts made so they could send more of the poor sick out of the city, as this was judged to be the most salubrious remedy to clean the city.

Health officials were acutely aware of the need to care for the poor during epidemic periods. As Cohn has demonstrated in the course of the fifteenth century plague became predominantly identified as a disease of the poor. By the second half of that century the Milanese necrologies ‘show indisputably that the plague had become consistently a disease of poverty.’ Care for the poor took variant forms and as Brian Pullan has argued the poor had three contrasting roles during plague epidemics, as bearers, victims and

24 ASMn., b.2597, c. 173.
25 ASMn., b. 2597, c. 179.
26 Cohn, Cultures, p. 211. See chapter 7, pp. 208-237, for a discussion on plague and poverty in 1575-7. See also Cohn, ‘The Changing Pathology of Plague’ in Le interazioni fra economia e ambiente biologico nell’Europa preindustriale secc. XIII-XVIII, ed. S. Cavaciocchi (Florence, 2010), pp. 47-50.
beneficiaries of the plague. This causal link also shaped the cures and remedies identified in Mantua and responsibility to care for the poor, both sick and not suspected, became a feature of the health officers’ discussions during plague epidemics, most forcefully in the late sixteenth-century.

Agnelli articulated the problem he faced when the majority of citizens left the city in October 1463 as those left inside were predominantly the poor, and as a consequence were more likely to suffer as the better off citizens had left and Agnelli could not request aid to support the poor from them. On 5 November 1463 Agnelli wrote to the Marchese of the need to supply bread for those who did not have a way or means to support themselves (non hanno via ne modo alcuno al loro vivere). Agnelli went on to list the potential religious sources of charity that he hoped would contribute; including the Cardinal, the Bishop, the Abbot of San Andrea and the Brothers of San Benedetto. In 1506 Calandra wrote to the Marchese concerning a grain tax that had to be demanded from various citizens to contribute to the public elemosina needed to help the poor who were suffering a great famine. He then gave two examples of generosity that were in his phrase ‘worthy of remembering.’ First a Benedetto Maistrello who, ‘other than the good will shown on his part’, had given the keys to his storehouse where there were 700 stara of grain. The second example was a Giovanni Baptista Corno who had donated 100 sacks of grain. It was hoped that these examples would push other gentlemen and good citizens to contribute to

28 ASMn., b. 2398, c. 324.
29 ASMn., b. 2398, c. 359.
30 ASMn., b. 2469, c.162.
this 'pious aid' (pia subventione). In 1528 Scopolo also discussed the distribution of goods (spesa) for the poor.

With the first suspicions of illness in Mantua in October 1575 Aliprandi was concerned with supplying medical care and victuals to the poor enclosed in their homes. After several weeks of cases involving the sick poor a doctor Pendaso was chosen to care for the poor in the city with a payment of fifteen scudi a month. In April 1576 the Conservatori attempted to transfer the distribution of elemosina from the church to the health office. On 4 April Aliprandi wrote regarding the elemosina collected in churches for the jubilee. The Conservatori presented the argument that they were in urgent need as they had to make provisions for all the poor in the city, and so requested that the distribution of this elemosina should be put in their hands instead of the Church. Similar concerns with the provision of charity to the poor were mirrored in Milan and Verona, though with a different tenor of involvement and distribution. As Cohn argues ‘on the division of labour in ministering to the needs of the city during plague, the Church played a vital role, and in Milan, as in other places, its energies were not confined to spiritual health alone.’

31 ASMn., b. 2469, c.162.
32 ASMn., b. 2511, c. 65.
33 ASMn., b. 2595, 19 October 1575, Giovanni Aliprandi.
34 ASMn., b. 2595, 6 November 1575, Giovanni Aliprandi.
35 ASMn., b. 2598, c. 19. It is clear that during each of the epidemics discussed the health office appealed to or coerced religious groups to participate in their work. However, further archival research is necessary to establish what form the participation took, for example what economic contributions, if any, were made.
36 Cohn, Cultures, pp. 228-9.
37 Ibid., p. 229.
By the late sixteenth century professional lines were more deeply drawn between the medical profession and administrative officials, and as a result the working relationship between the Conservatori and the doctors was more formal. They worked with the College of Doctors, as well as with individual doctors, which was not the case in previous epidemics. We have seen one example of the demarcation between the health officials’ work demonstrated in a text written by the Mantuan doctor Giovanni Battista Susio. Further evidence of the professionalization of the doctors in Mantua was the reform of the statutes of the College of Doctors in 1559. In an edition of the statutes Gilberto Carra and Attilio Zanca argue that as in other cities or political units in Italy, the reorganisation of the medical profession was completed in the Renaissance. The statutes of 14 December 1559 were certainly not the oldest regarding the medical profession in Mantua but they represent a definite end point, a sum of the provisions governing the profession from the point of professional identity and the protection from abuses.

The change in this relationship can be seen in the discussions on the most efficacious remedies. On 2 November 1576, Bardellone sent a long letter to the Duke stating that the Conservatori had discussed what would be the best remedy to extirpate the remains of the illness. For some time the Conservatori had believed that it would be necessary to send not only the sick but all the healthy suspected (sani sospetti) out of the city, as soon as sickness of any kind was discovered in any house. He went on to argue they were diligent in sequestering houses in the city, but checking on them was difficult, citing the case of a Giulio de Maestri who died a few days earlier after getting the disease (ha preso il male) from a woman who was sequestered. As a possible remedy he suggested the Conservatori find a large place to send those who did not have an alternative habitation of their own or somewhere to rent. Despite the financial

38 See above, pp. 72-3.

concerns, this measure would help obviate damage to the city and would save many of those who would otherwise suffer. With the argument and solution set out, Bardellone ended with:

‘it is true that there being no one of the medical profession in our group, we rely on the judgement of intelligent people and on the infallible opinion of your highness that is sacred to us, though we had wanted to make our thoughts known. We intend, however, always to provide for the poor so that they do not suffer.’

The Consilitori consulted others and sought opinions regarding various ideas, but were aware of their administrative capacity. The dual aspects of caring for the poor to prevent disease, and also of providing care for the sick poor feeds directly into broader concepts of public health, tied to the preservation of cities during epidemics. Unlike the more established health offices in Venice and Milan, the Mantuan health officials had to search for resources, coerce others into participation or adapt their regulations where necessary to accommodate their current need. For instance, as we have seen on occasions when merchants requested permission to enter the city in 1463 or to leave in 1576 to attend to their own concerns, they were allowed to do so on condition they sold or brought goods, usually foods, back to the city.

**Medicinal Remedies**

Despite the recognised role of health officers as administrators, the search for medical cures was an important part of their work. This discussion contributes to the belief and scholarship of Cohn and Stevens Crawshaw who

---

40 ASMn., b. 2597, c. 496. ‘Vero è che non essendo nella nostra congregazione alcuno della professione de Medici se rimettiamo al giudizio di persone intelligenti, et all’infallibile parere dell’Altezza sua, alla quale per nostro sacro, habbiamo pur voluto far intendere questo nostro pensiero. Intendiamo però sempre facendo provigione alli altri poveri che non patiscano’
have demonstrated as Stevens Crawshaw describes it ‘innovation and change in treatment in the course of this period.’ In contrast to the approaches taken by these scholars to illustrate this point, the search for medicinal remedies in Mantua will be viewed as evidence for a change in relationship between health officers and doctors or those selling medical cures.

In contrast to subsequent Collaterli and Conservatori Carlo Agnelli did not actively engage with the appropriation of medical cures, nor was he involved in organising experimentation with them. One possible exception was a remedy using scorpion oil. There are two letters from a Bartholomeo de Manfredus included in a busta that contains Agnelli’s correspondence. One dated 29 June 1468 extols the virtue of scorpion oil as a remedy that could be used for worms, for disease (morbo) and for pain, and details when it should be used. However, there is no evidence to suggest it was purchased or used. This is not to suggest Agnelli eschewed medical intervention completely as he searched for and sent doctors to the lazaretti areas. In another instance he discussed the case of a Valente di Acerbi and his family, stating that he had sent a Maestro Cristophoro, a barber who worked in the botega of a Maestro Francesco, to care for them.

Again, in the first third of the sixteenth century medical remedies purchased or tried by the health office were few. This is not necessarily a reflection on the lack of faith in medical cures, perhaps rather evidence of a lack of willingness or necessity to use them on a broader basis. In 1506 the Marchese Francesco Gonzaga sent an oil to Gian Carlo Scalona to try. On 12

41 Stevens Crawshaw, Plague Hospitals, p. 151.
42 ASMn., b. 2410, c. 221. The second is dated 9 August and details how it might be used, ASMn., b. 2410, c. 223.
43 ASMn., b. 2410, c. 245.
44 The oil was sent via Francesco’s secretary Tolomeo Spagnolo. See pp. 49ff?
April Scalona commented that a massara had been found with plague and abandoned in a house. She was taken to the Maddalena where the doctor used the oil on her (fara quello esperimento). Alessio also made reference to this woman named Giovanna, massara of the Suardino, as a doctor had cut a large giandussa on her hip (cossa) adding that the doctor had hope she would get better. Alessio used the term medico, but as it was an external treatment the practitioner was more likely to have been a surgeon or barber surgeon. The doctor reported that the oil the Marchese had was good but further testing was necessary and the next day he would try it on a young strong boy who had plague, without giving him any other remedy, to see the effects. The next day Scalona informed the Marchese that the massara was in a good way. Unfortunately how the Marchese came to have the oil, or what type or composition is unknown. Yet, it was tried, tested and an assessment of its usefulness given seemingly at his request.

The only mention of the cure all remedy terra sigilliata, or sealed earth, was in 1528. On 8 August Calandra reported that he had shown some terra sigillata to Maestro Paris; he said it was good, but that which the Ambassador sent to his wife (consorte) was much better. The following day Calandra wrote that Maestro Paris said it would be best to try the terra sigilliata and the Bolarmino to see if it worked by sending as much as would be necessary for the plague sick at Mapello. Terra sigilliata was discussed again on 15 December when Alessio referred to his cousin who extoled the virtue of the remedy, saying

45 ASMn., b. 2496, c. 87.
46 ASMn., b. 2469, c. 88. For the problems in identifying areas of the body, specifically the meaning of ‘cossa’ or ‘coxa’ see Cohn, Cultures, pp. 43-4.
47 ASMn., b. 2469, c. 88.
48 ASMn., b. 2497, c. 93.
49 ASMn., b. 2511, c. 38. How this terra sigilliata was appropriated by the health office is not clear.
50 ASMn., b. 2511, c. 39. This is the only reference to the ‘Bolarmino’.
that it helped to cure him and saved his life. That morning the doctors also confirmed the efficacy of the *terra sigilliata* and that it had caused improvements. For that he was going to Santa Maria delle Grazie to have a Mass said. Given the length of Alessio’s cousin’s illness it could not have been a plague case alone. Yet, going specifically to Santa Maria delle Grazie would indicate he had recovered from plague as it had strong connotations as a ‘plague church’, as it was rededicated following the cessation of a vicious plague at the turn of the fifteenth century. Despite the brevity of the evidence about the *terra sigilliata* some tentative conclusions can be drawn. First, in Mantua, as elsewhere, it was at least considered to have potential as a plague remedy; unfortunately the outcome of the tests at Mapello is unknown. Second, there is evidence for two varieties of the substance and a perceived hierarchy of efficacy which accords with the growth in variety of types of this earth in the sixteenth century. Andrea Gratiolo recommended *terra sigilliata* and Bolarmino in 1576 as ‘a good preservative against corruption’. Yet, there is no evidence to suggest the Mantuans used either of these remedies in 1576-7; nor is reference made to the use of *therica*.

Before 1576 the search for medical remedies by health officers was fairly limited, although they did recognise the work carried out and remedies used by doctors usually at the *lazaretto*. With the official arrival of plague in late spring 1576 the search for such remedies began in earnest. On 15 May after giving the list of deaths in the city and *lazaretto*, Libramonte added that remedies were coming from various places and the *Conservatori* were hopeful.

---

51 ASMn., b. 2511, c. 76.
54 See below, p. 235 and pp. 237-8
55 ASMn., b. 2597, c. 411.
On 24 May 1576 the Prior of San Benedetto wrote to pass on information regarding a possible cure. A father Michele, the Prior of San Pietro in Modena, wrote to him about a Conte Peruzzi in Ravenna who apparently had many wonderful secrets for ‘this contagion of plague’ and he offered his services to the Duke and city of Mantua. This remedy had Church backing; however, it is not clear if the Conservatori accepted his offer.

Another remedy was discussed on 22 October, when Bardellone wrote that the doctors would be given a recipe to try, even though from the directions given in the accompanying instructions it would be very difficult to use as it was almost impossible to discover the illness within the first eight hours and it said the remedy would not work otherwise. Not only would it be difficult to use according to the instructions, but on 26 October another letter revealed problems in sourcing ingredients. Bardellone wrote that the remedy could not be tried out because according to the notes (scrittura) on how to use it one needed a mysterious aqua de Cerase marine or citrus seeds, and in Mantua neither of those ingredients could be found.

A copy of one remedy was kept with the health office documents: the Ordine per adoperare l’Antidoto divino contra qual si voglia sorte di peste o di altri morbi pestilentiali et contra ogni sorte di veleno vivo o morto terminato et non terminato. It is worth exploring as it gives an indication of the type of treatment considered or used, and also the intricate processes involved in taking such a remedy. The remedy worked both for those who wanted to preserve themselves and their families from plague and also for those who were infected.

56 ASMn., b. 2600, 14 May 1576.
57 ASMn., b. 2597, c. 473.
58 ASMn., b. 2597, c. 484.
59 ASMn., b. 3048, cc.117-8.
First it was necessary to have rose vinegar infused with grains of juniper and citron peel. It instructed that a fire using good wood should be lit each morning accompanied by a long list of suitable types of wood including olive, pine or oak. Then when the fire was lit and after having emptied the superfluities of the body and washing the face and hands with water which had been boiled with rosemary, the patient was instructed to take a measure (dramma) of the electuary, mixed with two measures of acro di cedro condito and one measure of Tuccaro rosato and then taken a little at a time (piglierai un poco poco) with a good white wine. One could then use the same vinegar infused with four to six juniper grains as an odorificient, and as it could be applied often this would allow people to carry out their daily business safely (sicurissimamente).

Once infected, but before eight hours had passed, the patient should be given two measures of the electuary with three ounces (onci) of aqua de melissa, and then should be covered well in a bed with many sheets to encourage sweating; because sweating was a certain sign of health, unlike vomiting which was not part of the treatment process. If an apostema appeared on any part of the body it could be cured within twenty-four hours by taking another measure of the electuary with two ounces of acqua acestosa until it went away. However, at this point the instructions introduced the need for Gods help in addition to other necessary things, such as blood-letting and the judgement of the doctors present who, the instructions state, undoubtedly knew how to cure people safely. In cases of pestilential fever with the appearance of petecchie or varoli the patient should be given a half measure distemperata with an ounce of syrup of acro di cedro and an ounce and a half of acqua di melissa or of acetosa and after doing this for three mornings one would see miracles. The remainder of the advice was for animal bites and poisons. It explains how to treat poison caused by animal bites. As with any other type of poison the electuary could be used the following way: the victim should take two measures every six hours in three ounces of acqua di boragine in which rosemary flowers and betonica had been boiled, and then a little of the electuary should be taken with strong rose vinegar, and with that mixture
concluded that all the advice could be used for greater protection in times of infection and terrible contagion, but if people did not have the materials or ingredients to make the mixtures described, then it could be used simply with wine or rose water because it would produce the same effects. It is not clear if this remedy was used by the Conservatori in practice. They remarked upon how difficult it would be to identify the disease within the eight hours indicated, nor were they likely to have access to many of the additional ingredients prescribed. Yet, this gives an insight into the processes involved in applying medicinal cures, and their usage.

The Conservatori, however, did obtain medicinal remedies and recipes from several different sources, including a certain Marco Luchese and the Venetians, that were tried and tested by doctors working in the city and lazaretto; although it was eventually remarked that they could do just as well without them. On 9 August, after referring to an antidote sent from Rome which was given to a Jewish doctor to try (da far isperienza), the Conservatori argued:

‘we believe that if the sick should wish to discover their illnesses quickly, and the doctors care for them, and given the tools of our barbers, the majority of the sick will recover without foreign remedies.’\(^{61}\)

Not only were they confident of effecting a remedy, but could do so best on their own terms with their own methods. It should be noted that this assertion was not because the remedy was brought by a Jewish doctor. While there may be evidence in plague tracts for ‘an intellectual unity of Italy in the sixteenth

---

\(^{61}\) ASMn., b. 2597, c. 316. ‘noi crediamo che purché l’infermo voglia scoprir presto il suo male, et li fisici vadino a medicare, che con li ferri de nostri Barbieri, la magior parte d’infermi guariranno senza ricette forastiere.’
century, at least as concerns this branch of medicine and the fear or plague’, and further that ‘references within these tracts sketch a lively intellectual network among sixteenth-century Italian doctors that was neither parochial nor regional as might have been expected’\textsuperscript{62}, this perhaps did not filter down to the practical application of remedies during plague periods. Admittedly the remedies sourced may not all have come from academic doctors, but the assertion by the Mantovani in finding their own remedies from within their own community, speaks to the drawing of deeper lines between differing states and a pride in their own ability to cure the disease.

The impetus for the assertion of not needing foreign cures more than likely came from the experience of trying and testing several different remedies over the summer. One particularly interesting character who advertised his own remedy or secret was Marco Luchese. Luchese approached Paolo Moro, the Mantuan ambassador in Venice, touting his wares and ability. On 21 April 1576 Moro wrote to the Ducal Secretary Libramonte:

‘One Marco Baratti Luchese came to visit me, to say he is compelled to heal the illness that is now found in Mantua, whether plague or \textit{petecchie}, and he said he did not want anything (in return) until the remedy worked.’\textsuperscript{63}

Luchese had given Moro a small ampule of a certain \textit{liquore} that ‘would certainly get rid of plague, without any fear.’ Moro added that he sent the ampule to Aliprandi. All Luchese needed was a pass to travel to Mantua, which was banned by Venice.\textsuperscript{64} On 1 May Libramonti anticipated Luchese’s arrival; he wrote to the

\textsuperscript{62} Cohn, \textit{Cultures}, pp. 33-4.

\textsuperscript{63} ASMn., b. 1509, c. 423. ‘Un Marco baratti luchese é venuto a ritrovarmi, con dire che si obliga sanar quella infermità che si ritrova in Mantoa o sia peste o petecchie, con dire che non vole cosa alcuna finché non habbi operato.’

\textsuperscript{64} ASMn., b. 1509, c. 423.
Duke that Luchese who ‘said he would do great things with a marvellous secret to cure the sick of *mal contagioso*’ should have arrived the previous day.\(^65\) By 3\(^{rd}\) May Bardellone reported that the *Conservatori* had put Luchese to work using his secret to cure the illness.\(^66\) Again the composition of his remedy remains obscure.

Luchese’s involvement with the *Conservatori* did not end there. For instance, Luchese wrote to the Duke on 11 May explaining how he came to be in Mantua: while in Venice he heard of the infirmity in Mantua, a city he held dear to his heart (*Città assai a cuore*), and having a ‘rare secret’ for *mal contagioso* and similar illnesses he resolved to find the Mantuan ambassador to offer his services. Having been given a travel pass he came to Mantua to use his remedy, with no reward. Then he reached the crux of the letter and requested accommodation as it had not been provided by the *Conservatori*.\(^67\) Subsequently he was moved to the *lazaretto* which will be discussed in the following chapter. For the moment it is sufficient to argue that although Luchese’s story may be unusual, certainly in Mantua, it sheds light on the complicated relationship with outsiders or foreigners during epidemics. On one hand there was the negative aspect of threat from an outsider in bringing disease into a community, either by accident or design.\(^68\) On the other, slightly more positive side, remedies or ideas which were potentially beneficial were sought from external sources. In this vein one of the marginal groups often cited as the focus of arbitrary legislation played a central role. Luchese would appear to have been a type of charlatan.

\(^{65}\) ASMn., b. 2598, c. 401.

\(^{66}\) ASMn., b. 2597, c. 164.

\(^{67}\) ASMn., b. 2597, cc. 4-5. The letter was written by a secretary, but Luchese signed it in his own hand.

