

ALL SAINTS
ROYAL HOSPITAL:
LISBON AND PUBLIC HEALTH



SANTA CASA
Misericórdia de Lisboa

omnium
sanctorum

specifications

Research project

Hospital Real de Todos-os-Santos: a cidade e a saúde
[All Saints Royal Hospital: the City and Public Health]

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EXISTENCES AND PROVISIONS

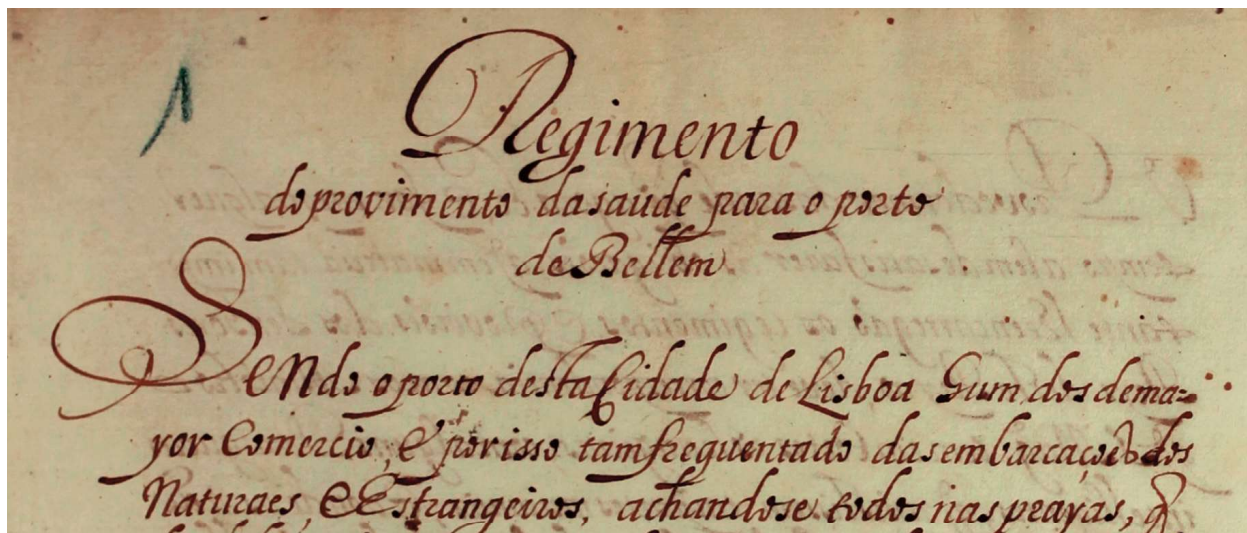
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PRESERVING
HEALTH
IN LISBON



THE REGULATION OF PRACTICES AND OFFICERS OF THE CASA DA SAÚDE (16TH-17TH CENTURIES)

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Public health is essential for social welfare. Therefore, faced with the threat of an epidemic, the authorities spared no effort to avoid the harmful consequences of this evil. Early on, the kings decreed, and the municipality of Lisbon regulated, occasional and rudimentary public health measures against epidemic outbreaks, and expanded specific and rigorous practices aimed at their implementation. Since the 16th century, hygienic measures were promulgated, with greater rigour and policing of health prevention, demonstrating knowledge of what was happening throughout Europe in this regard, and indicating a notable degree of technical and scientific progress.

In 1526, King D. João III received from the *desembargador* [appellate judge] Pedro Vaz, his envoy to Italy (Abreu (b), 2018, p. 82), a report with health instructions on the measures applied in the Italian cities where great epidemics broke out and that, according to him, should be applied in the Kingdom of Portugal, given their demonstrated efficiency in containing contagions or “para se remediar o damno da dita pestilencia” [to remedy the damage of said pestilence] AML, *Livro de regimentos e posturas da Casa da Saúde*, f. 28v.). The King decided to give him full powers in order to carry out these sanitary practices and employ the necessary and competent officers, in the most sensitive places, to “se remediar o mal, como para poder a gente estar nelles, sem manifesto perigo” [remedy the evil, so people can live there, without manifest danger] (AML, *Livro de regimentos e posturas da Casa da Saúde*, f. 31).

The *Regimento que leva Pedro Vaz sobre o que toca ao bem da Saúde de Lisboa* [rules of procedure of Pedro Vaz regarding the health welfare of Lisbon], dated September 27, 1526, issued in Tomar (AML, *Livro dos Regimentos e posturas da Casa da Saúde*, fs. 31-41v.), presents thirty-five items, and constitutes “o mais antigo regimento do serviço de saúde, de que temos conhecimento” [the oldest health service rules of which we are aware] (Oliveira, 1906, vol. XV, p. 327). It begins by defining the election of one or three health *provedores* [purveyor], with enough private wealth to face the expenses inherent to the proper functioning of their office, as well as the appointment of a clerk who would work with them. Pedro Vaz justified the choice of a variable number of *provedores* with the fact that “sendo dois, e desvairados pareceres, muitas vezes acontece damnar mais sua discordia, do que aproveitão seus officios” [if there were two, and divergent opinions, often discord does more damage

than any benefit from their work], predicting the future implications of discord between only two opinions to address such a great responsibility (AML, *Livro de regimentos e posturas da Casa da Saúde*, f. 31v.). The *provedores* were given all the authority within their jurisdiction to proceed in an appropriate manner to prevent or control outbreaks of plague. The basis of this work was organized and stipulated according to the following elements: the conditions of the house that received patients and convalescents and the procedure with clothes and cleaning; the reasons and circumstances regarding the supply of quality items for this house; specific orders for the *meirinbo* [judicial officer], *beleguins* [bailiff], jailer and minister of Justice, “*todos da peste, os quaes usam somente de tal officio nos impedidos*” [all for the plague, who will use this office only for the sick] (AML, *Livro de regimentos e posturas da Casa da Saúde*, f. 33); and the obligation to mark with a *French cross* all the doors of houses suspected of disease. Items VII and VIII of the *Regimento* relate to the election of an officer in each parish - the *cabeça da saúde* [head of health] - and established their authority to supervise and inspect everything pertaining to public health in their jurisdiction. The following two items (IX and X) refer to the selection and functions of a physician named *físico de exame* [examining physician], who would accompany the *provedor* in his inspection of private homes and shops in the city, as well as how to proceed in these examinations when disease was detected. The *Regimento* defines the sanitary measures to be taken with the sick, according to social position, and regarding houses, clothes, cleaning and contact with family or neighbours, indicating the obligations of the different health officials in these processes; the danger represented by “*os lugares publicos de mulheres*” [the public places with women] because “*huma destas mulheres com que acerta de ter partes hum homem impedido, pega o mal a vinte sem ella adoecer*” [one such woman that happens to contact a sick man will spread the illness to twenty without falling ill herself] (AML, *Livro de regimentos e posturas da Casa da Saúde*, fs. 38-38v.); measures to be applied in fairs where used clothing was sold; procedures for congregations and clerics, regarding the moral and spiritual action with the sick; the mandatory daily reports by the *cabeças da saúde* for general and higher information about the state of the situation in each parish. The last items indicate the best time of the day to carry the sick or bury the dead, as well as the procedures to be followed, according to practices recommended in Italy; item XXXI has an extensive treatment of the proper attitude towards cleaning public streets, particularly in front of the houses marked with a cross, also comparing with cleaning in Italian cities, reinforcing that care with public hygiene should be the same during normal times of health; item XXXII mentions awards for overtime during epidemics payable to the “*Ministros da peste que são Fisicos, Sangradores, Espritaleiros, e Confessores, e os Provedores, Cabeças das Freguesias, Fisico do Exame, e Escrivão*” [Ministers of the plague, who are Physicians, Bleeders, Hospitalers, and Confessors, and the Purveyor, Heads of Health of Parishes, Examining Physicians and Clerk] (AML, *Livro de regimentos e posturas da Casa da Saúde*, fs. 40-40v.). The three final items define the work of *provedores*, parish *cabeças de saúde*, physicians and clerk, in times when epidemics have lost their strength, and refers the concern, in milder times, to seek information from foreign merchants and ship commanders about the existence of epidemic outbreaks elsewhere.