\(^{68}\) As we have seen in chap. 4.
and is perhaps comparable with Giacomo Coppa, ‘a famous charlatan’ discussed by Stevens Crawshaw, as he also ‘moved between medical categories.’

Later that month on 24 May Bardellone reported that he had spoken to the College of Doctors about a remedy sent from Venice and the concerns arising from the information in the attached instructions. Some doctors, he did not specify any further, did not want to be forced to use the remedy as the ingredients were unknown, and could potentially be dangerous and cause deaths as had already happened with a *liquore* that had been tried in the *lazaretto*. This was presumably the cure sent by Luchese. Others agreed to try it by ‘assuring their conscience that the Duke had ordered it.’ One of the ampules and the accompanying instructions were sent to the *lazaretto*. On 29 May Bardellone reported that the doctor Conte had used the first remedy sent from Venice. He gave it to the cook at the *lazaretto* who had retained it for an hour then vomited and sweated such that he was in a good state, but his ‘body was very full and weak.’ Conte tried it on two other people but it had no effect other than causing the patients to sweat. The instructions said to use the remedy again but he designated two days before trying it. The *Conservatori* had sent Conte an addition to the remedy, which had been brought to the office from the Duke. Doctors Imola and Ragno used the same remedy but nothing happened as the patients could not retain the potion. Ragno had given the second remedy to ten people that morning, but the oil was not sufficient according to him.

---


70 ASMn., b. 2597, c. 207. ‘Altri hanno accettato di far la prova assicurando a luoro consciencia sopra della commissione dell’Altezza sua.’

71 ASMn., b. 2597, c. 216.
Later that summer the Mantovani also purchased the secret from the doctor of the Venetian lazaretto. Bardellone wrote ‘if it is true and produces the promised effects, it will bring very great consolation and happiness to us all.’ However, on 24 September Bardellone wrote that the doctors had met up (hanno fatto collegio), along with doctor Susio, and all were in agreement that ‘the remedy made public by the doctor of the lazaretto in Venice is abominable, it would cause bad effects rather than good. They judge the doctor to be a cerretano.’ They imply that the remedy was designed to take peoples’ money rather than cure: perhaps a comment on the commodification of medicine.

Describing the Venetian as a cerretano, rather than one of the many other possible names for charlatans, is also interesting as cerretani were associated with not giving details of their recipes or medical secrets. As Gentilcore points out in 1576 the Venetian authorities were desperate to find plague remedies and ‘this included the purported cures of physicians, charlatans, priests, noblemen, as well as anonymous individuals.’ In September 1576 the Sanità employed the secret remedy brought to them by the physician and surgeon Ascanio Olivieri, after seeing it produce successful results. It is likely this was the remedy bought, considered and rejected by the Mantovani. Why this particular remedy was the subject of such sharp criticism is perhaps due to a number of factors. By this point the medical profession certainly believed they did not need foreign input in order to cure the disease, and perhaps the enforced trials of various remedies caused exasperation at the influence the Conservatori exerted over their treatment plans.

72 ASMn., b. 2597, c. 376. ‘sarà vero et produce l’effetto che promette, portarà grandissima consolatione, et contento a tutti noi.’

73 ASMn., b. 2597, c. 403. ‘conchiudono che il remedio publicato dal Medico del lazareto di Vinegia, sia abominevole et più tosto possi cagionar male effetto, che buono, et stimano che il Medico sia un Ceretano.’

74 Gentilcore, Medical Charlatanism, pp. 54-5.

75 Gentilcore, Healers and Healing, pp. 109-10.

76 Gentilcore, Medical Charlatanism, p. 142.

77 Ibid.
Doctors

The pursuit and application of medicinal remedies was one interaction the Conservatori had with the medical profession. Health officers had the task of providing doctors to care for the poor in the city and also for the lazaretti. Problems arose with supplying doctors, with what they were willing to do and how they would medicate patients. On 13 October 1576 Bardellone commented that they were in need of doctors at the lazaretto. None in the city were willing to comply and the four doctors employed by the Conservatori grudgingly agreed to go and examine the urine of the infected, taking turns each week, even though it would be inconvenient to the doctors and of little benefit to the sick in the lazaretto; further it could cause damage to the city. The Conservatori conceded through necessity rather than it being the preferred mode of treatment for the patients. Stevens Crawshaw points out the patients in the Venetian lazaretti were observed from doorways and balconies, and whether doctors ‘came into closer contact with the sick is unclear but it may be that they remained at a distance within the hospitals as they often did within the city.’ On the other hand it was not only the doctors who were subject to criticism; it could also be levelled at people who did not want medical interference and the chain of events that would follow a plague diagnosis. On 10 June 1506 Calandra wrote about a problem the doctors had raised. They had discovered what Calandra described as ‘a great sign of pertinacity in the people’ who did not want the sick to be discovered, as some had shown urine from a healthy person to the doctor (medico fisico) as if it was their own, so that the doctors would not enter the house.

---

78 ASMn., b. 2597, c. 449.

79 Stevens Crawshaw, Plague Hospitals, p. 164.

80 ASMn., b. 2469, c. 296.
The death of one of the doctors brought the problem of methods of caring for patients to the surface. On 12 July 1576 Bardellone reported the death of doctor Bertoldo, who died of a malignant fever with two large pustules, and the doctors said it would be difficult to replace him. Before approaching the College of Doctors to order them to find a replacement the Conservatori wanted to consult the Duke because they felt they needed to have his support (desideriamo haver particolar autorita dell Altezza sua), as it seemed likely they would have to force another doctor into service.\footnote{ASMn., b. 2597, c. 287.} One potential avenue to resolve the deficiency was sourcing foreign doctors. On 17 July, they received a letter from a doctor willing to visit the sick in their homes. A Maestro Carlo Ceruto had given a letter via his brother Maestro Giovanni, stating that he would come to Mantua to care for the sick and would not be fearful of entering houses to visit the sick, not only for the first time to find out the nature of the illness, but while the patient was alive. The Conservatori awaited the Dukes response to the request.\footnote{ASMn., b. 2597, c. 292. It is unclear where Ceruto was writing from.} In that same letter a reference was made to a response from the College of Doctors; the content of their letter was not made clear but hints at a dispute, as Bardellone commented ‘we are not of the profession, it is not necessary to give our opinion.’

The problem of how closely doctors medicated patients continued. In August, Bardellone wrote that until that time the Conservatori had not wanted to force the doctors to enter the homes of the sick they were caring for, in the hope that foreign doctors could be found but as that had not happened the Conservatori were out of hope.\footnote{ASMn., b. 2597, c. 304.} Other states also sought foreign medical operatives to fill gaps in care with varying success. Cohn describes Paolo Bisciola’s view of this in Milan, he:

\footnote{ASMn., b. 2597, c. 287.}
\footnote{ASMn., b. 2597, c. 292.}
\footnote{ASMn., b. 2597, c. 304.}
‘reported the city’s need to hire foreign barbers and doctors to assist in caring for the plague-afflicted. He praised the German barbers, who succeeded ‘benissimo’ in their treatment, but (unlike other Milanese observers) was less favourable towards the seven hired French ‘doctors’. ’\(^\text{84}\)

Giovanni Battista Susio, who was not a member of the College of Doctors, perhaps as he was born in Carpi and not Mantua, wrote about foreigners being admitted to the College.\(^\text{85}\) Richard Palmer has argued that ‘in times of plague in the sixteenth and seventeenth centuries health offices were able to make demands on doctors in private practice which would have been inconceivable at an earlier period.’\(^\text{86}\) This assertion is true in Mantua as evidenced by the disputes and concerns about how doctors interacted with patients, but equally the authority of the collective body of the College of Doctors meant they did not acquiesce to the demands of the Conservatori readily.

The Conservatori were also involved in supplying medical personnel to other parts of the state. On 8 May Bardellone made reference to a doctor from Genova who they had sent to Capriana; the health office there had written that the Genovese was doing excellent work with the sick, and they hoped to be liberated within fifteen days. A second case was mentioned in Revere: the gentlemen sequestered there were happy to keep a surgeon with a salary of ten \textit{scudi} a month, who would support the sequestered poor and beggars (\textit{mendicanti}), and would also visit and look for infected houses, with the condition that he would be given expenses according to the work carried out.\(^\text{87}\)

\(^{84}\) Cohn, \textit{Cultures}, p. 105.  

\(^{85}\) ASMn., b. 2597, c. 288.  


\(^{87}\) ASMn., b. 2597, c. 175.
Later in 1576 the *Conservatori*’s arguments behind forcing doctors to medicate in particular ways had developed another facet. On 16 October Bardellone commented that he and Senetor Nero were of the opinion that the number of doctors employed at that time was sufficient. Yet, if it was necessary they could force the doctors to medicate the plague stricken, not only for reasons of charity but also:

‘because no one should hesitate in going to their death to protect their homeland, but much more that this they (the doctors) are not exposed to manifest danger of death, as the doctors can defend themselves with their preservatives and good foods, as through experience we have seen in these doctors.’

He reasoned that despite exposition to plague the doctors knew how to defend themselves, but that if any deaths occurred as a result of the trouble (*disordini*) caused by their deeds, then the *Conservatori* would take action. Perhaps the comment on the results of the Mantuan doctors refusal to have close contact with plague stricken and the problems that could result from it was a result of the Paduan doctors’ efforts in Venice. The more confident statement of control over the doctors by the *Conservatori* came after months of establishing a position of authority through ducal backing.

Yet, despite the assertion of authority a conflict about how the doctors medicated patients arose again. Health officers as Palmer states could or at least tried to control and direct this. In Venice Mercuriale and Capodivacca offered to visit and touch patients which was one of their most persuasive

---

88 ASMn., b. 2597, c. 457. *‘come perché ciascuno non deve dubitar d’andare alla morte per conservare la patria, ma tanto più quanto che questo non è esposti a manifesto pericolo della morte, potendo li Medici con le preservativi et cibi buoni defendersi, come per isperienza noi vediamo in questi Medici.’*

89 ASMn., b. 2597, c. 457.
bargaining points in the dispute with the health office. On 9 November Bardellone wrote to suggest that doctor Ragno be sent to the *lazaretto* as a replacement for doctor Conte who was extremely ill. Ragno had been serving the sick in the city, but as they were now few in number he could be let go. The next day it was reported that Conte was dead. What followed was a discussion on how doctors tended to patients in the *lazaretto*:

‘since yesterday we spoke with doctor Ragno because he was going to serve at the *lazaretto* with the condition that he enter to see and take the pulse of the sick. We believe this to be necessary for the health of the people.’

However, Ragno challenged them saying he would rather be banished and lose what he had than do so. He made the excuse that now the sick were not in the *casotti* where they were separated into one or two at the most, but were all in one place that had a stench. Ragno tried to convince them that this kind of disease could be equally well cared for by a physician (*fisico*) looking at the urine, and finding out from the surgeons, barbers and the assistants the *accidenti* of the sick. After a long discussion on the subject the majority decided to send one of the doctors (presumably the four in the city) each week as had been done initially, but without forcing them to go inside where the sick were, adding that if more deaths occurred than usual this allowance would stop. Ten days later on 17 November Bardellone reported recent discussions

---


91 ASMn., b. 2597, c. 509.

92 ASMn., b. 2597, c. 522. ‘Noi havemmo sin hieri parlato al Medico Ragno, perché havesse d’andare a servire al lazaretto, et con conditione che entrasse dentro a veddere, et toccare li polsi degli infermi,stimando noi cosi esser necessario per salute delle persone.’

93 ASMn., b. 2597, c. 522.

94 ASMn., b. 2597, c. 522.
and disputes about what the doctors would do and how they would medicate in the *lazaretto* that again involved members of the College.⁹⁵

Relationships between the *Conservatori* and doctors fluctuated with the epidemic. Stevens Crawshaw argues that in Venice the ‘occupational labels were applied to medical practitioners loosely: those undertaking the role of health office doctor were referred to as *medico*, *physico* and *cirurgo* interchangeably.⁹⁶

In contrast, the role of medical personnel was more strictly demarcated in Mantua, and in particular members of the College of Doctors made this difference clear in discussions on how they would treat the sick. As Palmer argued the health office was able to direct patient care to a degree not seen in the previous plagues. However, the *Conservatori* did not have a clear authority over the medical professions, as was evident in their dealings with the College of Doctors where Ducal intervention was essential.

**Cleansing and Quarantine**

Medicinal cures were one facet of the panoply of measures sought by health officials, which involved relatively a small, targeted and specialised group. Other methods adopted and developed by health officials addressed the community more broadly. Cleansing and purging of potential disease conduits developed as concepts of causation lay in forms of personal contact or contact with infected goods. First we will address the issue of purging and cleansing to obviate the spread of disease before examining the development of quarantine in Mantua. Like quarantine cleansing goods had roots in the post-Black Death fourteenth century and methods became more sophisticated and focussed over the course of the plagues discussed here. Consideration was given to the type of

---

⁹⁵ ASMn., b. 2597, c. 540.

material and its potential to carry infection. For example, Kinzelbach has shown that in German towns the periods of time for cleansing goods varied depending on their composition, for instance, ‘blankets, bedding, and clothes had to be aired for a whole year, goods with smooth surfaces that were not packed in covers and bundled with strings were quarantined for two weeks only.’ The following discussion will demonstrate that with the ebb and flow of epidemics there was a reassessment of the need for such actions and will focus on when and how methods of cleaning and purging involving goods, and homes or residences occurred during the epidemics.

The practical side of cleansing the city fell to the health office to organize. It involved the appropriation of buildings or areas usually outside the city where infected goods were taken, and also of identifying and cleansing infected places within the city. In 1463 Carlo Agnelli was concerned with purging the city of disease, but the focus was on removing infected or potentially infected people. Five years later Agnelli was again preoccupied with cleansing and purging, however, he placed greater emphasis on controlling infected goods, both through trade and also goods belonging to infected people. Agnelli made reference to opening windows in infected rooms as strong winds would help clear away infection, and to putting certain goods under water. Again, on 6 July 1468, Agnelli discussed liberating the city from the contagion by removing sources of infection, as he had found an appropriate area where things could be purged in water and also by the sun ‘which shines almost every day’.

Agnelli focussed on cleansing goods by airing them at the site outside the city, or by airing rooms or houses within the city. In 1506 cleansing goods was

---

98 ASMn., b. 2410, c. 249.
99 ASMn., b. 2410, c. 271.
also a concern, but the health officials burned suspected goods more readily, and also used it as punishment for not reporting an illness or not going through the correct channels to report sickness. On 18 May 1506 Calandra wrote to inform the Marchesa that things were going well in the city and referenced the cleaning of houses as an example of the successful running of the health office activities; he used exaggerated language to emphasise the efficiency of the workers stating that they cleaned the houses and purged the goods of the plague infected with ‘marvellous order’ as the officials in charge were most diligent and were extremely careful when making inventories of house contents.100

Not all goods could be cleansed: in particular beds on which plague victims slept, rags and such like were more likely to be burned. In 1506 it seems Alessio in particular took a more militant approach to the application of purging techniques. Calandra reported that on 8 May:

‘because Maestro Alessio, wants to extinguish this illness that every day spreads more and lights up, it is necessary to prohibit trading between one citizen and another. Today he has published a proclamation that no person, under penalty of the gallows, can visit or go for any other reason to anothers home; nor are goods allowed to be transported from one place to another, under penalty of the gallows, in addition burning the guilty person’s house and his goods.’101

The penalty for mixing was three pulls on the rope. Calandra commented that ‘it is a terrible thing to say but it is very necessary’ as the contagion spread so

100 ASMn., b. 2469, c. 218.
101 ASMn., b. 2410, c. 188. ‘Parendo a Maestro Alessio chi a volere smorzare questo male, che ognidi più serpendo e accendendosi, sii necessario prohibire li commerti tra un citadino e l’altro. Ha hoggi fatto publicare una crida, che non sia persona che osi sotto pena de la forca di andare ne per via de visitatione ne per scusa de altra sua facenda ad casa de altri, ne trasportar robba da loco a loco, che oltra la forca se gli brusara la casa e la robba.’
easily and no one knew how to guard themselves from it.\textsuperscript{102} Several days later, Alessio had punished some transgressors. Calandra reported on 19 May:

‘yesterday, to terrorize and as an example to others, Alessio had goods burned in public in two places that, contra the grida passed several days ago, had been secretly carried from a suspected house to another.’\textsuperscript{103}

He went on to say it was unpleasant but necessary.\textsuperscript{104} The reinforcement of the necessity to carry out such unpalatable actions was not mere hyperbole on the part of Calandra. He took a keen interest in the human experience of the epidemic and his descriptions of the events in the plague stricken city are testament to the difficulties health officers faced. Alessio used the exhibition of burning goods in public places as a visible punishment and warning to others. These exhibitions happened in the city itself and so are perhaps further real demonstrations of his belief that the disease was not spread through corrupted air.

By the San Carlo epidemic in 1576, after a hiatus of almost fifty years, the Conservatori questioned people who had experienced previous plagues as well as consulting the medical community to discover the most efficacious remedies. Initially Aliprandi discussed closing and cleansing houses of the poor; places with one room should be closed with the goods inside with the windows open day and night, and the key was to be given to the capo di contrada.\textsuperscript{105} On 12 April Aliprandi sent a letter in response to a request from Duke Guglielmo, explaining

\textsuperscript{102} Ibid.

\textsuperscript{103} ASMn., b. 2469, c. 221. ‘A terrore et exemplo de li altri Maestro Alessio hieri fece brusar in publico in dui loghi alcune robbe che contra la crida di giorni passati erano state occultamente trasportate de una casa suspecta in una altra.’

\textsuperscript{104} ASMn., b. 2469, c. 221.

\textsuperscript{105} ASMn., b. 2598, c. 10.
why after consultation they should not adopt the policy of burning suspected goods and the problems that could occur. First they believed that the merchants would cease making work (ritirati da far lavorare) if there was gossip that suspected goods would be burned and the poor manual workers would suffer, many of whom were already dying of hunger. The Conservatori were already engaged in trying to make provisions for this group and introducing a policy of burning goods would make that task more difficult. Also, some merchants would try to hide their goods, so when health officials thought the disease had disappeared it would return again and as a consequence the poor would remain beggars which would be of great damage to the city. To bolster his argument he also cited Venice as an example as they paid half of the value of any goods burned but this policy failed for the same reasons. Further, burning quantities of goods could cause a great stink which in turn could cause great harm to health. The answer was to be found in the city’s past, through experience. Aliprandi stated that in 1528 goods were purged not burned and the city was returned to health (fu ridotta sana) and goods were free of all contagion. He added, in a somewhat irritated tone that if Duke Guglilemo still decided to burn goods provision would need to be made for a location where it could be done, personnel to cart the goods to the site and to carry out the necessary tasks, and others to ensure goods were not stolen. At that time however, they were too busy and could not attend to it.106

Two days later in another letter Aliprandi wrote that in order to find out how things were done in previous times of plague in the city the Conservatori consulted some old men who remembered the epidemics in 1506 and 1528.107 They said goods were taken to Mapello and purged, while rags (strazze) and other useless materials and things which could not be easily purged, including

106 ASMn., b. 2597, c. 36.
107 ASMn., b. 2597, c. 42. At the end of the letter he gives the names of the four men; Maestro Matheo Bersano, Maestro Giovanni Lantiero, Maestro Francesco Scartozzo and Maestro Piero Jacomo libraro.
material on which plague victims had slept, were burned there.\textsuperscript{108} However, on 10 April Aliprandi had visited Mapello and found it to be in such a bad state that it would not be of any use. An alternative site of San Giovanni bono was proposed, but the friars there resisted, so Aliprandi asked Libramonte if the Duke could write to them to request the use of that area.\textsuperscript{109} Aliprandi also gave the example of Desenzano on Lake Garda, where rags and beds were burned, but away from the town because of the stench (\textit{fettore}). The following day a potential site had been found, near water and for safety was outside of the city and therefore in line with reducing potential sources of infection.\textsuperscript{110} With the idea adopted or agreed it then fell to Aliprandi to organise. Stevens Crawshaw describes examples of such discussions during the plague in 1575-7 when the Venetian Health office ‘requested reports on ways in which the city could be cured.’ She cites four surviving examples from physicians working in the city who included methods to cleanse goods and quarantine periods in their advice.\textsuperscript{111} In Mantua the consultation process involved the medical community, but much store was also put in the experience or memories of its citizens when assessing the most effective preventative measures.