The charter that accompanies the *Regimento* enunciates, in fourteen items, the penalties if sanitary orders are unfulfilled, for both health officials and civilians, from flogging in the public square to exile of seven or ten years in the island of S. Tomé, also including the payment of fines. These punishments were stipulated according to the culprit's social position and the gravity of his act (AML, *Livro de regimentos e posturas da Casa da Saúde*, fs. 41v.-43). In a letter sent to the city councillors of Lisbon, the king ordered municipal measures implementing these norms, with special attention to the provisions related to cleaning and hygiene. In response to item III, the king demanded that the house for the sick be established “*que tenha agoa que he a principal cousa que convem, e que seja o mais perto da Cidade, e o mais apartado da conversação da gente*” [that has water, which is the main convenient thing, and that is close to the city and furthest from gatherings of people] (*Collecção dos Regimentos ...*, 1819, p. 55), suggesting the palace of the Estáus, as it was a large building with many rooms, water tanks, easy to isolate in its Rossio access and near the burial grounds of São Roque. If the council did not agree, the king would provide his palace in Santos, a walled location, also with plenty of water and easy passage through the Ribeira [riverfront area]¹.

In a first phase, twenty beds were established for the sick. The officers and assistants who were

recommended join the health service were: a *meirinho* with six helpers, a physician, a surgeon, a bleeder, two clergymen, a jailer, a minister of Justice, two *cristaleiras* [women who administered enemas], four washers, four women for various tasks and eight men to service the sick and for burials, and a *tabelião* [notary] for the wills. The payment to these officers and servants would come from the City Council of Lisbon and, during periods free from illness, the city councillors had jurisdiction to dismiss this personnel, as they considered most appropriate (*Collecção dos Regimentos...*, 1819, p. 56).

A clear commitment to equip the authorities with modern mechanisms against epidemic scourges was thus beginning to emerge. Later, in 1579, a new outbreak of plague broke out in Lisbon, forcing the city council to take exceptional measures, while warning the monarch of the urgent need to establish health rules that should be enforced continuously. The City Council sent a proposal on hygiene provisions and positions, to best implement the sanitary prevention measures (AML, *Livro 1º do Provimto da Saúde*, f. 206).

Thus, relying on future prevention, Cardinal King D. Henrique, on January 26, 1580, issued a charter with legal force ordering the immediate implementation of the *Regimento do Provimto da Saude e Cura dos Enfermos* [rules for the provision of health and treatment of the sick], which had been presented by the City Council, based on the experience with recent fatalities, in order to provide uniform procedural guidelines to all officers in the service of defending public health, but, in particular, the “fisiquos, sorogiois, samgradores, medicos, cabeças de fregesias, menistros dos esquifes, coveiros, compradores das cousas nesarias a saude, guardas da caza da saude, lavamdeiras da caza da saude, meirinhos, cristaleiras, barbeiros” [physicians, surgeons, bleeders, doctors, parish heads of health, coffin carriers, gravediggers, buyers of the necessary things for health, guards in the house of health, washers in the house of health, judicial officers, women providing enemas, barbers] and even to the patients themselves. In addition to these indications, penalties were established for each category, if they did not comply with the rules of procedure (AML, *Livro 1º do Provimto da Saúde*, f. 214).

In 1680, the charter with the *Regimento da Saude que fez o Senado da Camara em tempo do Senhor Rei Dom João o IV* [health rules by the city senate in the time of King João IV] was confirmed. This resulted from a question the king put to the City Council about “se seria melhor curarem se os doentes do ditto mal em suas casas, que na Casa da Saude pois a Cidade não podia supprir a despeza que se fazia, e o mal se hia tanto dilatando” [whether it would be better to heal the sick in their houses, rather than a house of health, as the city couldn’t cover the cost, and the disease would spread] (AML, *Livro de regimentos e posturas da Casa da Saúde*, f. 44; *Collecção dos Regimentos...*, 1819, p. 57), in order to combine the indispensable treatment with a reduction of costs, and best use the necessary spending. Composed of sixteen items, this *Regimento* began by ordering an increase in the number of physicians and surgeons, and that patients be charged a certain amount for services, because in the new proposed format “os doentes que tiverem poses, e maneira para serem curados em sua casa o poderão fazer com licença do Provedor-mór” [patients who had means, and conditions to be cured at home, could do so with authorization from the chief health officer] (AML, *Livro de regimentos e posturas da Casa da Saúde*, f. 45).

The expenses increased considerably as each private house affected had a physician or surgeon, and a bleeder at their exclusive service, that is, they “não poderão curar outros doentes neste tempo, nem communicar com outras pessoas desimpedidas” [will not be able to cure other patients at this time, nor communicate with other sick patients] (AML, *Livro de regimentos e posturas da Casa da Saúde*, f. 44v.). These health officers, because they were in direct contact with patients, had to obey strict hygiene standards and wear an identification badge whenever they went out.