On 18 April two Venetians were employed to clean suspected goods at San Giovanni: one to receive the goods in Mantua and to make an inventory of them, while the other had gone to make necessary preparations at the chosen sight.\textsuperscript{112} On 4 May Bardellone made reference to sending a copy of a \textit{grida} related to the work of the Venetian who had the job of cleaning houses and infected cloths (\textit{panni}).\textsuperscript{113} On May 21 Paolo Bardellone reported that he and some other officials

\begin{flushright}
\textsuperscript{108} ASMn., b. 2598, c. 42.
\textsuperscript{109} ASMn., b. 2598, c. 33.
\textsuperscript{110} ASMn., b. 2598, c. 44.
\textsuperscript{111} Stevens Crawshaw, \textit{Plague Hospitals}, pp. 178-80.
\textsuperscript{112} ASMn., b. 2597, c. 52.
\textsuperscript{113} ASMn., b. 2597, c. 166.
\end{flushright}
made a visit to the area where they purged cloths to see how it was done, adding ‘it seems to us that things are going very well.’ Yet it did not run completely smoothly as five days later on 26 May, it was reported that the Venetian had been imprisoned for being suspected of removing goods from some houses without the intervention of the health office notary, but he justified his case and was released the same day. Stevens Crawshaw describes how goods were dealt with in Venice and points out that companies of cleaners were employed to work in the city. In Mantua it appears only one such team was necessary as it was a smaller area. Perhaps an indication of the success of purgation techniques is that a number of recipes intended for use in these processes were collected at the back of the Capitoli document.

Several months later the question of burning goods arose again. On 7 August Bardellone wrote that at the start of the epidemic the Conservatori had many reasons not to burn the goods of the infected and cited the letter written on the 12 April. The merchants said that issuing the order to burn suspicious goods would provoke them to stop trading as their goods could potentially be burned with those of the infected, and if the merchants stopped providing work then there would be a danger of unrest (pericolo di tumulto). Other possibly great dangers could arise from burning goods with consequences not only for the poor and the merchants but for the rich citizens, many of whom had died of mal contagioso including an Albino, Machetta and a Corsino. All citizens could indeed be ruined as having already suffered through the disruptions caused by the epidemic they could ‘fall into the infirmity’ and as a consequence the pestilence ‘that usually comes from poverty’ would continue for longer. Another reason was because all the old people (i vechi) had said that in the years 1506 and 1528 that was a different kind of plague from the present one, they did not burn goods, except the beds on which many people had died of plague and things of little

---

114 ASMn., b. 2597, c. 203.
115 ASMn., b. 2597, c. 208.
116 Stevens Crawshaw, Plague Hospitals, pp. 209-222.
value. The same was said by the father-in-law (suocero) of the doctor Luchino. Bardellone then continued by providing the additional argument, again through experience, that some towns and castelli had been infected but were now liberated from all disease without burning goods and some were in good condition. This had been achieved in Cersare, Marmirolo and Gazuolo, even though a number of people had died in the houses of gentlemen, such as Signore Guilio Mainoldo and a Cavaglier Piperano.\textsuperscript{117} Therefore to reinforce the case against adopting the practice the Conservatori used a variety of arguments, using evidence from knowledge of past plagues in Mantua, contemporary successes from areas of the contado and further afield, and potential future economic and social consequences for the city based on the concerns of the city’s merchants.

As part of the discussion as to what the old men and others advised, Bardellone commented that the Conservatori deemed it ‘an excellent remedy’ that the suspected, not only the sick, be removed from the city as they had advised earlier in the course of the epidemic. He praised this idea but went on to question just how it could be done as they did not have a place big enough, nor did they have the money to build a new lazaretto.\textsuperscript{118} Bardellone concluded the section of the letter stating that they were all ready to follow what the Duke commanded.\textsuperscript{119}

Towards the end of the epidemic on 27 December 1576 Bardellone wrote at length about plans to re-cleanse the entire city which would be a huge undertaking.\textsuperscript{120} In order to be as vigilant as possible in this enterprise they had

\textsuperscript{117} ASMn., b. 2597, c. 311.

\textsuperscript{118} ASMn., b. 2597, c. 311.

\textsuperscript{119} Ibid.

\textsuperscript{120} ASMn., b. 2597, c. 640.
decided to make the *Capi di Compagnia* go house to house to ascertain all who were sick or had died of *mal contagioso*, as in that season they wanted to purge their goods again. For the good of their own health and so no harm would come to those nearby or to the city, the *Conservatori* did not want people to move themselves or their goods without help from health office operatives and so had arranged to have the order announced by the preachers at the pulpit to ensure people were aware of it. A final reason was that through the fault and negligence of the people many would potentially suffer. They also wrote to the *Castellanze*, as it was necessary to reinforce the *grida* about goods stolen from infected houses, in which they promised to pardon any accomplices and give a reward to those who found the thieves. Bardellone added that these provisions regarding the goods in the city and state would be of little use if they did not also address foreigners; broaching the news that not only in the city of Brescia was there great suspicion of plague, but in Verona, Venice and Milan too. The *Conservatori* had discussed that it would be necessary to publish a *grida* prohibiting bringing merchandise or goods of any kind into the city or state, from those places. People from those areas could not stop or pass through Mantua without giving notice to the *Conservatori* to inform them where they came from (*parte e luogo*) and what kind of *fede di santità* they had; if it was in order then they would be able to pass through freely, but if they did not have a correct *fede di santità* an order could be given to have the goods aired and purged (*sborare e purgare*) in such a way as it would remove any fear or suspicion of contagion. The penalty for contravention was loss of goods and merchandise, and with other arbitrary penalties depending upon the status of the person. The *Conservatori* felt it was not necessary to include a punishment for officers who through their own fault or negligence let those people into the city, as these officers were very diligent and knew of the dangers posed.\(^{121}\) The idea of moving bodies of people out of the city to cleanse or re-cleanse it was articulated elsewhere, though usually by doctors. In Venice David de Pomi suggested the

\(^{121}\) Ibid.
removal of the poor, not just the sick from Santa Croce, to help cure the city, as did the Paduan doctors.\textsuperscript{122}

The following case illustrates many of the practical problems and functions of health office work. It merges an aspect of their work discussed in the previous chapter; knowledge of infected areas when applying regulations to those entering the city. Bardellone began the case with ‘today a small problem happened in two open houses inside Mantua’ caused by goods brought from Brescia. The merchant had a licence (\textit{patente}) stating that he could bring his goods into the city, but there was a problem as he had reached the gate but was not supposed to bring them in without first advising the office, so that they could provide assistance to perfume and cleanse the goods or at least supply an official to accompany the goods to a storage site. The merchant gave his licence to the health official, who without reading it believed it gave permission to allow the goods to be brought in, and that the merchant had a room where the goods would be stored and cleansed. The \textit{Conservatori} had discussed the case among themselves and decided to burn the goods in public as a warning and a sign that everyone had to be vigilant (\textit{star con gli occhi aperti}) about goods coming from Brescia, and also to guard against people bringing goods into the city without a licence issued by them. Despite this, they did not entirely blame the merchant, a Pietro Antonio Corso, who was a man of good character and with five children, and who did not have a lot of goods to sell (\textit{poche merci}). They were moved by compassion and decided that his goods would be sent to San Giovanni Bono where they would be removed for their boxes, cleaned and perfumed; as long as the duke agreed.\textsuperscript{123} This provides another example of the accommodations made within the health office machinery where a number of factors were considered when determining the outcome of a particular problem.

\textsuperscript{122} Cohn, \textit{Cultures}, p. 222. As the area was crowded and airless.

\textsuperscript{123} ASMn., b. 2597, c. 604.
Quarantine was inextricably linked with the cleansing and purging of goods and homes; indeed concepts of quarantine suffused almost all aspects of health office work. Yet, it is difficult to find an adequate description as it had a number of meanings and purposes. In 1958 in *A History of Public Health* George Rosen gave a general description of quarantine as originating with the Black Death. He argued the objective was to prevent plague, protect the community and isolate suspected persons and objects for a specified period under stringent conditions until it was established they were not bearers of plague. He went on to argue:

‘This led to a system of sanitary control to combat contagious diseases, with observation stations, isolation hospitals, and disinfection procedures. This system was adopted and developed during the Renaissance and later periods and is still a part of public health practice today. Although in a more rigorously defined form.’

Rosen cites two well-known examples: the proclamation made by the Duke of Milan Bernabò Visconti in 1374 and Ragusa, where in 1377 authorities ordered a thirty day isolation period for ships coming from plague-stricken areas, which is considered to be the first example of this approach. Rosen’s definition has been followed in a recent article on plague and quarantine in Early Modern England, where Kira Newman stresses the use of home quarantine. She points out that ‘what is lacking in historical writings is a close analysis of how quarantine worked in practice. Only by attempting a detailed analysis of the measures taken can we assess its impact and better understand how it was perceived.’

125 Ibid., pp. 68-9.
127 Ibid., p. 810.
The same is true of Italy and there has been a move towards addressing the lacuna. Carlo Cipolla argued that ‘before the middle of the fifteenth-century, the concepts of quarantine and sanitary cordons were fully developed and as the health boards were created precisely for the containment of the plague, it became their responsibility to apply these ideas.’ Yet the actual mechanisms and details remained obscure. More recently this basic definition has been challenged. Moving to the late sixteenth century, Sandra Cavallo has questioned the efficacy of public health regulations in her analysis of early modern Turin. She defines them as:

‘no more than a framework within which bargaining could take place. One clear example of this is provided by the quarantine rules which, as they were applied in Turin, did not indicate, as one might assume, a strict period of forty days isolation but simply ‘a period of isolation’ whose duration was determined on an ad hoc basis according to the various pressures such as the power relations between the parties concerned and so on.’

Stevens Crawshaw’s monograph on Venetian plague hospitals, which charts the experience of the patient on their journey through the lazaretto, defines the location and experience as quarantine. Among the important points raised in this work she emphasises that ‘early modern quarantine was, for the most part, a collective experience’ and that ties to the locality were maintained and where separation occurred it was between men and women. Crawshaw also comments that a ‘comprehensive study of the nature of quarantine structures remains lacking.’ This is an important issue to address as the Renaissance has been identified as the period when processes of quarantine became more sophisticated and it is perhaps the most fundamental contribution to the

\[\text{\textsuperscript{128}}\text{Cipolla, Public Health, p.28.}\]
\[\text{\textsuperscript{129}}\text{Cavallo, Charity and Power, p. 48.}\]
\[\text{\textsuperscript{130}}\text{Stevens Crawshaw, Plague Hospitals, p. 15 and p. 79.}\]
\[\text{\textsuperscript{131}}\text{Ibid., p. 19.}\]
practice of public health. The remainder of this chapter aims to add to the broader view of concepts of quarantine by examining how varying types of quarantine were applied in Mantua.

First, as has been argued by other historians the duration of quarantine periods was not strictly tied to forty days. Stevens Crawshaw gives the detailed structure of household quarantine in Venice, which could be eight, fourteen, twenty-two or forty days, depending on the duration of contact.\(^{132}\) She has also argued that season could also affect the duration and location of quarantine in Venice, as household quarantine was preferred in winter, and that elsewhere a longer period of forty-five or sixty days was recommended.\(^ {133}\) Henderson describes the Florentine plague orders in 1522, where health officials prevented any Romans entering the city, but allowed native Florentines entry after a period of thirty days quarantine outside the city.\(^ {134}\) The longest period I have found is in a grida from Ferrara which stated that anyone wishing to come to Ferrara must wait fifty days from leaving their home.\(^ {135}\)

Yet, forty days was undoubtedly an important marker point in terms of duration of observation. References to a forty day period of quarantine are interspersed throughout the epidemics discussed here: for instance, on 6 July 1468 Carlo Agnelli wrote about moving infected goods out of the city walls to a place where a Maestro Giovanni, a doctor, the pizzamorti and some brothers were stationed. There were eight casoni at that location where goods would be taken as the people who had been in the casoni had finished their forty days

\(^{132}\) Ibid., pp. 82-3.
\(^{133}\) Ibid., p. 83.
\(^{134}\) Henderson, ‘Epidemics’, p. 177.
\(^{135}\) ASMn., b. 3048, c. 92.
quarantine period.\textsuperscript{136} On 18 August 1468 Carlo Agnelli wrote that the following Sunday would mark forty days since a \textit{Maestro} Giovanni and his five companions had been outside the walls of the city at Mapello, with the goods taken from infected houses.\textsuperscript{137}

Health passes were also tied to maintaining quarantine. For towns in southern Germany Kinzelbach argues that ‘Burghers as well as strangers were allowed to enter the town only if they vowed that they had been avoiding “infected” places for the last two to four weeks: otherwise, they were forced to stay outside the town borders.’\textsuperscript{138} She also highlights variance in the ‘prophylactic quarantine of persons’: those who had not been in contact with disease were prescribed two weeks in ‘healthy air’, and those who had been in contact had to wait for four weeks or more.\textsuperscript{139} The phrase ‘prophylactic quarantine’ is extremely useful in assessing the different actions that may be attributed to quarantine concepts; such as health passes and also the general quarantine of cities. However, presenting a health pass to gain entry to Mantua was not always enforced: for instance, in 1528 officials who at varying points had responsibility for reporting people who came in to Mantua with \textit{fede di sanità}, and those entered without.\textsuperscript{140} By 1576 health passes were a more essential and perhaps detailed necessity. Bardellone wrote about how they should be formulated; the information that the person had been in a healthy place had to come from two witnesses that they had not had contact with anyone with \textit{mal contagioso} for forty days before, and the information would then be checked against the lists of the enclosed houses (\textit{case serrate}).\textsuperscript{141}

\begin{thebibliography}{9}
\bibitem{136} ASMn., b. 2410, c. 271.
\bibitem{137} ASMn., b. 2410, c. 474.
\bibitem{139} Ibid., p. 386.
\bibitem{140} ASMn., b. 2511, cc., 36, 37, 38.
\bibitem{141} ASMn., b. 2597, c. 355.
\end{thebibliography}
Not all requests for *fede* or for travel were accepted. Moro, the Mantuan ambassador in Venice, wrote to Aliprandi to relay a request from a *Maestro Alessio Ruggieri*. Ruggieri wanted to pass through Mantua on route to Acquanegra and required a *fede di sanità* for his wife and family, who numbered ten. It is worth noting that Moro wrote to Aliprandi, the *Collaterale*, about this request suggesting Aliprandi remained in charge of issuing *fede*. However, Bardellone wrote that they had decided to reply that the group could not have a licence to go to Acquanegra, but they would be happy to give permission for them to come to the Mantovano, however, they would have to complete a quarantine period first.\(^\text{142}\)

Thus far one strand of this discussion has been an emphasis on continued movement in plague infected areas. This is also true of what we may consider quarantine. For instance, it has been argued that the idea of a closed city, as presented in the chronicle report by Schivenoglia was incorrect as Carlo Agnelli had flexibility to allow movement in and out of the city. The proclamation reported by Schivenoglia that gave citizens a ten day opportunity to leave the city before the gates were closed was unusual. It was not a preventative measure as the city was already infected. Rather the intention appears to have been to prevent other potential carriers of infection from entering the city and can therefore be ascribed as a form of prophylactic quarantine. If we compare it to the chronicle description of the next plague in 1468, Schivenoglia explicitly stated that a proclamation of this sort was not made, as had been done in times past.\(^\text{142}\) The *Marchese* and his family left the city suddenly, and subsequently the inhabitants followed their example. Both Mantuan chronicles refer to a state of disorder and panic as a result.\(^\text{144}\) Perhaps the ten day period given in 1463 was

\(^{142}\) ASMn., b. 2597, c. 282.

\(^{143}\) *Cronaca di Mantova*, p. 36.

\(^{144}\) *Cronaca di Mantova*, p. 36; *Cronaca universale*, p. 154.
not a successful measure and put too much strain on the other parts of the state. Nevertheless it further breaks down the notion of strict and automatically enforced quarantine, and also suggests that Mantua had more in common with the ad hoc provisions Kristy Bowers has described in Seville than has been allowed for. Again as we have seen a degree of porousness in entering and leaving the city was replicated in subsequent epidemics.

Within the city in 1463 a general quarantine was not followed or strictly applied. For instance, on 2 November 1463 Agnelli wrote that that morning a female servant and a Bonetto da Mozanega, were found to be sick with plague with many signs (signis apparetiibs). According to Agnelli this appeared to be the first illness in that borgo, though it is not clear which one. Agnelli suspected Bonetto had contracted the illness from the Zillotti, as he had admitted that before the borgo was closed and they (the Zillotti) were sick he visited them and mixed with them for a while (un bon pezzo). After Bonetto could have been infected, he had been in contact with most of the borgo, particularly with his brother and with those Agnelli listed at the bottom of the letter. Bonetto was then sent to Mapello as he had ‘many bad signs.’

Quarantine could take place in a number of places, depending on the status of the patient and the prevalence of illness in the area of the city where they were: for instance, as in 1468 when areas, or more accurately parishes were shut off with barriers. A particular area of infection was San Cristopher. Cases of infection in this parish were monitored over a period of months and quarantine periods imposed. An initial case occurred on 8 May 1468 when two children of a fruit and vegetable seller a Margaritta Veronesa died and as a result Agnelli ordered barriers to be put up there quickly. On 9 May Agnelli reported sending a group of three, the Veronesa, her husband and an old

145 ASMn., b. 2398, c. 351.
woman, to Mapello and that as the area was well populated and to avoid scandal as far as possible he would put barriers up in a part that would enclose ten families, forty people in total, for whom he would supply provisions so they would not suffer for anything. Another three families were closed in their homes in the same contrada.\textsuperscript{146}

A subsequent death of one Pietro Antonio di Montrase, a cloth worker, who was close to the Veronesa, was reported on 25 May. Pietro had died suddenly and almost certainly of plague and Agnelli remarked this was seventeen days after the death of the two children. As it occurred behind the barriers, Agnelli reasoned it would not badly affect the rest of the city; however, he was concerned about the damage it could cause to those within the parish, adding that he would make every necessary provision.\textsuperscript{147} Two days later Agnelli reported upon his progress. He had released some families from six casoni outside the city walls between the Cereso and Predella gate, as they had been there for ‘forty days and some other days.’ He then moved six families from San Cristopher to the casoni. One family, that of a widow named Ceruda, was separated from this group as her daughter had died after being moved. Agnelli thought it was a tertiary fever, not plague, but to be on the safe side told the other families to watch over them.\textsuperscript{148} One subsequent death was reported by the 25\textsuperscript{th}, but it is not clear of which month. While on the 27\textsuperscript{th}, presumably of June, six families were to be released from the barriers.\textsuperscript{149} Three days later it was reported that the contagion was confined to the area of San Cristopher. Unfortunately the right hand side of this letter has been ripped; however, in the following line ‘every proper provision to liberate, always through divine grace’ is legible.\textsuperscript{150} Several

\textsuperscript{146} ASMn., b. 2410, c. 235.
\textsuperscript{147} ASMn., b. 2410, c. 261.
\textsuperscript{148} ASMn., b. 2410, c. 262.
\textsuperscript{149} ASMn., b. 2410, c. 439.
\textsuperscript{150} ASMn., b. 2410, c. 444.
months later more households were infected and a quarantine period was extended.

The location where quarantine had to be carried out could also depend upon the weather. For instance, on 3 May 1468 Agnelli remarked on a case reported to him by Albertino di Pavesi. The daughter of Ugnabene dalle Calze had died and a Maestro Marchesino was sent to see the corpse. He declared that the body did not have any definitive signs of plague, but there were certain marks between the head and the throat that were cause for concern, so enclosing the family was recommended. There were fourteen members in total, and Agnelli intended to send them out of the city to a villa, however, because of the height (grosseza) of the water the city was an island and since their house was very comfortable and they would not want for anything they were to be confined ‘for some days and so we will see what happens.’

Cases were assessed on an individual basis, for instance, as it was not clear if the death of a Pollito was due to plague, Agnelli had his son locked (serare inchiodare) in his home with three other people as ‘suspected’ until the cause could be established. On 2 June 1468 Agnelli wrote about a case brought to his attention by the Vicario of Quistello: a messenger named Gabriele had died, though it was not believed to have been plague and Angelli recommended that the people Gabriele had been in contact with be sequestered for twenty days, because in that time it would become clear if they were infected or not.

151 ASMn., b. 2410, c. 211.
152 ASMn., b. 2410, c. 230.
153 ASMn., b. 2410, c. 424.
The exodus of people in October 1463 certainly shaped the type of quarantine applied in the city. As Agnelli pointed out the city was depleted and empty, with the poor left, and therefore it may have been easier to move people to Mapello. Five years later, a mass departure from the city did not occur and this was reflected in the application of quarantine periods; larger areas were the focus of quarantine, and one parish in particular was sequestered. In 1506 the quarantine of areas of the city occurred again, but on a bigger scale; again this was dependent upon the infection within the city and the language used by the health officials certainly suggest that comparatively there were many more plague cases. On 11 April Calandra reported that every day the illness grew such that there was not a contrata that was not touched by it to some degree. The streets around San Marino, the via Orphea, and the area around San Marco were infected ‘on every side’, and from San Sebastiano to Cerese near the wall, there were no healthy houses.\(^{154}\)

The following day Alessio reported that he visited the infected neighbourhoods, adding he consoled those who could get to their windows by assuring them they would not want for anything nor would they be left alone.\(^{155}\) On 13 April Alessio wrote again, using the Hercules and Hydra metaphor to describe the plague; they were being forced to use the remedies of Hercules to extinguish the illness of the Hydra like pestilence because as they cut one head off another seven grew back. He explained his use of the phrase; that day in different places many houses infected with plague were found, deaths and people with the sign of plague such that it put fear (mette spavento) in those who discovered them. The contrata from via Orphea to Santo Marco was so infected that he was forced to bar (sbararla) it from every side. He went on to say they were sending infected and suspected out of the city on two carts and

\(^{154}\) ASMn., b. 2469, c. 84.

\(^{155}\) ASMn., b. 2460, c. 88.
were trying to safeguard the houses and the city with guards also appointed at night.\footnote{ASMn., b. 2469, c. 93.}

The experience of those sequested is more difficult to assess. Alessio claimed to have allayed the fears of those enclosed in some infected contrade. On the other hand being enclosed did not excuse the patients from punishment should they act inappropriately. This happened in a case where Calandra commented on punishments Alessio had meted out:

‘today in the piazza [Alessio] ordered three pulls of the cord to be given to two nude men, who from their window showed the doctors parts that should be hidden. ... saying look at our giandusse and other similar scornful words.’ \footnote{ASMn., b. 2469, c. 312. ‘Maestro Alessio; quale hoggi a facto dar suso la piazza tre tratti de corda per caduno a dui homini nudi, quali da una finestra loro mostrano hoggi ali medici le parte che più si deno nasconder, uno a una foggia l’altro a l’altra dicendo riguardati le nostre giandusse et altre parole simile in vilipendio loro.’}

To maintain order in the city Alessio was not lax in administering punishment. Calandra commented that this was justice as the men had shown no shame in baring themselves to the doctors.\footnote{ASMn., b. 2511, c. 312.}

As a comparative with the tight control and application of quarantine in the city on 7 June Alessio wrote with some incredulity that there had been some suspicion about the state of the borgo of San Giorgio. That day after lunch he went to see what provisions had been made there and found to his great displeasure that all the borgo was infected, such that everyone there was under suspicion as ‘all had been allowed to gather together.’ He wrote that he did the
best he could for the moment and sent four families, all with the sign of plague that he saw with his own eyes, to Mapello. He banned anyone from the borgo from coming to Mantua and no one was allowed to enter or leave the borgo to go elsewhere without a very great need. He wanted to avoid what he described as the fires of the disease growing in the borgo which had been governed badly.  

Again, there is scant evidence for the plague years 1527 and 1528. On 19 September 1527 Antonio da Gatiro reported among other events that a brother of the Monastery of Santa Maria delle Grazie had died of plague. As a result, and on the advice of Alessio, he had the remainder of the brothers closed in the monastery. This proved to be a confusing case with the initial plague diagnosis overturned by the doctor from Mapello.

The official declaration of the San Carlo epidemic was presaged by the rising death toll in the city and also by a quarantine period for a part of the city. On 2 March Aliprandi wrote that the previous day he had given orders that a place known as ‘la cortazza’ was closed with all the inhabitants inside, because in the current suspicious times it was a very dangerous area. That day the Conservatori confirmed that some of the inhabitants had left and had gone freely around the city. After the official declaration of plague within the city, homes had to be sequestered then cleaned, as did the streets. In contrast to the earlier epidemics it appears that the Conservatori began applying broad quarantine to areas of the city almost immediately after the crisis point in late March. On 16 May two quarters of the city were released from a general

159 ASMn., b. 2511, c. 283.
160 ASMn., b. 2509, c. 343.
161 ASMn., b. 2598, c. 7.
quarantine\textsuperscript{162} and more areas were released several days later.\textsuperscript{163} Between 6 June and 16 June sixty-four houses were liberated and thirty-eight were closed.\textsuperscript{164}

The sequestering of people in their homes in the city was also employed, though with varying results. Aliprandi suggested somewhat tentatively and with much use of the subjunctive that as the doctors had visited a Rossino Solfero and reported that he was very suspect it would be best to send him to the lazaretto. They also decided that the other inhabitants would be sequestered for at least ten days to see how things went (\textit{per veder il successo}), though they left the final decision to the Duke.\textsuperscript{165} On 10 September Bardellone gave an indication as to the grounds for sequestering people in their home. He said that when anyone died within four days it was judged to be suspicious, and therefore they would be sequestered in the house for ‘some days’, to see if any other cases of illness occurred, but if it did not then it was not mentioned in the list of deaths.\textsuperscript{166}

Areas of the city were identified as being of particular concern. On 10 September Bardellone reported that in the \textit{Cinque Regiole} sixteen houses were closed, five of which were closed on that day. The \textit{Conservatori} believed that ‘so much evil’ (\textit{tanto male proceda dale bettole}) came from the taverns in that area: there were three there, two of which paid their dues or twelve \textit{quattrini} each a month, while the third only paid three or four. However, despite the potential dangers posed by those taverns located in an area with numerous quarantined homes, the \textit{Conservatori} argued that they were reluctant to close

\textsuperscript{162} ASMn., b. 2597, c. 182.

\textsuperscript{163} ASMn., b. 2597, c. 185.

\textsuperscript{164} ASMn., b. 2597, c. 248.

\textsuperscript{165} ASMn., b. 2598, c. 39.

\textsuperscript{166} ASMn., b. 2597, c. 103.
those places as they believed the same innkeepers would set up elsewhere in the city, and then would not give money to the Camera.\(^{167}\)

Household quarantine was not limited to the less salubrious areas of the city. On 26 October Bardellone wrote that in the home of a Signore Cavagliere Cattaneo, as soon as a young woman (damigella) fell ill, she was closed in the front part of the house with a woman to serve her. Likewise in the house of a Maestro Ludovico Novolone a woman was closed in a part of the house as soon as she became sick. In this example the residents of the household followed the prescribed orders before health officials could intervene as he added that the information had been given to the Conservatori.\(^{168}\) As the epidemic waned monitoring and quarantine continued but with a greater degree of flexibility. On 11 December a certain Paolo, son of Maestro Stefano Ogliaro, was ill with fever and a buboe in the San Giacomo area of the city. Bardellone wrote that out of respect for the neighbours the Conservatori did not want to include the house on the list of the case serrate, but that nevertheless they had quickly closed it and sent the sick man out of the city together with his mother and their goods. Within a few days they also intended to send the father out, who was trying to find a house out of the city.\(^{169}\) The place of quarantine could vary depending upon the person as well as their physical location. The Conservatori wrote of their intention to sequester a criminal named Andrea Gandino of Capriana. After a discussion on where this could take place securely, they suggested the prison at the borgo di porto, where he could be put on his own for the forty days. If in that time he was found to have mal contagioso he would be taken to the lazaretto and the prison would be fumigated.\(^{170}\)

\(^{167}\) ASMn., b. 2597, c. 103.

\(^{168}\) ASMn., b. 2597, c. 484.

\(^{169}\) ASMn., b. 2597, c. 604.

\(^{170}\) ASMn., b. 2597, c. 303.
As in 1506 there are indications that household quarantine was not always successfully carried out. On 20 August 1576 Bardellone reported the following case:

‘Yesterday a Francesco Zuchello, a hat maker, who was closed in his home because of being suspected of having *mal contagioso*, was found outside in the street. With all loving words Medico Ragno advised him to return inside. He insolently replied that he would stay where he was as Ragno did not have authority, and swearing other offensive words against him.’ 171

As this had been reported to the *Conservatori* they sent officers to examine the other sequestered people who witnessed the incident. The health office notary also found the said Francesco outside in the street, therefore in order to make an example to others that morning Francesco had been given two pulls on the rope in public. 172

**Conclusion**

Health officers had the task of identifying how plague spread and then producing effective remedies to cure and prevent further diffusion. In the course of the sixteenth century such discussions became more sophisticated and detailed, and involved a cross section of the community. In 1506 and 1576 health officers were reliant upon citizens with experience of plague as well as doctors, though again experience of the disease was held to be more important than simply belonging to a particular profession. The two principal modes of diffusion

---

171 ASMn., b. 2597, c. 332. ‘Hier un Francesco Zuchello garzator da berrete ch’era serrato in casa per sospetto di mal contagioso fu trovato fuori dell’uscio suo in strada, et con tutto che amorevolmente fosse avertito dal Medico Ragno a ritirarsi, insolentemente rispose di volervi star et che esso Ragno non gli haveva da comandare con altre parole ingiuriose.’

172 ASMn., b. 2597, c. 332.
were contact with the infected or with infected goods, and the poor who were identified as a potential threat due to their susceptibility to succumb to illness through a lower quality of living, principally inadequate accommodation and sustenance. These links were of course commonly held beliefs or observations across Italy. What is interesting from a Mantuan perspective is how resolutions to these problems were found.

Without a permanent health board with authority over or immediate access to poor relief Mantuan health officials were forced to co-opt existing resources within the city. For Carlo Agnelli this proved to be difficult as he observed the rich left the city, which led him to appeal to religious sources for charity. Subsequent health officers also pressed the Church for aid for the poor but were also able to access more lay contributions including confraternities. This feeds directly into the developing facets of public health, as by 1576 the Conservatori would couch their requests in terms of protecting and nurturing the city. The idea of the pre-eminent place of the city and the need to protect it was evident in the earlier plagues discussed but reached new heights in 1576. Perhaps because there was not a permanent health board with immediate access to or authority over sources of charity in Mantua, the urgency in persuading various bodies to contribute necessitated using more forceful terms to achieve that aim. Another manifestation of this was the discussions involving the College of Doctors about the supply of doctors as well as their methods of treatment. We have seen how the Conservatori developed their arguments in the course of the 1576 epidemic to connect medical service with duty to the patria. Not only were the Conservatori engaged in a conflict with the doctors to determine treatment strategies, they were also involved in sourcing and testing medicinal cures which was another respect where 1576 marked a significant change. The Conservatori negotiated and in some instances coerced the doctors to participate in trials, which led to a rejection of foreign remedies and a particularly scathing assessment of the secret sold by the Venetian lazaretto. Health officers also worked on a broader basis to cure the city and state.
Cleansing the city took many forms, from the small scale airing of infected rooms described by Agnelli to the attempts to cleanse infected homes and areas of the city in 1576, and even to re-cleanse sites of previous infection to make doubly sure the disease had been eradicated. Again a shift occurred in 1576 when due to more advanced, intricate cleansing techniques, and a confidence in their success; goods could be brought into the city, rather than simply removed as Agnelli had done with the nests of plague he sought to eradicate. Burning infected goods was always an option available to health officials, but it was one that was used with circumspection. The cases discussed above where Alessio used burning goods within the city as both punishment and example were, it would appear, a slight anomaly. In 1576 discussions about using this practice led the Conservatori to argue and reiterate the many variant problems that could arise, that were firmly rooted in the broader public health concerns, and principally with the damage such actions could cause to the poor.

Quarantine was a fundamental measure used during all plague epidemics in a variety of forms. It could be carried out in a number of areas; sequestration within a home in the city or in the countryside, in the lazaretto or in one of the temporary huts again in the contado and was applicable to people or goods. It could also be for varying periods of time from the eleven days specified for home sequestration, the forty day period at the lazaretto or by an arbitrary time set by health officials. It also served a number of purposes, including a pre-requisite to enter the city or at least written evidence thereof, a self-imposed enclosure after contact with a sick person, or as a recovery period after the lazaretto. Again it was not always passively accepted or carried out by the plague stricken, though in cases where it was broken corporal punishments were applied and it would appear without any recourse to provide a different form of penance as was possible with other offences. This chapter has focussed on cures and remedies as applied in the city and wider state. We now turn to examine
what can be considered the crucible of remedies for the plague stricken, the *lazaretto*.
6. *Lazaretti*: place and function

*Lazaretti* or plague hospitals were a central component in the corpus of counter-plague measures employed in the Italian peninsula and beyond. Ann Carmichael argued that in the years 1450-70 many northern Italian cities decided that the *lazaretto* was ‘the best solution to the problem of plague.’¹ It was effectively ‘an emunctory to drain the putrefactive plague stricken away from the heart of the city.’² Removing the sick from within a city was just one function of the *lazaretto*. Despite their importance in the fight against plague *lazaretti* are another understudied area of early modern public health. It is a lacuna that can be partially explained by the temporary nature of many plague hospitals which makes analysis difficult. As Jane Stevens Crawshaw argues, these temporary sites ‘left little trace in archival material or cityscapes’, while ‘some permanent sites primarily consisted of open space for the disinfection of goods and have been thought to be, therefore, of little historical interest.’³

Venetian *lazaretti* are the best studied of the Italian plague hospitals. Venice can lay claim to Europe’s first permanent *lazaretto*, facilitated and shaped by the unique geography of the city. Stevens Crawshaw argues that the founding legislation for the Venetian *lazaretto vecchio* was ‘a direct reaction to the early health policies of Milan and Ragusa.’⁴ On 28 August 1423 the Senate issued a decree for a building of at least twenty rooms on the Lido or ‘elsewhere near the city’ with costs borne by the *Magistrato al Sal* and augmented by income from donations and bequests.⁵ The measure proved to be very successful

³ Stevens Crawshaw, *Plague Hospitals*, p. 4
⁴ Ibid., p. 19.
⁵ Palmer, ‘Control of Venice’, p. 183.
as on 18 July 1468 a decree was issued regarding the need for another form of lazaretto. It stated that the Nazareth;

‘has been and is of extraordinary assistance in preserving this city from the plague; but it cannot be wholly effective because those who leave the Nazareth after being cured return immediately to Venice and infect and corrupt those persons with whom they associate. Measures must be taken to set matters right.’

To resolve this problem provision was made for another hospital to be used as a quarantine area. After forty days at the new hospital on the Vigna Murta the patient could return to Venice. Suspected or quarantined families were also to be sent there. In her recent monograph Stevens Crawshaw has shed fresh light upon the running of the Venetian plague hospitals and their role in the broader public health system. In describing the Venetian influence as innovators of the lazaretto she argues:

‘the Venetian hospitals did not serve as architectural models for lazaretti elsewhere- they were not purpose built and lacked a clear overall design. Nevertheless the system of public health for the plague, firmly rooted in the social, environmental, economic and political structures of an individual city, proved to be influential across the centuries.’

Nonetheless even with a lazaretto that left behind abundant archival evidence as Venice it is still not possible to create a complete picture. As Stevens Crawshaw argues:

6 Venice: a documentary history, p. 115.
7 Ibid., p. 115.
8 Palmer, ‘Control of Plague’, p. 190.
9 Stevens Crawshaw, Plague Hospitals, p. 37.
‘Although food is generally considered in relation to the physical health of the body, it was recognised to affect the health of the soul but only hints can be extracted from the records of the lazaretti regarding the seasonality of food and the place of food as a religious as well as bodily treatment.’\(^\text{10}\)

The following examples demonstrate that the reasons behind the organisation and implementation of lazaretti of various kinds depended upon a combination of local concerns, the incidence of plague epidemics, secondary victims including the poor, and political or governmental stimuli.

In the late fifteenth century, Milan took steps towards building a permanent lazaretto. From the plague of 1451 a building near Cusago, which during the Ambrosian Republic had been used to shelter the poor, was adapted for use as a lazaretto.\(^\text{11}\) The location proved to be problematic as it was approximately six miles from the city. Many of the patients did not survive the journey and died on the boats while being transported.\(^\text{12}\) The monastery of San Gregorio was used during epidemics in the late fifteenth and early sixteenth centuries, in conjunction with temporary huts when necessary.\(^\text{13}\) A bequest to the Ospedale Maggiore for a permanent lazaretto in 1468 eventually led to the construction of a dual purpose lazaretto complex comprising of a square central courtyard, separate areas for the sick, convalescents, and staff and 280

\(^{\text{10}}\) Ibid., p. 138.

\(^{\text{11}}\) C. Decio, *La peste in Milano nell’anno 1451 e il primo lazaretto a Cusago* (Milano, 1900), p. 21.

\(^{\text{12}}\) Ibid., pp. 23-4.

adjoining rooms each with a toilet, bed and fireplace.\textsuperscript{14} During the plague of 1630 it accommodated around 16210 patients.\textsuperscript{15}

Further south in Florence, as John Henderson has argued, the plan to build a \textit{lazaretto} was in part down to aesthetic considerations as well as the fulfilment of a charitable function. Yet construction was hindered by delays, and Medicean interest ‘was only rekindled when a new wave of \textit{ peste} attacked the city.’\textsuperscript{16} Henderson describes it as a ‘long and rather tortuous history of the setting up of a \textit{lazaretto}’ that in contrast to Milan and Venice was much smaller in scope from the outset. In the late \textit{quattrocento} hospitals within the city had to accommodate plague victims during epidemics which led to the growing recognition of the necessity to separate the plague stricken from other patients. Yet it was not until the 1520’s that adequate provision was made for isolation hospitals and the running of the \textit{lazaretti} was allocated to the fraternity of the Misericordia.\textsuperscript{17} Later in the sixteenth century in Palermo, the impetus for a specific \textit{lazaretto} building, called the \textit{ cubba}, was the product of the work of a doctor Ingrassia during the epidemic of 1576.\textsuperscript{18} Ingrassia’s plague tract details the number of rooms, how patients would be separated during their stay, the medical and aesthetic considerations such as a garden and the religious and charitable facets of the complex.\textsuperscript{19}

\begin{thebibliography}{9}
\bibitem{footnote14} Albini, \textit{Guerra}, p. 81.

\bibitem{footnote15} Palmer, ‘Control of Plague’, pp. 192-3.

\bibitem{footnote16} Henderson, ‘Epidemics in Renaissance Florence’, pp. 172-4; Henderson argues that despite funds being made available for a \textit{lazaretto} work did not begin until 1479 and opened in 1494.


\bibitem{footnote18} Cohn, \textit{ Cultures}, pp.21-2 and p. 88.

\bibitem{footnote19} Ibid., p. 83.
\end{thebibliography}
According to information in the *Cronaca di Mantova* Carmichael has suggested that following a pronouncement made in 1450 a *lazaretto* was operational in Mantua from 1464.\(^{20}\) However, this refers to the merging of neighbourhood hospitals to form the centralised hospital of San Leonardo within the city.\(^{21}\) Following the Papal diet held at Mantua in 1459 a surge in urban renovation took place with the rebuilding of the older medieval town. As Paul Hare has recently argued, Ludovico Gonzaga (1444-78) was committed to a programme of public building improvements, involving not only renowned artist Andrea Mantegna, but also Leon Battista Alberti who, over a period of years, planned the church dedicated to the plague saint San Sebastiano.\(^{22}\) Despite this period of urban renovation coinciding with a movement to build or at least a commitment to build permanent *lazaretti* elsewhere in northern Italy, no evidence has emerged as yet to suggest that the Mantovani considered such a project.

The lack of a permanent *lazaretto* does not undermine the role the temporary plague hospitals played during epidemics. As we have seen, testimony to the importance and centrality of the *lazaretto* to the overall public health against plague strategy in 1576 is shown by the *Capitoli*: one third of the document concerned its organisation and provision. The Mantovani used a combination of what Crawshaw describes as ‘the third-class response’ which was requisitioning buildings on a temporary basis or constructing temporary wooden structures, and the ‘second-class’ response where cities ‘constructed permanent buildings which were used only during epidemics within cities.’\(^{23}\) This chapter will explore the place and function of *lazaretti* in Mantua. We begin with an

\(^{20}\) Carmichael, ‘Plague Legislation’, pp. 519-520.