The remaining items refer to the rules of procedure of the guards of the Health Office, parish *cabeças de saúde*,

¹ Another hospital facility for hospitalization of the infected in the city of Lisbon was the *Casa de Saúde* [house of health] of Alcântara (AML, *Livro 1º do Provimto da Saúde*, fs. 65 and 68).

meirinhos, gravediggers, washers, and other servants, in relation to the chief health officer and in their communication with the declared patients. The rules also explicitly state the procedures for washing and disinfecting clothes and objects (AML, *Livro de regimentos e posturas da Casa da Saúde*, f. 47v.; *Collecção dos Regimentos...*, 1819, pp. 60-63).

In practice, these *regimentos* are similar regarding the care when contacting people and things. As regards the administrative and management functions of service personnel, they are also similar in some respects, but extend or divide responsibilities differently over the successive reigns, seeking more effective procedures.

In this *regimento* from the time of King D. João IV, we find the *provedor*, called *provedor-mor da saúde* [chief health officer], the heads of parish, called parish *cabeças da saúde*, the *meirinho* specified as a health *meirinho*², and a reference to a single priest, while the *regimento* of Petro Vaz mentioned two clergymen who divided the liturgical and assistance tasks. The eight male servants now appear designated as gravediggers, bleeders, and purchasers of health items, as they were already referred in the 1580 *regimento*.

On August 4, 1668, the monarch issued a decree in which he named the chief health officer as *provedor-mor da Saúde da Corte e do Reino* [chief health officer of the court and realm], extending his responsibility and authority to “*todos os Officios da Saude das terras do Reino, e Conquistas, e que as Camaras, e Justiças dellas se não intromettão na jurisdição da Saude, mas executem as Ordens que do Provedor-mor lhe forem dirigidas*” [all the health offices in the kingdom and conquests, and that the city councils and their Justices shall not interfere in the health jurisdiction, but should execute the orders of the chief health officer] (*Collecção dos Regimentos...*, 1819, p. 78). In this way, the *provedor-mor da saúde* saw his jurisdiction extended to the whole kingdom.

Under D. Pedro II, the *Regimento que se hade observar succedendo haver peste (de que Deus nos livre) em algum Reyno, ou Provincia confinante com Portugal* [rules to be observed if (God forbid) there is a plague in any kingdom or province bordering Portugal] was approved. With fifteen chapters, it focuses once again on responsibilities, in this case of the chief guard, assistant guards and flag guard. As these rules were specific for land and river borders, the main responsibility fell precisely upon these officers to take action on the ground (AML, *Livro 2º de Consultas e Decretos de D. João V do Senado Oriental*, fs. 10-14v.; *Livro de regimentos e posturas da Casa da Saúde*, fs. 15v.-22). While the *provedor-mor* was the highest officer on health issues in the Kingdom, based in Lisbon, the chief guards were his appointed representatives in the country's various municipalities, with more than one in the border cities and towns, both inland and on the coast, from “Castro Marim que está na foz do Guadiana, ate Caminha na foz do Minho” [Castro Marim at the mouth of the Guadiana, to Caminha at the mouth of the Minho], in case of plague outbreaks (AML, *Livro 2º de Consultas e Decretos de D. João V do Senado Oriental*, f. 10). This *regimento* established their powers “*para que se posa ter toda a vigilancia, evitando que passe pessoa alguma para este reyno*” [so there will be full vigilance, avoiding that any person pass into this kingdom], authorizing them, in chapter II, to plan and execute a defensive strategy for the placement of armed guards at the city gates, and that transgressors “*lhes farão logo tiros, ate que com effeito os matem*” [will be shot until killed], if they do not comply with the orders of forbidden terrain (AML, *Livro 2º de Consultas e Decretos de D. João V do Senado Oriental*, f. 10v.)³. Since the efficiency of the rules relied on the management and obedience of the surveillance groups, these chief guards had to be men of honour, native to their locality and remain under the exclusive command of the chief health officer.

In these localities with measures restricting movement of both natives and foreigners, in addition to public announcements about the location's sanitary condition, there was a security perimeter marked by flags around the town. Next to the flags was a surveillance post that served to check health passports, documents that authorized,

² These titles were established by the charter of January 7, 1571, within the framework of the City Council's new organization, but were only established as such in this *Regimento* of King D. João IV.