\(^{21}\) Ibid., p. 520. Stevens Crawshaw highlights inaccuracies in this table for Venetian foundations, Crawshaw, *Plague Hospitals*, p. 21, fn. 90.

\(^{22}\) See Hare, ‘The Literary Patronage’, pp. 65-84, for a discussion on Ludovico Gonzaga’s architectural patronage and program of building improvements in Mantua.

examination of the use of the term *lazaretto* to describe plague hospitals before moving to consider the buildings and attendant problems with those structures. Finally we examine their place within the broader public health strategy to combat plague.

It should be noted that the word *lazaretto* is used very infrequently, if at all, in the Mantuan health office correspondence until the late sixteenth century. Referring to plague hospitals by the name of the institution appropriated for the purpose or indeed by the function of the site was not unusual.24 In the later fifteenth century, as in Florence, smaller hospitals in the city received plague patients and subsequently other patients became infected. On 19 October 1463 in the early stages of the epidemic Carlo Agnelli reported that in the hospital of San Antonio the wife of the man in charge of the hospital died with a swelling at her throat, and her son had been sick for four days but with no other plague signs. Agnelli had the hospital closed and sent someone to look at the bodies.25 On 25 October 1463 Agnelli reported a number of other suspicious deaths near another two hospitals, San Michele and Santa Maria della Cornetta.26 He concluded by stating that he believed in previous plague periods *(mal tempi) casoni* were used.27 Thereafter Agnelli referred to generic *casoni* near the city and *casoni alla campagna* in the *contado*, which were temporary tents or structures used to house the sick. He also made use of more specific buildings or places; namely the Maddalena, in the city, and most frequently of all Mapello. During the plagues in the early sixteenth century, in 1506 and 1527-8, again *casoni*, the Maddalena and Mapello, were all used, but, as we shall see, an attempt was made to centralise the plague sick in one area.

24 For instance, see Cohn and Alfani, ‘Households and Plague’, pp. 196-7. In Milan temporary plague huts were referred to as ‘*locus montanee*’ in 1452 and as ‘*in loco sanitatis*’ in 1503.
25 ASMn., b. 2398, c. 358.
27 ASMn., b. 2398, c. 329.
In 1575-7 when the Conservatori used the term lazaretto it was open to interpretation. For instance, in a letter on 18 October 1576 Bardellone, head of the Conservatori, discussed the lazaretto of San Marco established earlier that year on 19 May. The purpose of this lazaretto was to house orphans. Bardellone wrote that in many houses where the poor had perished from plague, small healthy children (figlioli piccioi sani) were left without a father or mother and would suffer if sent away, and would die if not looked after. To resolve the problem the Conservatori decided to rent the Palazzo del San Decano in the city for twenty-eight soldi d’oro with the first six months paid for by the secret Confraternity of San Marco.²⁸ All male and female children under thirteen years of age would be sent there under the custody of healthy women. In October there were thirty-four children resident and Bardellone added that, ‘thank God’, only one woman had died of suspicion.²⁹ Later that year on 8 December, nearing the end of the epidemic, Bardellone discussed plans to cleanse the city. As part of this process the lazaretto of San Marco would be cleansed and if any cases of illness were found they would be sent to San Pietro.³⁰ Therefore, in Mantua the term lazaretto was fairly elastic. It could be a temporary place of care for plague victims or for suspected plague contacts, but was not necessarily limited to either. By the 1574-7, in Mantua at least, the meaning and use of the term was more explicitly linked to a charitable function. As we will see, lay charitable contributions, particularly by confraternities, were one of the major changes in response to this epidemic.

²⁸ The confraternity is described as ‘the secret confraternity of San Marco’ in the letter, but the text gives no indication why it is referred to as ‘secret’. It is not mentioned in a list of the city’s confraternities given in Vigilio, La insalata, pp. 69-70.

²⁹ ASMn., b. 2597, c. 457.

³⁰ ASMn., b. 2597, c. 595.
Without question Mapello was the most frequently cited place where the sick and infected goods were taken in the late fifteenth and the early sixteenth centuries. Most references to Mapello describe who was sent there or the number of resident patients to indicate the level of infection in the city and wider state. As demonstrated in the previous chapters during each epidemic, until 1576 health officers sent individuals, families or other connected groups to Mapello. For instance, during the epidemic in 1463 Carlo Agnelli identified a family as having plague near the borgo of San Giorgio. On 1 November a child of a Bartholomeo had died and his wife was ill. Agnelli believed the cause of death was plague and reported he would inform those nearby.\textsuperscript{31} Two days later Bartholomeo’s wife died and others were ill.\textsuperscript{32} Bartholomeo succumbed to the plague on 14 November, and Agnelli sent pizzamorti to bury him and ordered that one of his male servants, who had the sign of plague, and another female servant, who until that point was not sick, be sent to Mapello, along with their goods.\textsuperscript{33} The following week on 9 November Agnelli wrote that those suspected outside the city, including at Mapello and the borgo of San Giorgio was around 300.\textsuperscript{34}

It is possible to glean some information on the daily running of Mapello. As it was a temporary site, only used during epidemics, the Collateral not only had to move patients there, but had to provide all necessary provisions, including appointing staff, at times when the city was in crisis. On 1 November 1463, almost two weeks after the exodus of people from the city and the supposed closure of its gates, Agnelli reported that a Jacomo Muletto would be employed to ‘provide what was necessary as ordered’ and that none of the inmates would lack wine, meat, chicken, cheese, or oil. In the previous days Jacomo had

\begin{footnotes}
\item[31] ASMn., b. 2398, c. 347.
\item[32] ASMn., b. 2398, c. 353.
\item[33] ASMn., b. 2398, c. 380.
\item[34] ASMn., b. 2398, c. 359.
\end{footnotes}
already sent a large quantity of flour to make bread.\textsuperscript{35} The following day Agnelli added a post-script to a letter requesting permission from the Marchese to give Jacomo strict orders to build casoni if the need arose.\textsuperscript{36} It is not clear if Jacomo was to be confined to Mapello, or was simply employed to send victuals there, but it suggests he had freedom of movement not afforded to plague hospital staff in subsequent periods. On 2 November in addition to the note detailing those he sent to Mapello, Agnelli reported that a Father Pietro from San Zeno would be given ten fiorini a month to say Mass at Mapello and ‘to do every other thing’ as requested by them (\textit{a pari suoi}), presumably referring to the patients.\textsuperscript{37}

In 1468 organising and supplying Mapello proved to be more problematic. In a long missive on 19 April 1468 Agnelli provided greater detail about his search for workers and his frustrations. Jacomo Muletto was again charged with supplying Mapello and the casoni with bread, wine, meat, oil, salt and cheese as he had done in the previous plague, but Agnelli stated that he could not find a doctor and barber to agree to go to Mapello for the salaries offered. He had heard of a doctor in Modena who was ‘an expert in similar things.’ The Modenese doctor’s nephew was then in Mantua and Angelli hoped to make contact through him. Similarly, Agnelli could not find anyone to become Mapello’s chaplain causing him to lament that Mantua’s religiosi possessed so little charity that no one would accept the job.\textsuperscript{38}

Yet the shortage of personnel was soon resolved. The following day on 20 April 1463 Agnelli sent two letters giving details about a brother from San Augustino and his companion who agreed to go Mapello to care for the souls,

\textsuperscript{35} ASMn., b. 2398, c. 348.

\textsuperscript{36} ASMn., b. 2398, c. 352.

\textsuperscript{37} ASMn., b. 2398, c. 355.

\textsuperscript{38} ASMn., b. 2410, c. 194.
celebrate Mass and to do anything else that was required. Through Francesco Gonzaga’s confessor, Agnelli also found a brother from San Domenico and his companion willing to administer to the sick at Mapello, both of whom would leave the following day. A boat had also been secured to transport goods there. By 6 May Agnelli reported that many disagreements had arisen among the doctors at Mapello. He sent Roberto, his notary, to give them orders, and sent a copy of them to the Marchese. It is not clear what the disputes concerned, but in a short time Agnelli had found more than one doctor to attend to patients at Mapello. Soon thereafter, on 16 May, Agnelli remarked that he had sent those sick in the casoni near Marmirolo, north of the city, to Mapello, so that the sick were not scattered in so many places. During these epidemics it is difficult to gauge how long people stayed at Mapello for, or whether they carried out a period of quarantine after completing their time there.

In 1506 Mapello’s doors opened once more for the plague sick. Alessio wrote on 21 April 1506 that to avoid a great mortality the health officers had decided to move everyone from behind the city walls to Mapello where a great number of casoni were being built. However, the motivation was not only to protect the city by removing the sick. Once taken to Mapello the patients would be under the care of a doctor who could begin to apply all the necessary remedies. On 26 April 1506 Scalona wrote they were sending as many as possible out of the city to Mapello because the doctor Fiorentino did not simply look after the patients with extreme diligence, but ‘works miracles.’

_________________________

39 ASMn., b. 2410, c. 197 and c. 198.
40 ASMn., b. 2410, c. 231.
41 ASMn., b. 2410, c. 232.
42 ASMn., b. 2410, c. 245.
43 ASMn., b. 2469, c. 126.
44 ASMn., b. 2469, c. 143.
The plans to and practicalities of transporting all the sick to Mapello continued to occupy the health officials. On 4 May 1506 Calandra wrote that they were waiting to send the infected people in the Maddalena and in the casoni beside the walls there. He claimed that the other places were not healthy (mal sani) because they were in the path of the midday sun. Calandra went on to report that Alessio and Scalona had gone to Mapello to discuss where they would put those who had recovered, which was not an easy problem to solve. At that time, the convalescents were being kept on a boat near Mapello and, until that point, maintaining them there had incurred a great expense. Yet, to reintroduce the convalescents back in to the terra would be against the health officers plans to empty the city, and furthermore they had to ensure the homes and goods of those sent to Mapello had been cleaned. The health office could not send them to another part of the state as there was the possibility of reinfection. He concluded that perhaps they would have to remain at Mapello.

The Mantuans did not create a recovery area like the Lazaretto Nuovo in Venice. This was perhaps because the lazaretto area was a temporary site and the Mantuans did not have the resources.

By 10 May the people running Mapello reported more than 800 plague afflicted were resident, notwithstanding every day more arrived. On the same day Scalona also referred to Mapello and the volume of patients. He said because of the great number of people ‘one can no longer call it a hospital but a city’ and it was horrible to see. Yet the health officials continued to move the

45 ASMn., b. 2469, c. 181. Three days later on 7 May Calandra mentioned that three boats had taken people from Maddalena to Mapello, ASMn., b. 2469, c. 184.
46 ASMn., b. 2469, c. 181.
47 ASMn., b. 2469, c. 195.
48 ASMn., b. 2469, c. 192. ‘Horamai Mapello non si puo chiamare hospitale ma cittad perché tanto numero se che manda che è una cosa horribile.’
plague stricken there. On 12 May Calandra reported that twenty infected families had been sent to Mapello. The *Collaterale* had said he wanted to empty the Maddalena of the 140 infected people there ‘with the mind not to reopen it, and to do nothing else but send all those found daily (with the disease) to Mapello.’ Five days later on 17 May Scalona wrote that the number of people exposed at Mapello could be around 900. On 23 May Scalona reported on the logistics of sending people to Mapello, stating that they were continuing to transport the sick and that twenty workers were currently building *casoni*, but they were having problems finding the carts necessary for bringing the building materials. He blamed the *contadini* and local officials for refusing to follow his orders.

The supply and quality of personnel at Mapello was a recurrent problem. On 22 May Alessio wrote that Scalona had visited the site and relayed the need to find a good doctor (*uno bono medico*) ‘because that new Pavese does not know what he is doing’ and ‘was so fearful that he could not care for the patients, such that all those in his care were in desperate fear for their health, as they would not be cured with good words and deeds.’

---

49 ASMn., b. 2469, c. 201. ‘Il Collaterale ha dicto di voler far votar dimane Santa Madalena dove sono anchora cento e quaranta persone infecte, con animo de non la riepmir piú et di non attender ad altro che a mandar a Mapello tutti quelli che di giorno in giorno si scoprirano in la terra.’

50 ASMn., b. 2469, c. 215.

51 ASMn., b. 2469, c. 239.

52 ASMn., b. 2469, c. 235. ‘Maestro Jo Carlo quale é stato oggi a Mapello me ha ditto bisogniar de ritrovar uno bono medico perché quello novo pavese non scia che si facia et é tanto spavento ch’il non sa a medicare talmente che tutti quelli ch sonno dal canto suo sono desparati temendo de la loro salute per non esser curati pur con bone parole e fatti’
The following day Scalona made a report of the visit stating they had discovered many disturbances and was more scathing in his criticism of the doctor from Pavia. He asserted that the new doctor sent by the Marchese, was inept and did as little as he possibly could. In contrast, the Fiorentino was praised: since 10 March only 102 had died under his guard, and in comparison with the Pavese, the Fiorentino was not only very good at his job, but he acted charitably towards his patients (gli infermi suoi). Scalona decided to visit Mapello twice a week to make sure everything possible was being done for those patients.

The rise and fall in numbers at Mapello was used as an indication of the severity of the epidemic. Later that summer on 25 June Scalona wrote that he had visited Mapello that morning and found things were going well. There had only been a small number of deaths in the previous few days and only one person had died on that day. He thought that of the eighty or so people there no more than twenty might die. Scalona concluded with praise for the doctor Fiorentino who used such a cure that one could hope for a full return to good health. It is possible that Fiorentino had in fact survived plague himself. On 18 April 1506 Calandra wrote that ‘one of the doctors of the plague stricken, Fiorentino who is at Mapello is touched by two signs.’ Latterly, when the numbers of sick at Mapello had fallen, Fiorentino offered to visit the sick in the city too.

Perhaps as a result of the disturbances and the volume of people sent to Mapello an unusual though logical step was taken. On 30 June Calandra wrote a

53 ASMi., b. 2469, c. 243.
54 ASMi., b. 2469, c. 243.
55 ASMi., b. 2469, c. 308. What this specific ‘cure’ was is not made clear.
56 ASMi., b. 2469, c. 117. ‘Uno de li medici de li appestati Fiorentino quale sta a Mappello è tocco da dui segni.’
57 ASMi., b. 2469, c. 373.
grida had been proclaimed at Mapello notifying everyone that obedience and reverence should be given to the new Podestà who had the power to punish all bad deeds. More importantly, he also had the authority to postpone ill-timed weddings until a more adequate time and place, and no testament could be drawn up without his knowledge and approval, because health officials were aware of the many evils caused by false wills. As we have seen, Calandra reported on a wedding at Mapello on 26 April, and that it had inspired others to follow suit, however, unfortunately the problems relating to false wills remain obscure. This supports Stevens Crawshaw who cites the example of a wedding that occurred in the lazaretto nuovo in 1528, evidenced by a will and testament, as confirmation of the ‘events of daily life’ that occurred in the lazaretto such as marriages and births. In a recent article Newman also argues that such daily events took place in the pest houses in seventeenth century London.

During the epidemic in 1527 and 1528 the situation at Mapello is more difficult to discern. On 24 September 1527 Antonio Gatiro made reference to the next release of convalescents (ressanata) from Mapello. The following year Mapello was still in use: on 23 July 1528 Girolamo Scopolo, one of the officials who acted in place of a collaterale, informed the Marchese that the number of plague stricken and suspected in Mantua, the Maddalena, and Mapello was 2040. He also raised the problem of there being only two pizzamorti in the city, and said the health officials would see if any could be brought from Mapello. On 26 July 1528 Calandra referred to a Catabeno and one of his servants who were

58 ASMn., b. 2469, c. 341.
59 See chapter 2, pp. 54-5.
60 Stevens Crawshaw, Plague Hospitals, p. 128.
62 ASMn., b. 2509, c. 345.
63 ASMn., b. 2511, c. 65.
found with signs of plague and were sent there.\textsuperscript{64} On 25 August 1528 Scopolo wrote that as only two had died of plague that day, and only one infected house was discovered, things were improving. The following Saturday more than two hundred would be liberated, though it is not clear from where. Again in Mapello two had died and no more than two hundred were ‘sick of every illness.’\textsuperscript{65}

Perhaps as a consequence of the vast number of patients at Mapello the problem of hospitals in the city accepting plague sick and then becoming infected occurred again. On 19 July 1528 the Rector of the hospital in Mantua, Ludovico Gabioneta, wrote of the necessity of making provisions for the infected poor in the hospital; in particular finding a place where they could be moved so the hospital could be cleaned and purged. Gabioneta explained that the hospital had a site with three \textit{casetti} at Pietolo, to the south west of the city, near the lake which would be useful for transporting the poor suspected and also for transporting goods by boat. He first consulted \textit{Maestro} Paris and the other \textit{superiori della sanità} as he did not want to begin the operation without their knowledge, but they agreed that the hospital had to be disinfected and to use the site suggested.\textsuperscript{66} The plague years in 1527 and 1528, were an unusual and particularly strained time for those working as health officials in Mantua, as the delegation of caring for the plague sick demonstrates.

Information regarding the use of Mapello in these epidemics does not give details as to the structure of the building or what the area was actually like. The focus was on problems and inadequacies when the site was overflowing with the plague stricken and when things were going well, less detail was forthcoming. However, we do have a description from the plague of 1576 when the

\textsuperscript{64} ASMn., b. 2511, c. 21.

\textsuperscript{65} ASMn., b. 2511, c. 71. ‘li amaliati di ogni male.’

\textsuperscript{66} ASMn., b. 2511, c. 3.
Conservatori sought a lazaretto area and considered using Mapello. On 10 April 1576 Giovanni Aliprandi and some other health officials visited Mapello to assess its suitability ‘for purging things’\(^{67}\), but almost fifty years after the previous plague the fabric of the building had deteriorated and it was in such a poor state that it was not fit for purpose.

Later in August of 1576, health officials visited Mapello again to assess its suitability for sending the infected and suspected from the city. On the 12 August Bardellone wrote that although he had been informed of Mapello’s condition he would assess it again to determine whether houses nearby could be used. He added that ‘God willing the disease will pass quickly’ however, as the cold was very dangerous for the patients the Conservatori were considering where they could put the sick after the summer.\(^{68}\) Bardellone provided a description of the building: the main part, described as ‘the covered part’, was reduced to seventeen rooms. It was a two story building with three salette, two above and one below, with seven rooms on each floor. Four of these rooms could accommodate two beds, and the rest could only fit one. The building was in a state of disrepair with much work needed to be carried out to make it suitable for use.\(^{69}\)

Four days later, the site had been given further consideration. Three of the Conservatori had gone to see if it could be adapted for their purpose and Bardellone provided a more detailed report. He reiterated the dimensions of the building and the rooms, how they could be used, where the steward and chaplain could go, where supplies could be stored, where the kitchen would be

---

\(^{67}\) ASMn., b. 2598, c. 33. Its significance as a site for purging is confirmed in a letter describing the methods used in the previous plagues in 1506 and 1528, ASMn., b. 2598, c. 42.

\(^{68}\) ASMn., b. 2597, c. 320.

\(^{69}\) ASMn., b. 2597, c. 325.
and also what repairs would need to be undertaken. He estimated it would cost upwards of 300 *scudi*. After some consideration it was rejected for the following reasons: the *Conservatori* considered the bad air (*mal aria*) which had rendered the inhabitants of the area ‘all emaciated and yellowish’; they did not think it could accommodate the numbers of sick; and there would be problems with transporting people there. All those factors led the *Conservatori* to believe that San Pietro was the better place. A possible contingency plan would be to appropriate another monastery close by such as San Girolamo. Nevertheless, both were closer to the city than Mapello. Therefore in 1576 greater attention was given to patient care centred upon a consideration of the physical location, in terms of distance from the city and also the perceived poor health of the local inhabitants.

Yet, Mapello remained in the plans of the *Conservatori*. Later in August Bardellone wrote that the *Conservatori* observed the number of sick suspected of plague was multiplying among the Jewish community. They judged it would be better to force the Jews to send all those sick people out of the city, and as they were fewer in number than the Christian sick they could be accommodated at Mapello. The Jews would have to find the funds to make the necessary repairs and the *Conservatori* awaited the orders of Duke Guglielmo. On 7 September the *Conservatori* reported that the Jews had been informed that they had to provide a place to send all their sick and suspected and that they had been offered Mapello. However, members of the Jewish community visited it and found it was unsuitable not only as it would take a great deal of time and money to make it fit for purpose, but it was too small. They suggested another potential site, a place near the furnace of Megliareto, which at that time was available, adding that they were willing to pay the Camera the amount that would be considered suitable for that area. The *Conservatori* again sought Ducal

---

70 The word used is ‘gialdi’. In the GDI, vol. 4, p. 760, it is defined as an old form of ‘giallo’.

71 ASMn., b. 2597, c. 325.

72 ASMn., b. 2597, c. 336.
guidance, but urgently wanted to start to remove the sick (*questa sorte di persone*) as soon as possible.\(^{73}\) Despite on-going discussions, by 24 September the Conservatori had persuaded the Jews to move their sick to Mapello. Bardellone went on to describe the alterations the Jewish community were planning to make to render the site suitable, which included building porticos on to the outer walls of the building and more rooms to house the sick. The Conservatori did not want to grant permission for the work without consultation and therefore passed the request on to Libramonte.\(^{74}\) Later that month, on 27 September, Bardellone reported on the situation at the ‘Palazzo di Mapello’. He mentioned the building of additional rooms, however, the letter is torn down the left hand side and it is difficult to understand the meaning of the information.\(^{75}\)

Given that Mapello was visited and assessed and found wanting several times over the course of the summer how does it compare with the site the Mantovani actually used in 1576? As we have seen in the *Ordini* document produced by the Conservatori in the early stages of their appointment, the monastery San Pietro was designated as the lazaretto from 1 April, with the first patients sent there the following day. Although the necrology ends on 7 April 1576, the death figures given by Vigilio show a sharp decline from May 1576; in March 675 died, in April 1126 died in the city and 301 in the lazaretto; then the figure dropped to 555 in May, with 417 deaths in the city and 138 in the lazaretto.\(^{76}\) As the establishment of the lazaretto was the major addition to the policies pursued by the Conservatori, we must consider the diminution in death figure as strong evidence for the efficacy of the lazaretto. Vigilio also provides a list of those who left the lazaretto cured; from which he computes that 683 survived the lazaretto and 931 died there, making a total of 1614 patients.

\(^{73}\) ASMn., b. 2597, c. 367.

\(^{74}\) ASMn., b. 2597, c. 403.

\(^{75}\) ASMn., b. 2597, c. 389.

\(^{76}\) *La insalata*, pp. 48-9.
San Pietro was situated outside the town of Cittàdella, near the borgo of Porto, and thus conforms to the general tendency of moving the sick away from urban areas. Why the Carmelite monastery was used is not made explicit in any source I have consulted. On 13 October 1575 Aliprandi wrote that the fathers of the Carmine had willingly given the monastery to the service of the Duke. Therefore the most plausible reasons are convenience and proximity to the city. As will be discussed, San Pietro as a lazaretto had its own particular problems and challenges. Yet, it would appear the appropriation of this building for a lazaretto was reasonably problem free.

However, using other monastic buildings for the purposes of the city’s health office could be a fraught business. The monastery of San Pietro served as what may be called the lazaretto proper, in that plague cases were taken there to be cared for. Additional sites for convalescents and for infected goods were required. For this the monastery of San Giovanni, or at least parts of it, were used, and an alternative of San Girolamo was also considered. However, the Conservatori could not appropriate these areas without permission, and the friars in both places were reluctant to concede their buildings. On 24 August, after reporting the numbers in the lazaretto, Bardellone stated that he hoped the city would soon be free of disease and that the Conservatori would not need to avail themselves of San Giovanni, or any portion of that complex to house the sick. A week later the case against the brothers of San Giovanni was approached from another angle. On 30 August Bardellone wrote that in the present humidity the convalescents at San Giovanni were suffering as they were

77 See appendix 5. San Pietro is circled.
78 ASMn., b. 2594, 15 October 1575.
79 Stevens Crawshaw describes the various islands appropriated to cope with the plague stricken in 1576-7, see Plague Hospitals, pp. 84-6.
80 ASMn., b. 2597, c. 339.
near the forest. As the brothers of San Giovanni would not allow the Conservatori to use the rest of their buildings, ducal intervention was necessary to grant access to the full complex at San Giovanni or of San Girolamo if required. The following day Bardellone reported on the efforts of the Prior of Santa Agnese. He had informed the Conservatori that he had no authority over the Prior or convent of San Giovanni. Nevertheless, in contrast to the Prior of San Giovanni, Santa Agnese’s Prior had shown good will (buonissima volunta) towards the Duke and to his country (questa patria) by going to visit San Giovanni to persuade the Prior that agreeing to hand over his buildings would be a great service to the Duke and the city, asking him to consider ‘that in similar circumstances the secular princes could avail themselves of monasteries, as in times of war.’

On 2 September Bardellone reported that the Conservatori had visited the monasteries of San Pietro and San Giovanni, and with the agreement of the fathers of both places, they would accommodate the sick poor in San Pietro and the convalescents in the other, crucially inside the churches with ‘good order, and the separation of men and women.’ The following day, Bardellone wrote that 100 men and sixty women were now in the church of San Giovanni, and if necessary the sacristy and the refectory with two adjacent rooms would be made available. In San Pietro around one hundred people were sheltered in the church and another forty in other parts of the complex.

---

81 ASMn., b. 2597, c. 349.
82 ASMn., b. 2597, c. 350. ‘mettendogli in consideratione che in simil occasione li Prencipi Secolari possono valersi de monastieri sicome anco in tempo di guerra humane.’
83 ASMn., b. 2597, c. 356.
84 ASMn., b. 2597, c. 357.
The need for justification in appropriating religious buildings was a persistent concern, as was how they could be used. Bardellone wrote that the *Conservatori* were confused about how the sick could be accommodated in churches, arguing:

‘it seems to us in times of war one uses the church stalls, and in this divine war one can use them as hospitals, particularly those where they only say the divine offices, not where they keep the Sacrament.’

On 7 September Bardellone again discussed using other churches to house the sick and convalescent in the present time of need. The *Conservatori* had raised the matter with the Bishop who had consulted with several theologians. Bardellone returned to the office that morning having been unable to sleep awaiting their answer. He received a response from the man appointed to investigate the issue: the *Conservatori* could use churches as long as men and women were separated. Bardellone added that they would continue this work until the sick poor had covered lodgings.

Bardellone wrote at length about the continuing problems caused by using the monastery of San Giovanni. On 7 November he wrote that the *Conservatori* needed San Giovanni as part of the plan to cleanse the city and remove all suspicious cases from it. However, they had difficulty in convincing the Prior to allow the *Conservatori* to use the church and part of the monastery for the sick. He requested that the Duke intercede on their behalf. Later that month on 22 November Bardellone reported that no one had died or had been reported ill of

---

85 ASMn., b. 2597, c. 365. ‘Ben si pare che se al tempo di Guerra humana si fanno stalle di Chiese, che in questa Guerra divina si possono far del di Hospitale et massimamente in queste, dove non si tiene il sacramento, ma solamente si dicevano li divini offiti.’

86 ASMn., b. 2597, c. 367.

87 ASMn., b. 2597, c. 509.
mal contagioso in the lazaretto or in Mantua, and the Jews had finished their quarantine and had freed all their closed houses. It was a day worthy of remembrance. The Conservatori had again consulted the Bishop about the possibility of using monasteries to lodge the sick and convalescents, in order to help free the city. They implored the Duke to intervene and write to the convent of San Giovanni so that they could use the whole complex, and also to San Girolamo or some other place big enough for this task. On 3 December a resolution of sorts had been reached. After much discussion the Bishop had conceded the use of San Giovanni and also San Girolamo if it was not sufficient, on the condition that the Conservatori paid for all expenses such as wine, wood and similar things, and that when the suspected were released they would clean and purge the place. This would not have been achieved without input from the duke and consultation with the Bishop Marco Gonzaga.

Using monastic buildings as plague hospitals was not uncommon. Yet their layout could have been problematic and at times contradictory to a healthy structure envisioned in purpose built lazaretti. As yet I have not found a description of San Pietro. However, as with Mapello, we can glean some sense of how the building functioned as a lazaretto through information in the letters. In a letter from 11 October 1576 in a section detailing the release of some convalescents and of some punishments meted out, Bardellone added ‘all the sick are secluded in San Pietro in the prepared places, that is women in the Church and men in the room of the monastery.’ It is not clear if patients were moved round for purposes of quarantine as in Venice.

88 ASMn., b. 2597, c. 559.
89 ASMn., b. 2597, c. 587.
90 See Henderson, ‘Epidemics’, p. 182, for the monastic houses used in Florence during the plague in 1527.
91 ASMn., b. 2597, c. 444. ‘Tutti li infermi sono ritirati in San Pietro nelle luoghi preparati, cioè le donne in Chiesa, et li huomini nelle camere del Monasterio.’
The description given in the Capitoli presents an image of how the lazaretto should have run. In the course of the period between April and August or September the experience of organising and maintaining San Pietro shaped the text of the Capitoli. The decision to use and adapt it for this purpose was problematic almost immediately. On 2 April Aliprandi informed Libramonte that moving the sick from the city was causing problems. He requested the use of two carts to carry the sick to San Pietro as they were having difficulty finding any, adding they could provide the horses.\footnote{ASMn., b. 2598, c. 15.} The following day Aliprandi and the Conservatori were forced to admit that they had not made provisions to keep the Cepetto gate open at night to take the sick out of the city.\footnote{ASMn., b. 2598, c. 16.} Additionally, as discussed above, San Pietro was not of a sufficient size to accommodate the infirm. Aliprandi made a passing reference to the lazaretto in a letter of 9 April, asking Libramonte to inform the Duke that the number of sick was multiplying there.\footnote{ASMn., b. 2598, c. 31.} On 10 April Aliprandi wrote that it would be better to bar the roads to the lazaretto to stop patients roaming around, to erect gallows and to appoint guards so that the convalescents could not wander away from the lazaretto before being allowed to do so.\footnote{ASMn., b. 2598, c. 33.}

The location was problematic in another way. The doctors complained that it lay at a low altitude and so was not favourable to good health. On 13 June Bardellone wrote that the doctors at the lazaretto and also in the city advised the Conservatori to construct at least fifty casotti for the sick behind the wall of San Pietro, or near to where the officials and doctors were stationed. The reason for this was the first patients who were put inside the monastery, in addition to being in a bad site due to the building’s position, were now so
infected that many were dying in those *casotti*. The doctors said it was a miracle that any of those recently arrived had recovered. The *Conservatori* struggled to find the funds and materials for the new *casotti*. Later on 3 July Bardellone referred to the structures as *casoni*, rather than *casotti*, and stated that it was necessary to construct others but in a better fashion than the previous ones which were infected by the deaths of so many sick people. However, they did not have a sufficient supply of straw, and had to send to Ragiolo in the south of the state, for some. It had arrived the previous day and now they were looking for information as to how to build the *casoni* properly.

The volume of people in San Pietro was monitored and assessed by the *Conservatori*. Unfortunately the lists detailing this information were usually sent on a separate piece of paper, and do not survive: a handful are scattered throughout the correspondence, but not in sufficient quantity to check the figures given by Vigilio. Occasionally, the *Conservatori* reported the numbers of patients and staff, or the numbers and dates when convalescents would be released. On 23 April Aliprandi wrote that he had been informed that there were 335 there, but cautioned this number was not necessarily accurate as about ten were on the point of death and others were very ill. As with Mapello, often reports on the number of patients were given in reference to some other need dependent upon the numbers. On 6 July Bardellone reported that inside the *lazaretto* there could be eighty sick people. As a consequence the surgeon sent by the Duke had written to inform the *Conservatori* that he did not have much to do because he had the assistance of two barber surgeons. Two days later Bardellone reported that sixty people remained inside the *lazaretto* and seventy-five had been moved to the convalescent area. He added that these

96 ASMn., b. 2597, c. 245.
97 ASMn., b. 2597, c. 275.
98 ASMn., b. 2598, c. 58.
99 ASMn., b. 2597, c. 278.
numbers rose and fell depending on the day as people were sent there and others died.\textsuperscript{100}

In another instance on 21 October there were eighty infirm in the church, forty-three men and thirty-seven women, in addition to the staff present, the doctors, steward (\textit{dispenseiro}), nurses and \textit{pizzamorti}. Further, San Giovanni contained thirty-eight people in total, plus a doctor, steward, pharmacist and several servants. This took the total number of people at the \textit{lazaretto} to 145. He added that he hoped the expense would soon be over, and that ‘since it was the humid season, the illness should diminish rather than grow.’\textsuperscript{101} An interesting point to note is that men and women were inside the church, contrary to the initial plans to separate the sexes and also to the stipulation made by the church theologians. Perhaps this was a result of concerns for the effect weather had on patient recovery.

San Pietro was at the centre of the \textit{lazaretto} area, surrounded by secondary convalescent spaces and cleansing stations. On 13 October Bardellone reported on a case of sickness in Gabbiana situated to the south west of the city. He discussed the provisioning of a house where people had been interred. The \textit{Deputato} of Gabbiana reported that thirty-eight were enclosed in the house of the Agnella. Until that day all were apparently healthy but still had to complete their quarantine. Bardellone presented the case against this group being moved to the \textit{lazaretto} of San Pietro; the difficulty in transporting them, the possibility of spreading infection while being transported, and the small size (\textit{stretezza}) of the \textit{lazaretto}. He added the explanation that the \textit{lazaretto} was ‘to supply the needs of the city’ and it did not seem wise to accommodate people from the

\textsuperscript{100} ASMn., b. 2597, c. 281.

\textsuperscript{101} ASMn., b. 2597, c. 471. ‘poiché essendo in questa stagione humida il male più tosto si va sminuendo che crescendo.’
towns in it. Again concern for patient care in terms of transporting the sick and in accommodating them in the lazaretto, was a factor in this case. Yet, it was not put above preserving the city.

Another incident occurred at the lazaretto named San Sillo. The following week Bardellone reported that ‘we have designated Signore Conte Claudio to go and release those locked in the lazaretto of Gabbiana in the Palazzo of San Sillo.’ A notary was also sent to question some patients who had fled, then returned there. On 26 October Maestro Giovanni Cossa, presumably the notary, had returned from Gabbiana, and reported that he had examined a Cortese, the deputato sopra la sanità. Cortese reported that some of the sequestrated told him a Borrino, one of the patients, had left the lazaretto at night purportedly to find a friend. Borrino returned to the lazaretto and when questioned he admitted to escaping and cried. From this brief incident we can see the authority the Conservatori could exert over other parts of the state. As Stevens Crawshaw points out ‘plague hospitals had been established in some rural areas, such as in the countryside around Verona, in the previous century. In 1577, for example, a letter was sent to the Veronese authorities in Valeggio, a town in their territory, with instructions as to how to respond to plague.’

In the case of Gabbiana, the Conservatori may have been overly cautious in refusing to allow the convalescents’ entry to San Pietro; however, it gives an insight into a rural plague hospital and its governance.

---

102 ASMn., b. 2597, c. 455. In the note added to the Capitoli document, there is mention made of a Lazaretto a Santo Sillo that had been made following an order by the Conservatori, ASMn., b. 3048, c. 75.

103 ASMn., b. 2597, c. 473. ‘Habbiamo deputato il Signore Conte Claudio che vadi a far sbalzar li serrati nel lazaretto di Gabbiana nel palazzo di Santo Sillo.’

104 ASMn., b. 2597, c. 484.

105 Stevens Crawshaw, Plague Hospitals, p. 24.
Maintaining order at the *lazaretto* was again a problem. On 21 April Aliprandi wrote of the need to proclaim a *grida* in the area of San Pietro to declare that no one could leave until they had a licence from his office, or face the gallows.\(^{106}\) As mentioned above Aliprandi also recommended gallows be erected at the *lazaretto* and indeed corporal punishments were carried out for a number of offences. On 14 August Bardellone reported that an Andrea Gandino from Cavriana, in the north of the state, had been hanged at the *lazaretto* that morning and Silvestro Fornaro given two pulls of the rope.\(^{107}\) Details of their crimes were not given. On 20 August Bardellone wrote that many thefts had occurred in the city and also in the *lazaretto*, adding that they would have to open the cemetery of San Gervasio.\(^{108}\) The Parish of San Gervasio was in the San Martino quarter of the city. It is not clear if Bardellone was referring to the need to bury the criminals.

On 6 June Bardellone recounted various problems at the *lazaretto*. The previous Sunday Aliprandi discovered that there had been many thefts and dishonest acts. Among those mentioned was an Andrea, the boatman employed to take the sick to the *lazaretto*. He was found in Mantua in the company of the *pizzamorti*, where the *Conservatori* discovered many things that gave cause for concern. The *pizzamorti* and Andrea were imprisoned. Andrea was accused of stealing from the sick in the *lazaretto* and in the *casotti*, then of taking the goods to the city. He denied the charges but admitted to committing dishonest acts with the women in the *lazaretto* and consorting with prostitutes. In the course of questioning other crimes came to light: a *pizzamorto* had deflowered a young virgin by promising to marry her. At that time, the *Conservatori* did not have sufficient staff and so rather than punishing them, the *Conservatori* were forced to allow them to return to work. However, after they had finished a

\(^{106}\) ASMn., b. 2598, c. 54.

\(^{107}\) ASMn., b. 2597, c. 324.

\(^{108}\) ASMn., b. 2597, c. 322.
period of quarantine Bardellone wrote that he would ensure they were properly dealt with.\textsuperscript{109}

Sustaining the necessary level of staff at the lazaretto was problematic as patients and those employed there fluctuated with the ebb and flow of disease. Occasionally it was sufficiently staffed.\textsuperscript{110} Stevens Crawshaw points out that in Venice ‘service within the Health Office was often a family affair and the role of Prior was no exception.’\textsuperscript{111} The temporary nature of the Mantuan lazaretti did not offer the benefits a permanent position could bring. Workers were sourced from a variety of places and that could be a source of irritation. Some people offered to serve at the lazaretto as some form of recompense for a crime or to contribute to a request. We have seen that the innkeeper of the la gatta opted to work as a police agent (sbirro).\textsuperscript{112} In the same letter Bardellone mentioned awaiting the outcome of a request passed on to the Duke from a Girolamo Fanotzzo who offered to be a nurse at the lazaretto.\textsuperscript{113} On 24 June Bardellone reported the outcome of a case, where the penalties for a Guglielmo Suardo and Hippolito Motta were to serve as pizzamorti at the lazaretto in lieu of the penalty imposed by a grida.\textsuperscript{114} On 3 July Bardellone raised the issue of a certain criminal who had been banished after his involvement in the death of a Maestro Francesco Angelo, but Bardellone requested that he pay by serving at the lazaretto.\textsuperscript{115} Also, on 11 July Bardellone enquired if the Duke had reached a decision regarding a Giovanni Maroardo and if he should serve at the lazaretto or

\textsuperscript{109} ASMn., b. 2597, c. 230.

\textsuperscript{110} ASMn., b. 2597, c. 259.


\textsuperscript{112} See chapter 4, p. 119.

\textsuperscript{113} ASMn., b. 2597, c. 241.

\textsuperscript{114} ASMn., b. 2597, c. 149. This letter is incorrectly dated on the front page, as having been written on 26 April.

\textsuperscript{115} ASMn., b. 2597, c. 275.
if the offer made by Giovanni’s family to circumvent this punishment would be accepted instead.\textsuperscript{116}

On 30 August Bardellone sent a supplication from a Cesare Resano, who offered to serve as steward at the lazaretto, adding that at present they were in need of staff.\textsuperscript{117} On 11 September Bardellone reported that they were in great need of pizzamorti at the lazaretto as all those at the lazaretto were sick and there were only two left in the city; three others were in prison for theft.\textsuperscript{118} On 14 September a Maestro Giovanni Maria Ongaro had given two supplications to pass on to the Duke; one on his behalf and the other for his brother. One offered to work as a scribe (scrivano) in the lazaretto and the other as a pizzamorto. Bardellone wrote that they had greater need for pizzamorti.\textsuperscript{119} In a letter from 26 October Bardellone reported looking in the prison. Duke Guglielmo had allocated prisoners for use as pizzamorti or nurses, but at present the Conservatori had enough of these officers. Instead they needed two cleaners who would be paid two scudi a month.\textsuperscript{120} Occasionally staff, as well as patients, escaped. On 11 November Bardellone reported that a Cesare Locatello had fled the lazaretto by scaling the walls. He had been sent from Sermide to serve as a nurse. The only solution was to write to the Commissari near the Veronese state, because they could find and detain him.\textsuperscript{121} From the examples cited above the Conservatori were dependent upon Ducal intervention to secure many of the non-medical staff.