³ These guards were authorized to carry arms, be order of King D. Pedro II, on February 7, 1695, the official date of confirmation of this *regimento*. This must have been effective, because it was later reiterated by King D. João V, in 1707, when he reconfirmed the health *regimentos*, specifying all firearms could be used, except pistols.

or not, the entry into the village, mainly for merchants, noblemen and clergymen. Chapters IV and V determined that these safe-conducts issued by the City Council - which had the same goal as the letters of health for ships⁴, but were more specific in their description of the carrier's physical appearance -, followed specific rules as to the type of letter and paper used, sheet measurements and their price. Only the municipal clerks were allowed to print and distribute these passports, as a certificate of authenticity (AML, *Livro 2º de Consultas e Decretos de D. João V do Senado Oriental*, fs. 11-11v).

There were also special procedures regarding mail sent by land, and a different attitude regarding mail sent by sea. Always towards prevention, chapter XIV located the point of collection and shipping of correspondence on the bridge of Badajoz, halfway between Lisbon and Madrid “e se ordena que o estafeta que vae todas as semanas a Badajoz a receber as cartas que o estafeta de Madrid traz, não entrara na cidade, e chegara ate junto da ponte de Badajoz, em pouca distancia, ficando da parte de Portugal, e no fim da ponte o estafeta de Madrid tirara todas as cartas dos saccos e as pora em terra e seram logo todas passadas por vinagre e por fogo” [and it was ordered that the messenger, who every week goes to Badajoz to receive the letters brought by the messenger from Madrid, does not enter the city, and will stop a short distance from the Badajoz bridge, on the Portuguese side, and the messenger from Madrid at the end of the bridge will take all letters from the bags and lay them on the ground and they will be passed by vinegar and fire]; after this disinfection and meticulous fulfilment of the hygienic rules, each messenger would go on his way, while the messenger in Portugal was accompanied to Elvas by two guards on horseback for greater security (AML, *Livro 2º de Consultas e Decretos de D. João V do Senado Oriental*, f. 13).

Chapters VI to XIII refer to the special procedures of night and day surveillance over the river movement of ships on both banks of the Tagus, regarding loading and unloading in Cais of Santarém, Ribeira and Terreiro do Paço. These measures had provisions similar to those of port towns on the border with Spain, with due differences for the capital (AML, *Livro 2º de Consultas e Decretos de D. João V do Senado Oriental*, fs. 11v.-13).

The first proposal of the *Regimento do provimento da saude para o porto de Bellem* [sanitary rules of procedure for the Port of Belem], prepared by the Lisbon City Council and presented to D. Pedro II in 1694, demonstrated a need to establish stricter and proper standards for the installation, in the capital's port, of a maritime sanitary cordon on an international scale. This proposal was confirmed in February 1695 and became final in December 1707 with the confirmation by D. João V (AML, *Livro 2º de Consultas e Decretos de D. João V do Senado Oriental*, fs. 13v.-14). The Health Office of Belem's *regimento* had twenty-two chapters, beginning with the basis for efficiency: rules for the health personnel. The *provedor-mor da saúde* remained the highest health officer in the Court and Realm⁵. He coordinated communication with Portuguese ambassadors, merchants, and tradesmen in other countries, as well as customs officials and other port authorities where ships would stop to load goods or passengers. He could thus obtain information as quickly and effectively as possible, and trigger prevention measures in case of the slightest suspicion of contagion. This measure was one of the most important to guarantee no source of information was neglected, because if the slightest symptom of disease arose in the ports where people and goods arrived, the first reaction was concealment, so business would not be interrupted.

Upon notice of any city or port with an outbreak or suspicion of contagion, the *provedor-mor* should inform all other ports in the kingdom⁶, immediately ordering the implementation of surveillance and prevention measures. If these precautions were delayed and if any strange disease had already manifested, the urgent first measures were triggered. The Lisbon Senate was informed, which in turn informed the king, and jointly they determined the specific health

⁴ *Letters of health*, a health passport that all ship captains or commanders had to possess and show when requested, effectively a health certificate from the ports where the ship had docked, with declaration by those port authorities, taking responsibility that no one was infected on board. Passengers also had their personal letter of health.

⁵ At the beginning of a new year and usually attributed at random, the area of health fell to one of the city councillors appointed to the City Senate, who was thus named *Provedor-mor da Saúde da Corte e do Reino* (AML, *Livro 1º do Provedimento da Saúde*, f. 180).