\textsuperscript{116} See pp. 120-1..  
\textsuperscript{117} ASMn., b. 2597, c. 349.  
\textsuperscript{118} ASMn., b. 2597, c. 103.  
\textsuperscript{119} ASMn., b. 2597, c. 376.  
\textsuperscript{120} ASMn., b. 2597, cc. 484-5. A note of the criminals names and their crime was taken.  
\textsuperscript{121} ASMn., b. 2597, c. 523.
A pharmacist was one of the staff stipulated to remain at or near the lazaretto. This is in contrast to Venice where the appointment of an onsite apothecary to make medicines was not necessary. Stevens Crawshaw argues that specific shops in the city had a contract with the lazaretto, and treatments were ordered then collected by a doctor or health office servant.¹²² A Maestro Federico Scartoccio had been sent to the lazaretto to make medicines and remedies for the sick. He stayed in the same house as the doctor and the steward and was employed by the College of Pharmacists, but the Conservatori paid his expenses.¹²³ On 7 July a young man charged with undisclosed crimes made a supplication to Duke Guglielmo, offering to serve in the lazaretto. Bardellone added that it was a lucky coincidence as the Conservatori were in need of help, particularly for the pharmacist Scartoccio. With Guglielmo’s permission the Conservatori would send the man there for a month and pay him.¹²⁴ Two days later Bardellone provided greater detail on the problem. Scartoccio had been ill for ten days and to provide for the sick, the Conservatori, after a great struggle, found a boy (gargione) to help for eight days.¹²⁵ The situation arose again several days later, as it was reported on 11 July that the pharmacists initially paid to have a pharmacist at the lazaretto for the poor with a salary of six scudi a month. Then Bardellone added that Scartoccio had needed a helper but was well now.¹²⁶ As well as giving an example of the processes in finding lazaretti staff, this case shows that the Conservatori co-opted organisations, in this instance the College of Pharmacists, to help fund and provide for patients in the lazaretto.

¹²² Stevens Crawshaw, Plague Hospitals, p. 162.

¹²³ One example of supplying the pharmacist at the lazaretto is found on 16 November when Bardellone reported that the owner of the Pomo d’Oro shop died without an heir. Aliprandi took the goods from the shop and found medicines among them which were to be given for the service of the poor in the lazaretto, ASMn., b. 2597, c. 536.

¹²⁴ ASMn., b. 2597, c. 280.

¹²⁵ ASMn., b. 2597, c. 282.

¹²⁶ ASMn., b. 2597, c. 285.
A consistent and competent supply of medical personnel was difficult to maintain given the level of demand and the survival of the workers. On 5 May it was reported that the lazaretto needed more nurses: one had died and the number of sick had multiplied. On 4 July the Curate of Soave died at the lazaretto, but what was worse was the death of Maestro Bartholomeo, the oldest and most adept barber (più pratico barbiero) at the lazaretto after the death of Acquanegra. As a consequence the Conservatori were in a quandary as there were only two barbers left at the lazaretto and the Conservatori did not wish to send another person of value there (d'altra persona che sia di valore). This is in stark contrast to the permanent positions at the Venetian lazaretto which could be passed down through families.

The Conservatori also poached potential staff from the lazaretto for their own ends. On 28 July Bardellone wrote that a Maestro Batta Baino had reached Mantua from Viadana and was ready to go to the lazaretto for the reward promised him. But Bardellone reported that, with the exception of eight barber surgeons who were very inexperienced (molti principanti), there were no competent surgeons in the city to care for the plague stricken. As there were no more than eighty-six patients at the lazaretto, the Conservatori thought it would be better to send Baino to work (medicare) in the city to cure the sick poor, with a salary of ten scudi. On 1 August Bardellone wrote that their

---

127 ASMn., b. 2597, c. 169.
128 ASMn., b. 2597, c. 276.
129 ASMn., b. 2597, c. 276.
130 Stevens Crawshaw, Plague Hospitals, p. 159. Richard Palmer has shown how sought after such positions could be in ‘Physicians and Surgeons in Sixteenth-Century Venice’ in Medical History, vol. 23 (1979), pp. 451-60.
131 ASMn., b. 2597, c. 301.
The Conservatori used necessary expediency to appoint people to work in the lazaretto, as we have seen, drawn from a range of possible sources. Another example of this procurement was Marco Luchese who touted his secret remedy and its ability to cure *mal contagioso*, and he was put to work in the lazaretto. On 13 May Bardellone gave an update on Acquanegra, the surgeon at the lazaretto, who was so ill that no medicine would be of any use to serve him. In order that the poor would not suffer through lack of adequate medical care the Conservatori decided to send Luchese. Luchese was referred to as a doctor (*medico*) as he had been given a licence to practise by the Duke with a salary of 15 *scudi* per month and expenses.¹³³ As argued in the previous chapter, Luchese can be placed in the category of a charlatan and Gentilcore has demonstrated the importance of obtaining a licence to practise this trade.¹³⁴

Luchese soon caused problems. Three days after his appointment on 16 May Bardellone added that Luchese had been recommended by Paolo Moro in Venice, and had been given a licence to practise and a salary because he promised to work miracles. However, one of the other workers had told the Conservatori that Luchese was refusing to see patients, did not know how to treat them, and wanted only to be well fed, to be at a distance from the sick and to act like a physician rather than a hands-on doctor (*medicar per fisico*). Further, the doctors in the city, presumably referring to the College of Doctors, had questioned Luchese and found him to be without education (*lettere*) or practical experience. Such was their strength of feeling that the Conservatori

---

¹³² ASMn., b. 2597 c. 304.

¹³³ ASMn., b.2597, c. 188.

¹³⁴ Gentilcore, *Medical Charlatanism*, p. 112. See above p. 144.
could not agree to put the lives of so many men in danger in his hands. They also heard other dubious things, such that they believed him to be a fraud (*mariuolo*). It is not clear what other machinations Luchese had been involved in, however, his actions were sufficient to suggest chasing him from the state, but not before obtaining the Duke’s permission to do so.135

There was another twist in this tale. Subsequently, the opinion of Luchese altered. On 21 May Bardellone reported that Aliprandi and Strada visited the *lazaretto* and found that Luchese had started to look after the sick and to pay his debts. They praised Luchese for his work and exhorted him to continue. Furthermore, the other members of staff seemed to obey his orders.136 By 30 May the decision was taken to put him in charge of governing the sick. The *Conservatori* concluded that he did not know how to ‘work with his hands’ and would thus be better suited to this new position which was paid at five *scudi* per month instead of fifteen.137 A similar incident occurred in Venice, described by Stevens Crawshaw, where ‘a month after Scipione Paragatto, of Cividale di Belluno, petitioned to be able to sell his particular plague remedy (*Aqua preservativa e defensiva*) in Venice, he found himself appointed head gravedigger and body-collector.’138

A week later, on 6 June, two of the *Conservatori* visited the *lazaretto* and found it to be in chaos and that numerous crimes had been committed.139 What became of Luchese is not clear. Later that month (24 June) Bardellone wrote that Luchese, who had first been sent as a surgeon and then served as the

135 ASMn., b. 2597, c. 196.
136 ASMn., b. 2597, c. 203.
137 ASMn., b. 2597, c. 220.
139 ASMn., b. 2597, c. 230. See above.
steward, was ill with a bubo.\textsuperscript{140} He exemplifies one of the core problems in finding suitable lazaretti staff. Not only did they have to work in the lazaretto, they had to be of good character and maintain good order. Comparable problems occurred in Venice. The Prior of the lazaretto vecchio suffered a period of sickness in 1555. Stevens Crawshaw explains that during this time ‘a series of unacceptable acts were said to have taken place’, as a result a doctor Cucino was placed in charge temporarily as Prior, and the Health Office ordered that patients be ‘reminded to be obedient and sensible’ or face punishment, though no such events are recorded.\textsuperscript{141} As we have seen corporal punishments were carried out in the lazaretti of Mantua.

Procuring staff and the subsequent actions of some of the workers, as well as the discussions regarding the physical location of the lazaretti give an idea of the patient experience. For 1576 it is possible to extend this to include those who left the lazaretto cured. In 1506 health officers had a problem with how to care for those who had completed quarantine at Mapello. By 1576, it had been resolved with the participation of the city’s confraternities who organized processions to bring convalescents back to the city. Processions celebrating the convalescents return also occurred in Padua during this epidemic, as described by Canobbio, but did not occur in Venice.\textsuperscript{142} Instead, those who returned to that city were sent to carry out household quarantine and when released were often put to work in a service that could be related to the cleansing of infected goods or treating the sick.\textsuperscript{143}

\textsuperscript{140} ASMn., b. 2597, c. 149.
\textsuperscript{141} Stevens Crawshaw, \textit{Plague Hospitals}, pp. 146-7
\textsuperscript{142} Ibid., pp. 206-7.
\textsuperscript{143} Ibid., p. 207.
In his chronicle Vigilio gives an account of the convalescent processions, describing the routes, the dates when they occurred, and the numbers released. Bardellone also discusses the liberation of the convalescents; his dates match Vigilio’s and the numbers of those released are reasonably accurate. On 30 May Bardellone wrote that he anticipated 111 people would be finished their quarantine within a short period of time. Among that group there were twenty orphaned children (figlioli), five of whom were girls. The Conservatori planned to make provision for them so that they did not go bad (non vadino al male). They hoped to send the females to the Misericordia with the agreement of the Duchess, and the Confraternity of San Antonio had gladly agreed to accommodate the males when they had available rooms. On 5 June Bardellone wrote that on the following day 107 would be released. Among them were still the twenty orphans and wards (pupilli), fifteen males and five females, who needed help. The Duchess had counselled against housing the girls in the Misericordia as there was doubt it had been properly cleansed. The Conservatori had persuaded the Confraternity to accept them, under the care of the wife of a Maestro Girolamo. The Duke had granted the confraternity two rooms that had belonged to a vegetable seller (ortolano) for the orphans.

Vigilio describes the first release of convalescents in detail as a celebratory and ceremonial event. On the morning of Wednesday 6 June 113 men, women and children were released from quarantine. The convalescents went in procession with the Confraternity of the Forty hours carrying images of San Rocco and San Sebastiano with music and singing. They were taken from the lazaretto to the church of Santa Maria delle Grazie where they heard Mass and had a meal outside in the portico. This church is particularly significant as it was rededicated to the Virgin Mary by Francesco Gonzaga in thanks for the cessation of a plague at the turn of the fifteenth century. Afterward they returned to

144 ASMn., b. 2597, c. 220. The Misericordia was established in 1535 by Federico Gonzaga for poor female orphans, see Donesmondi, p. 158.

145 ASMn., b. 2597, c. 227.
Mantua and to San Bartholomeo, where they were met by members of the Confraternity of San Antonio and taken through the city past the principal churches of San Andrea, San Pietro, and San Antonio where they were given a meal and those without accommodation were given lodging, and each was given money from the charity that had been collected.  

In expectation of the next release on 13 June, Bardellone wrote that within twelve or thirteen days, with the grace of God, approximately another hundred people would complete quarantine, many of whom were poor and in need of food and lodging. He discussed the possibility of some being given accommodation by the Confraternity of the Most Holy Blood, who had given lodgings to twenty-six of those released on the first occasion. The Confraternity requested a licence to open a part of their building as a dormitory, and suggested if given some charitable funds they could build another dormitory to accommodate between 160 and 180 of the poor. Bardellone proposed that the Conservatori could reach out to the castellanze for the required elemosina, and combined with that collected for the jubilee he hoped they could carry out this ‘not only pious but also necessary work.’ He added that the Confraternity had written to Rome to give an account of the procession of the convalescents. A custodian of the Confraternity of the Most Holy Trinity, a Piero known as Il Catelano wrote that the building work on the new ospedale began on 18 June 1576.

On 16 June, Bardellone wrote that the next set of convalescents would be released on the festival of San Giovanni (24 June). One of the men set to be

---

146 La insalata, p. 50.
147 ASMn., b. 2597, c. 241.
148 ASMn., b. 2597, c. 241.
149 ASMn., b. 2599, 18 June 1576, Piero Il Catelano.
released had confessed to attacking a woman and was punished with three pulls on the rope as an example to others.\textsuperscript{150} As anticipated on that second occasion ninety-six were liberated from quarantine. Bardellone added that at the end of the following month a further 150 would finish their time. Inside the \textit{lazaretto} there were approximately 200 people, of whom forty-two had just begun their quarantine.\textsuperscript{151} The Confraternity of the Forty Hours met the ninety-six released that day and gave them lunch at San Sebastiano. Then they went to San Antonio and were given another meal, and those without lodgings were accommodated there.\textsuperscript{152} Vigilio’s version of the event is slightly different: ninety-nine were released and taken by the Confraternity of the Forty Hours in procession to San Andrea, where the relic of the blood of Christ was held, and then to San Sebastiano where they were given food, adding that the men and women sat separately.\textsuperscript{153}

Two days later, Bardellone reported that after the release of convalescents two days prior members of the Confraternity of the Forty Hours, jealous of the role played by the Confraternity of the Holy Blood, caused trouble.\textsuperscript{154} On 29 June Bardellone reported that he hoped the discord between them would be resolved to the satisfaction of the confraternities, and ‘for all the people.’\textsuperscript{155} The following day Bardellone wrote that the heads of both confraternities met at his home and made ‘most humble and cordial peace’ asking for remissions from any offence. To show good feeling members of each confraternity would celebrate the jubilee for the feast of the Visitation of the

\textsuperscript{150} ASMn., b. 2597, c. 247.
\textsuperscript{151} ASMn., b. 2597, c. 257.
\textsuperscript{152} ASMn., b. 2597, c. 257.
\textsuperscript{153} \textit{La insalata}, pp. 50-1.
\textsuperscript{154} ASMn., b. 2597, c. 260.
\textsuperscript{155} ASMn., b. 2597, c. 268.
Madonna together in the Cathedral the following day. 156 Again Piero Catalano commented on the resolution. 157 He wrote that the reconciliation of the two confraternities was so remarkable that he could not describe it well enough and the members hugged each other with kisses and tears. 158

Vigilio states that the same procession route was followed on 29 July when 135 were released, adding that he saw them all sitting at a table in the piazza in front of the church. 159 Unfortunately, there is no corresponding archival information for this occasion. On 24 August Bardellone informed the ducal secretary that that morning the fourth release of convalescents occurred and ninety-eight returned to the city cured. He added that fourteen left the lazaretto to begin their convalescence, and believed that the fifth release the following month would see 101 people liberated. At that time there were thirty-two in the lazaretto, eight of whom were sick with fever, and if no more were sent there, he hoped the city would soon be liberated from the plague. 160 Vigilio wrote that on the day of San Bartholomeo, ninety-eight were released and taken by the Confraternity of the Forty Hours. They were given lunch but not elemosina as previously because of a ‘dispute between the confraternities.’ 161 The fifth release occurred on 11 October when as noted by Vigilio sixty-one returned to the city and were again taken to San Antonio. 162 Bardellone wrote that among the men and women who had finished their quarantine, twenty-six

156 ASMn., b. 2597, c. 269.
157 ASMn., b. 2599, 15 June 1576. Piero Catalano is one of three signatories to a letter which described him as such.
158 ASMn., b. 2599, 3 July 1576, Il Catalano.
159 La insalata, pp. 51.
160 ASMn., b. 2597, c. 339.
161 La insalata, p. 51.
162 Ibid., p. 52.
were poor and nude and were to be given clothes.\textsuperscript{163} As in Venice when patients returned from the lazaretto in 1575 it was ‘noted some poor did not have clothes so were given some as a charitable act.’\textsuperscript{164} On the 22 October both Vigilio and Bardellone confirm that that morning thirty-six returned to Mantua having finished their quarantine in the casotti, and were received by the Confraternity of San Andrea as they had been on the previous occasion.\textsuperscript{165} Unfortunately there is no corresponding letters to describe the final two events. The seventh occasion was on 13 December when ninety-nine were released and taken to San Antonio and on 25 January 1577 forty two were released and taken in procession to San Antonio.\textsuperscript{166}

These examples bring to light a number of important points and developments. The collective experience of post-lazaretto quarantine is evident. The tension we saw in 1506 when those cured were kept on boats as the health officials did not know what to do with them was resolved by the participation of several of the city’s confraternities; though not without some discord. This must have helped to lessen the stigma of those returning from the lazaretto. The Mantovani did not find it necessary to build another convalescent hospital to house people returning from the lazaretto as Ingrassia recommended in Sicily.\textsuperscript{167} Not only did this resolve the issue of how to integrate those who left the quarantine areas into the supposedly healthy city, it also absorbed some of the costs. But the Conservatori contributed some of the funds for the construction of a dormitory space in San Antonio. The architectural modifications to the confraternity’s buildings were perhaps one lasting physical change to the urban fabric. Previously sick members of the community now were

\textsuperscript{163} ASMn., b. 2597, c. 444.
\textsuperscript{164} Stevens Crawshaw, Plague Hospitals, p. 136.
\textsuperscript{165} ASMn., b. 2597, c. 471.
\textsuperscript{166} La Insalata, p.52 and p. 54.
\textsuperscript{167} Cohn, Cultures, p. 88.
re-integrated into the city with celebrations and paraded through the streets. The sights and sounds of these processions must have given hope to those residents in the city while trumpeting the success of those governing the city and of the communal fight and triumph over the disease.

**Conclusion**

The construction, location and organisation of a *lazaretto* could take variant forms depending upon local factors. In Mantua the location of the *lazaretto* was not permanent and this raised a particular set of problems. In the late *quattrocento* Carlo Agnelli used Mapello as one of the principal places to send the plague-stricken. He appears to have sought to centralise the plague sick there and this strategy was followed again in 1506 and, as far as it is possible to discern, in 1528. However, the epidemic in 1527-8 presents something of a shadowy anomaly as those acting as health officials were content to delegate some, not all, responsibility for the poor plague sick not only to the rector of the hospital, but away from Mapello. Initially, however, the health officials also used the hospitals within the city during these epidemics after it was established the disease was plague. This could have been due to necessity while Mapello was made suitable for use, but it seems more likely that they chose to use them. For example in May 1506 Calandra reported that Scalona had planned to move all patients from the Maddalena, in the city, to Mapello and once this task was complete he would close and fumigate the Maddalena. Therefore, it was 1576 before the Mantuan health officials opted to move the plague sick or suspected out of the city to the *lazaretto* of San Pietro as soon as Mantua was officially acknowledged as being infected. This places Mantua somewhere between the actions of her northern neighbours, Milan and Venice, who had more solid *lazaretti* structures, and the actions taken further south in Sicily by Ingrassia, who sought to institute a number of *lazaretti* during the epidemic.
By 1576 the Conservatori addressed a different set of problems in organising the lazaretto. They engaged in long and complex negotiations with the religious orders, the Bishop, the Jewish community, and the Duke to establish and maintain areas for the sick and convalescent. The discussions are evidence of the vast leap in the concept of public health as the Conservatori invoked theological reasoning and used metaphors of war to persuade and compel others to acquiesce to their requests and demands. During earlier plagues metaphors were used by health officers to describe the fight against the disease, but not to compel others to work for them and to provide optimum care for the plague stricken.