⁶ This procedure was also contemplated in item XXXV of the Pedro Vaz instructions and in Chapter I of the *regimento* against the 1693 plague (AML, *Livro 2º de Consultas e Decretos de D. João V do Senado Oriental*, f. 10). *Provedor-mor da Saúde da Corte e do Reino* (AML, *Livro 1º do Provedimento da Saúde*, f. 180).

rules according to the locality and severity. If necessary, the *provedor-mor* would go to the site to assess the best strategy to be applied.

Another officer of great importance was the *guarda-mor da saúde* [chief health guard], who was responsible for all the practical work of prevention and surveillance. As one of the front-line health officials, his importance was gradually extended in the various *regimentos* and, in the 1694 *regimento* the office reached its maximum position: the administration and total control of the Health Office when the *provedor-mor* was absent (AML, *Livro 2º de Consultas e Decretos de D. João V do Senado Oriental*, fs. 1v.-2). Appointed by the *provedor-mor*, he should be a reputable person, resident in Belém, who would not leave his post without notifying the *provedor-mor* or the Senate with sufficient advance so a substitute could be appointed. As was already customary in times of crisis and depending on the severity, two or four additional temporary guards could be appointed, divided between assistant guards and flag guards. This senior officer also received petitions, usually complaints about tardiness in resolving issues, and would ascertain the veracity of the accusations and issue a dispatch, giving his opinion to the *provedor-mor*. He also had to verify the letters of health, very susceptible to falsification, hence the great attention given to any irregularities. When an anomaly was detected, a process began, sometimes very lengthy, which forced the ship commanders, merchants, tradesmen and even ambassadors, to send numerous requests. These initiated a legal procedure by the *provedor-mor*, which was then subject to the Senate's analysis.

Another relevant officer in this *Regimento* was the health clerk, also residing in Belém, who gave continuous assistance to the Health Office (AML, *Livro 2º de Consultas e Decretos de D. João V do Senado Oriental*, fs. 2-2v.). His task was to zeal for the *regimento*, maintain it in good condition and available for consultation at any time. He was in charge of keeping all the instruments and equipment used in the disinfection of letters of health and other suspicious papers in order and ready for use. Before being sent to the *provedor-mor* to initiate the penalty process, suspicious letters went through “depuração artesanal” [artisanal purification]: “o que fará tendo huma cana comprida, ou vara aberta na ponta, e nella se meterão as cartas, passaportes e quaesquer outros papeis de suspeita, e se banharão em vinagre, e logo se defumarão em hum brazeiro, e com bom fogo se enxugarão, e sem esta dilligencia não receberá papel algum de parte suspeitosa” [which he will do using a long cane or stick open at the tip, where the letters, passports and any other suspected papers will be placed, bathed in vinegar, and then smoked over a hearth and dried with a good fire, and without these measures no paper from suspected party will be received] (AML, *Livro 2º de Consultas e Decretos de D. João V do Senado Oriental*, f. 2).

The health clerk had to maintain two books: one to register the chief guard's condemnations and the value of those fines, which was given to the *provedor-mor* at the end of the year, for his supervision and the elaboration of total revenues; and the other to register all suspicious commodities sent for quarantine, with the name of the commander of the ship they came in, the number of volumes, the nature of the cargo and the manufacturer's brand, the day they were retained in Belém, the day they entered confinement, the day they were opened to begin purification by the sun, and which officers were responsible for the confiscated items⁷.

All these procedures were accompanied by the health flag guard, another officer with rules stipulated in chapter IV (AML, *Livro 2º de Consultas e Decretos de D. João V do Senado Oriental*, f. 2v.). The latter was responsible for surveillance over entrance in the Tagus. He reported to the chief guard, if any military or merchant ship was approaching, so that all prevention measures could be prepared for on board sanitary inspection once it anchored. He had to accompany those in charge of the ships to the Belém health house, where they would present the letters of health and make the mandatory trip statements. The flag guard also supervised the detained ships, from the crew's

⁷ In the documentation consulted, there is no reference to a single registry book explaining the operation of the shared bureaucracy between Belém and Trafaria. These two books were a bureaucratic innovation of this *regimento*, as they had not yet been defined with this thoroughness. Item V in the 1526 *Regimento* of Pedro Vaz mentions, regarding the payment of fines, that the clerk “de sua receita e despeza, faça livro diso bem ordenado para dar sua conta (...) e em fim de cada mez lhe assignareis as despezas” [records incomes and expenses in an organized book and at the end of each month will indicate expenses], a book solely for economic control. Items X and XI of the *Regimento*, reconfirmed in 1680, mention a book for recording goods purchased for the Health Office and another to record entry and exit of patients.

permanence on board the quarantined ships to the end of all the sanitary procedures.