One common problem for the Mantuan health officials was supplying and maintaining a sufficient level of staff, without the promise of permanent employ. Stevens Crawshaw argues that ‘in many lazaretti the clergy ran the show, administering both physical and spiritual medicine’, whereas in Venice ‘the Chaplin had control only over spiritual and bureaucratic matters.’ In Milan, as Cohn has argued, the Capuchins were given responsibility for maintaining the lazaretto, with other orders placed in charge of the plague huts. Mantua differed as the steward (dispensiero), not any religious orders, was in charge of the daily running of the lazaretto. Perhaps this staffing style contributed to the problem in maintaining employees. The conditions of the Capitoli dealing with lazaretti employees indicate that they anticipated problems while also demonstrating a concern for the well-being of those confined. Not only did the Conservatori force people to work in the lazaretto, either through coercion or punishment, but they were also approached by people who offered their services for a period of time.

\[168\] Stevens Crawshaw, Plague Hospitals, p. 112.

\[169\] Cohn, Cultures, p. 103.
Patient care was a primary concern, as evidenced by the discussions on the suitability of the designated lazaretti areas particularly in 1576. The sites were assessed on the basis of how easy it would be to transport the sick and also how the location would impact their recovery. However, given that the structure of the temporary buildings the Conservatori used were not always conducive with good health, it may not have been possible or practical to administer all appropriate medical care; for instance, there is no evidence to suggest that the Mantuan lazaretti were divided up to allow a rotation of patients, as in Venice, or as in Milan where in 1576 the lazaretto of San Gregorio ‘reached capacity with its 388 rooms divided into three sections.’ Nonetheless, from the late quattrocento health officials recognised the plague hospital as a place where the plague-stricken could be cared for or cured, therefore, surpassing the notion that their main function was to remove the plague sick from the city.

\[170\] Stevens Crawshaw, *Plague Hospitals*, p. 69.

\[171\] Cohn, *Cultures*, p. 108. There is also a description of life in the plague huts.
7. Conclusion

From the later *quattrocento* the *Collaterale* was a staple member of the health office in all its organisational configurations. When the health office in Mantua became a permanent Magistracy in the seventeenth century the *Collaterale* remained an important figure.\textsuperscript{981} During the epidemics under discussion the core of his work remained largely unchanged; issuing health passes, dealing with the movement of people coming in and out of the city and state and monitoring incidence of disease in the peninsula and more widely. Yet, the prominence of the position fluctuated as a more solid state bureaucracy developed and as attendant public health concerns became more multifaceted. Carlo Agnelli corresponded directly with the *Marchese* Ludovico and the *Marchesa* Barabara to communicate both counter plague actions and also to address other non-related concerns brought to him; including replacing the nose from a statue of Virgil and supplying various types of fruit. Agnelli commanded a small number of operatives to carry out the necessary responsibilities. By the early sixteenth century, the *Collaterale* Scalona was given the task of stemming an epidemic in the *contado*, which he successfully completed. But three years later when the city was infected he was superseded by the appointment of two other officials, Calandra and Alessio, who were more closely involved with the *Marchese* Francesco and also with the *Marchesa* Isabella d’Este. Letters from the three *Superiori alla Sanità* layer information and give different perspectives on the work each member carried out. The tone of their letters was markedly different to Agnelli, in that they passed judgement on the effect the actions they took would have on the city and its inhabitants and Calandra in particular dressed his reports in stories.

The death of the *Collaterale* in 1528 prompted other officials to write several letters to the *Marchese* to pressure him to appoint a replacement.

\textsuperscript{981} Navarrini, ‘L’Ufficio’, p. 23.
emphasising the importance of the office in numerous ways, not least in 
organising defences against plague. One of the fundamental aspects of this was 
to be aware of all cases of illness in Italy, so that appropriate bans on 
potentially infected people or places could be speedily actioned. In the early 
stages of the epidemic in 1576 the Collaterale Aliprandi was the main official 
who produced and organised methods to counter the disease in Mantua. During 
this period he began to join aspects of the developing counter plague measures 
with other facets of administration, such as ordering the capi di compagnia to 
take on additional duties and he also began to coerce ecclesiastic participation 
primarily at Parish level. The crisis point in March 1576 provoked the 
appointment of a group of Conservatori, some of whom were involved in earlier 
planning or consulting stages; notably the President of the Senate Paolo 
Bardellone who took charge of the group, as is evident through the extant 
correspondence.

Therefore, the formation of a health office did not follow a trajectory 
similar to either Milan or Venice. This can be explained through a number of 
factors, not least the size of Mantua and its state when compared with the 
Milanese territory or the Veneto. The role the Gonzaga played in shaping the 
health office and in the development of Mantuan public health practices should 
not be underestimated; even though the surviving documentation can make it 
difficult to determine the personal involvement of the Marchesi and Duke. 
Contrary to the view suggested by Carmichael and others, that the Gonzaga 
implemented arbitrary and uncounseled legislation contrary to medical opinion, 
they engaged with and encouraged discussion and debate about the disease and 
how best to prevent it or fight it. In the late fifteenth century Carlo Agnelli 
reported to Ludovico Gonzaga almost daily and while he did not discuss the 
causative mechanisms of the disease, Agnelli exercised some initiative in the 
creation of counter plague measures; such as organising points in the city where 
grain could be sold with the least possible threat to the health of the 
inhabitants. Increasingly in the sixteenth century health officials were in a 
position to argue, defend and propose the most effective counter measures, and
demonstrated an ingenuity and influence that Agnelli lacked. They achieved this through consultation with various people including merchants and doctors. In 1576 the impermanence of the office led the Conservatori to rely upon Duke Guglielmo to support them when conflicts arose. As we have seen manifest most dramatically in the appropriation of monastic buildings for lazaretti and also in long running disputes with the College of Doctors over the supply of doctors and their treatment methods. One possible and interesting comparative would be to examine how the Gonzaga influenced the public health practices in Monferrato which became part of the Mantuan state in the 1530’s.

The lack of a permanent health office with a core of officials with defined lines of authority, such as the Venetian Provveditori, also fundamentally shaped the organisation and development of public health practices in Mantua. The central theme of this discussion has been Mantuan responses to plague as evidenced through the actions of the health officials. We have seen that other lay corporations, such as confraternities, and institutions such as the city’s hospitals were key participants both practical and symbolic ways, and this is one area that deserves further investigation. The role played by the city’s confraternities in 1576 would appear to be unusual when compared with other areas of northern Italy. This is perhaps due to the Gonzaga Dukes’ influence over lay religious life in Mantua, as Paul Murphy has argued. Nonetheless, broader questions remain: such as what longer term impact did participation in public health concerns have for the city’s confraternities? In his chronicle Vigilio wrote that the Company of San Rocco was established in September 1576 in the church of Ogni Santi, in the midst of the epidemic. This confraternity did not play a visible role in the activities of the health office, however, it would be interesting to explore the arrival and, if possible, work of this group in Mantua.

982 Vigilio, La insalata, p. 51.
We have seen that the city’s hospitals were used by plague victims as a source of healthcare, and also by health officials in the late fifteenth and early sixteenth centuries. There is evidence that in 1463 and 1468 the smaller neighbourhood hospitals were still used by the Mantovani, as Carlo Agnelli reported the infection of patients and hospital workers in his letters. By the 1527 epidemic it appears the Mantovani used the one central hospital, which again became infected by plague patients. A study of the part the city’s hospitals played in the fight against plague would be a welcome addition to our knowledge of the Mantuan health sphere more broadly.

Kristy Bowers has argued for Seville local officials were co-opted into working for the health office which provided an important link for the community and as we have seen similarities can be found in Mantua. Participation of the individual or community tends to be underplayed in discussions on the enforcement of plague legislation. The cases explored above, including the evidence given by neighbours to determine plague deaths, reports on people who transgressed regulations, and the requests made collectively by various groups, demonstrate that health officials were dependent on contributions made by the community in a number of ways. Again this is most striking during the 1576 epidemic. The confraternities of the city responded to the need to care for the poor who returned from the lazaretto and in doing so provided what must have been an edifying spectacle as the convalescents were processed through the city. Another aspect that confirms the change from previous epidemics is the language and arguments the Conservatori used to persuade others to consent to their requests; rather than the nests of plague described by Agnelli or the Hydra-like pestilence in 1506, the Conservatori made strong comparisons with war and duty to the homeland.

Discussions and consultations were also important to the development of counter plague strategies. With each plague epidemic health officials sought out
the best and most efficacious remedies. Thus by 1576, as we have seen in the documents produced by the Conservatori, their public health plans were an amalgam of previous experience drawn from the epidemics in 1506 and 1528, of contemporary local success stories and were dependent upon cross community participation. Therefore, when we speak of an Italian model of public health we must be careful not to assume health offices were a rigid and unbending ‘expression of the authority of the central administration.’ The Mantuan health office was much more that an expression of the central state. It may appear to have been somewhat fractured when compared with Venice and Milan, however, in its various formats the Mantuan health office was a vital cog in northern Italy in the fight against plague.
Appendices

Appendix 1. The Italian States, 1559

(source: C.F. Black, Early Modern Italy: A Social History (London, 2001))
Appendix 2. The Mantuan State in Northern Italy

(source: D. S. Chambers and T. Dean, Clean Hands, Rough Justice: An Investigating Magistrate in Renaissance Italy (Ann Arbor, 1997))
Appendix 3. Neighbourhoods, parishes and notable buildings in Mantua

Appendix 4. Map of Mapello in Relation to Mantua

(Source: D. Ferrari ed., Mantova nelle stampe: trecentottanta carte, piante, e vedute del territorio mantovano (Brescia, 1985), no.326)
Appendix 5. Map of Mantua, 1575

(‘Mantua ad vivum delineata’ 1575 in Civitates orbis terrarum, Georg Braun and Frans Hogenberg (1575))
Bibliography

Archives

Archivio di Stato, Bologna
Assunteria di Sanità
Bandi forestieri and Bandi Bolognese

Archivio di Stato, Mantua
Archivio Gonzaga
Serie F. II. 8 Lettere ai Gonzaga da Mantova e paesi dello stato.
Serie G. Affari di Polizia III. Affari di Sanità
Magistrature di Sanità
Archivio Notarile

Archivio di Stato, Milan
Atti di Governo,
Sanità parte antica, numero 7, Gridi esterni

Archivio di Stato, Turin
Archivio Camerale, Monferrato

Printed Sources
Amadei, Federigo, *Cronaca universale della città di Mantova* [1737], eds. G. Amadei, E. Marani and G. Praticò (Mantova, 1954-6), vols. 1 and 2


Donesmondi, Ippolito, *Dell’historia ecclesiastica di Mantova* (Mantua, 1612)


Schivenoglia, Andrea, *Cronaca di Mantova dal 1445 al 1484*, trans. and annotated by C. D’Arco (Mantua, 1857)

Susio, Giovanni Battista, *Libro del conoscere la pestilenza, doue si mostra che in Mantoua non è stato male di simil sorte l’anno M.D.LXXIV ne s’è ragioneuolmente potuto predire, che ui debba essere la seguente primauera* (Mantova, 1576)


Vigilio, Giovanni Battista, *La insalata cronaca Mantovana dal 1561 al 1602*, eds. C. Mozzarelli and D. Ferrari (Mantua, 1992)
Secondary Sources

Albini, G., *Guerra, Fame, Peste: crisi di mortalità e sistema sanitario nella Lombardia tardomedioevale* (Bologna, 1982)


Arrivabene, F., *Dizionario mantovano-italiano* (Mantua, 1891)

Baldasso, R., ‘Function and Epidemiology in Filarete’s Ospedale Maggiore’ in *The Medieval Hospital and Medical Practice*, ed. B. S. Bowers (Ashgate, 2007), pp. 107-20


Belfanti, C. M., ‘Mantova e la peste del 1575-76: problemi economici e condizionamenti demografici’ in *Studi Mantovani* (1981), pp. 57-68


Biow, D., *Doctors, Ambassadors, Secretaries: humanism and professions in Renaissance Italy* (London, c2002)

- *The culture of cleanliness in Renaissance Italy* (London, 2006)


- ‘The development of Confraternity Studies Over the Past Thirty Years’ in *The Politics of Ritual Kinship Confraternities and Social Order in Early Modern Italy*, ed. N. Terpstra (Cambridge, 1999), pp. 9-29
- *Early Modern Italy: a social history* (London, 2001)


Campbell, A., *The Black Death and Men of Learning* (New York, 1931)

Capasso, G., ‘L’Officio della Sanità di Monza la peste degli anni 1576-7’ in *Archivio storico lombardo*, vol. 33 (1906), pp. 299-330

- Plague and Poor in Renaissance Florence (Cambridge, 1986)


Cavallo, S., Charity and Power in Early Modern Italy: Benefactors and their motives in Turin, 1541-1789 (Cambridge, 1995)

- Artisans of the body in early modern Italy: identities, families and masculinities (Manchester, 2007)


Chambers, D. S., and Dean, T., Clean Hands and Rough Justice: An Investigating Magistrate in Renaissance Italy (Ann Arbor, 1997)

Cherubini, F., Vocabolario Mantovano-Italiano (Milano, 1827)


Christensen, P., ‘“In These Perilous Times”: Plague and Plague Policies in Early Modern Denmark’ in Medical History, vol. 47, no. 4 (2003), pp. 413-50


Cipolla, C. M., Cristofano and the Plague; a study of the history of Public Health in the age of Galileo (London, 1973)


- Fighting the plague in seventeenth-century Italy (Madison, c.1981)

- Miasmas and Disease: public health and the environment in the pre-industrial age, trans. E. Potter (London, 1982)

Clouse, M. L., Medicine, Government and Public Health in Philip II’s Spain (Farnham, 2011)

Cockram, S., ‘Epistolary Masks: Self-Presentation and Dissimulation in the Letters of Isabella d’Este’ in *Italian Studies*, vol. 64, no.1 (2009), pp. 20-37

- *Isabella d’Este and Francesco Gonzaga: power sharing at the Italian Renaissance court* (Ashgate, 2013)


- with Alfani, G., ‘Households and Plague in Early Modern Italy’ in *Journal of Interdisciplinary History*, vol. 38 (2007), pp. 177-205


Davari, S., *Notizie storiche topografiche della città di Mantova nei secoli XIII, XIV e XV: Descrizione dello storico palazzo Te*, reprint from 1903 (Bologna, 2009)

Dean, T., ‘Ferrara and Mantua’ in *The Italian Renaissance State*, eds. A. Gamberini and I. Lazzarini (Cambridge, 2012), pp. 112-21

Decio, C., *La peste in Milano nell’anno 1451 e il primo lazzaretto a Cusago: appunti storici e note inedite tratte degli archive milanese* (Milan, 1900)


Eamon, W., ‘Cannibalism and Contagion: Framing Syphilis in Counter-Reformation Italy’ in *Early Science and Medicine*, vol. 3 (1994), pp. 1-31


Geltner, G., ‘Public Health and the Pre-Modern City: A Research Agenda’ in *History Compass*, vol. 10, no. 3 (2012), pp. 231-245


Gentilcore, D., ‘Methods and Approaches in the Social History of the Counter-Reformation in Italy’ in *Social History*, vol. 17 (1992), pp. 73-98.

- ‘“All that Pertains to Medicine”: Protomediici and Protomedicati in Early Modern Italy’ in *Medical History*, vol. 38, no. 2 (1994), pp. 121-42

- ‘Charlatans, Mountebacks and Other Similar People’: The Regulation and Role of Itinerant Practitioners in Early Modern Italy’ in *Social History*, vol. 20, no. 3 (1995), pp. 297-314

- *Healers and Healing in Early Modern Italy* (Manchester, 1998)

- ‘Charlatans, the Regulated Marketplace and the Treatment of Venereal Disease in Italy’ in *Sins of the Flesh: Responding to Sexual Disease in Early Modern Europe*, ed. K. Siena (Toronto, 2005), pp. 57-80

- *Medical Charlatanism in Early Modern Italy* (Oxford, 2006)


- ‘Healing the body and saving the soul: hospitals in Renaissance Florence’ in Renaissance Studies, vol. 15, no. 2 (2001), pp. 188-216
- ‘Historians and Plagues in Pre-Industrial Italy over the “longue durée”’, in History and Philosophy of the Life Sciences, vol. 25, no. 4 (2003), pp. 481-99
- The Renaissance hospital: healing the body and healing the soul (London, 2006)


Horodowich, E., ‘Civic Identity and the Control of Blasphemy in Sixteenth-Century Venice’ in Past and Present, vol. 181 (2003), pp. 3-34

Horrox, R., (trans. and ed.) The Black Death (Manchester, 1994)


La Cava, F., La peste di S. Carlo: Note storico-Mediche sulla peste del 1576 (Milan, 1945)


Lazzarini, I., Gerarchie sociali e spazi urbani a Mantova dal Comune al Signoria gonzaghesca (Pisa, 1996)

- Fra un principe e altri stati: relazioni di potere e forme di servizio a Mantova nell’età di Ludovico Gonzaga (Rome, 1996)


- Il linguaggio del territorio fra principe e comunità: il giuramento di fedeltà a Federico Gonzaga (Mantova 1479), Reti Medievali E-Book, vol. 13 (Florence, 2009)

- “Cives vel subditi”: modelli principeschi e linguaggio dei sudditi nei carteggi interni (Mantova, XV secolo) in Linguaggi politici nell’Italia del Rinascimento atti del convegno, Pisa, 9-11 novembre 2006, eds. A Gamberini and G. Petralia (Rome, 2007), pp. 89-112

Malacarne, G., *I Gonzaga di Mantova; una stirpe per una capitale europea* (Modena, 2004-2010), vols. I and III


-‘Confraternity and Community: Mobilizing the Sacred in Times and Plague’ in *Confraternities and the Visual Arts in Renaissance Italy: ritual, spectacle and image*, eds. B. Wisch and D. Cole Ahl (Cambridge, c2000), pp. 20-45


Muir, E., Civic Ritual in Renaissance Venice (Princeton, 1981)


Murphy, Paul V., ‘Politics, Piety and Reform: Lay Religiosity in Sixteenth-Century Mantua’ in Confraternities and Catholic Reform in Italy, France and Spain, eds. J. P. Donnelly and M. W. Maher, Sixteenth Century Essays and Studies, vol. 44 (Truman State University, 1999), pp. 45-54


- ‘L’Ufficio delle bollette e il controllo sanitario a Mantova nei secoli XV-XVI’ in *Civiltà Mantovana*, no.5 (1984), pp. 11-26


- ‘The Seeds of Disease: an explanation of contagion and infection from the Greeks to the Renaissance’ in *Medical History*, vol. 27 (1983), pp. 1-34
- ‘The Reception of Fracastoro’s Theory of Contagion: The Seed that Fell Among Thorns?’ in *Osiris*, 2nd series, vol. 6 (1990), pp. 196-234
- ‘It’s the Patient’s Fault’: Simone Simoni and the Plague of Leipzig, 1575’ in *Intellectual History Review*, vol. 18, no. 1 (2008), pp. 5-13


- ‘Girolamo Mercuriale and the Plague of Venice’ in Girolamo Mercuriale: medicina e cultura nell’Europa del Cinquecento : atti del convegno ‘Girolamo Mercuriale e lo spazio scientifico e culturale del Cinquecento (Forlì, 8-11 novembre 2006), eds. A. Arcangeli and V. Nutton (Florence, 2008), pp. 51-65


- Crimine e giustizia in tempo di peste nell’Europa moderna (Rome, 1991)


Preto, P., *Peste e società a Venezia nel 1576* (Vicenza, 1978)
- *Epidemia, Paura e Politica nell’Italia Moderna* (Bari, 1987)

- ‘Support and Redeem: charity and poor relief in Italian Cities from the fourteenth century to the seventeenth century’ in *Continuity and Change*, vol. 2 (1988), pp. 177-208


Salzberg, R., ‘In the mouths of charlatans. Street performers and the dissemination of pamphlets in Renaissance Italy’ in *Renaissance Studies*, vol. 24, no. 5 (2010), pp. 638-53


Signorini, R., ‘Hozi...Cadette il Naso a Virgilio’ in *Journal of the Warburg and Courtauld Institutes*, vol. 41 (1978), pp. 320-1


- ‘History, Antiquarianism , and Medicine: The Case of Girolamo Mercuriale’ in *Journal of the History of Ideas*, vol. 64, no. 2 (2003), pp. 231-51
- ‘Oratory and Rhetoric in Renaissance Medicine’ in *Journal of the History of Ideas*, vol. 65, no. 2 (2004), pp. 191-211
- *History, medicine, and the traditions of Renaissance learning* (Ann Arbor, c2007)


- ‘Responses to Plague in Early Modern Europe: the implications of public health’ in *Social Research*, vol. 55, no. 3 (1988), pp. 433-54


- *Lost Girls: Sex and Death in Renaissance Florence* (Baltimore, 2010)


Thorndike, L., ‘Sanitation, Baths, and Street-Cleaning in the Middle Ages and Renaissance, in *Speculum*, vol. 3, no.2 (1928), pp. 192-203

*Venezia e le peste 1348-1797*, Comune di Venezia Assessorato alla cultura e belle arti (Venice, 1979)


*Information and communication in Venice: rethinking early modern politics* (Oxford, 2007)