The different origins of the crews on foreign ships required another specialty among the health personnel: the interpreters (AML, *Livro 2º de Consultas e Decretos de D. João V do Senado Oriental*, fs. 2v.-3). Obviously of great importance, the professional obligation of these health assistants required an attitude of trust and responsibility above that of any other officer, which was not always observed. In the rules, the interpreters are the only officers who could be fired if they didn't comply with their obligations: “e constando em algum tempo que deixou de a fazer [a tradução] o ditto Interprete alem de perder o officio será castigado com as mais pennas, que parecer ao senado” [and if during some time said interpreter stopped translating, in addition to losing his post he will be punished with addition penalties, as seen fit by the Senate] (AML, *Livro 2º de Consultas e Decretos de D. João V do Senado Oriental*, f. 3). Chosen and appointed by the Senate with prior agreement by the *provedor-mor*, interpreters should have a great knowledge of European languages, especially those most frequently spoken in our ports - English, Italian and French - to translate, explain or comment the declarations and provide information to outsiders, paying close attention to the physiognomy and actions of those questioned, to determine whether they spoke falsely or in good faith. The testimonies were translated for the chief guard who attended the interrogation and issued the declaration summary, which was signed by all present and registered in the appropriate book by the clerk (AML, *Livro 2º de Consultas e Decretos de D. João V do Senado Oriental*, fs. 3-4).

The thorough interrogation process, described in detail in the *regimento*, entailed questioning the captain or commander and, with some exceptions, followed the same criteria for both civilian and military vessels. There were questions regarding the length of the trip; the ports of call; the type of food that had been loaded; if there was communication with other ships and whether there had been exchange of crew; how many people were on board; their ages and sex; if there was anyone sick on board or whether anyone had died during the trip; and several other prudent questions whose aim was to certify there was no danger of contagion. For passenger and freight ships, there were also questions regarding the nature of the cargo and whether any animals were transported. For military ships, there were questions of a military nature and concerning the personal habits of the soldiers.

The statement, signed by the declarant, whose name, nationality, and rank on the ship had already been recorded, was then corroborated by two witnesses, also identified in detail, and heard separately, so that “em quanto depuser cada huma dellas estarão as outras em distancia que não possam saber o que se dis nos depoimentos” [when each is deposed the other is far away so they cannot hear what is being stated]. As secrecy was part of this investigation, the officers under the chief guard had to avoid “que em quanto se estiver neste exame falle pessoa alguma com as da embarcação” [that during this exam, anyone speak with the crew], which remained under surveillance by the guards and anchored near Belém Tower (AML, *Livro 2º de Consultas e Decretos de D. João V do Senado Oriental*, f. 3v.).

No references were found regarding the personal precautions that health professionals should take in these interrogations in case of suspicion. This issue raises doubts and even questions as to the reactions of these officers, faced with such an immediate danger of contagion. We know about the system to purify letters and other papers, but what were the measures of hygiene regarding people: were they all in the same room or were there partitions between them; was there physical contact; were there signs of repulsion or rejection by the agents... These and other similar issues need further study on how these health officers protected themselves in their professional contact with probable elements of contagion. However, the *regimento* itself does indicate precautions after the interrogation, following a prudent and wary procedure.

At the end of the interrogation, the clerk collected the health certificates from everyone on board. The chief guard, present during the session, included an opinion regarding the behaviour demonstrated and, together with the interrogated person's statement, sealed these documents and sent them to the health *provedor-mor*, who took notice, signed, and addressed the Senate so measures could be taken. If there were no suspicions of any kind, after noting and signing, the *provedor-mor* would refer the process to the clerk, who filed the

declaration and report for future consultation, and returned the letters of health to the crew, certified by the Port of Belém, while the chief guard gave the ship order to raise anchor.

In the case of suspicious ships, there were “health visits” by a doctor and surgeon, accompanied by guards: a procedure to ascertain the hygienic conditions on board and the health status of the occupants. When approaching the ship and in case any anomaly was suspected, the officers who had not boarded the ship, would immediately return to Belém beach where they would undress and wash before continuing their work. If they had boarded the ship and disease was declared certain, the guards would remain on board for at least twenty days, a period considered sufficient for the demonstration of any epistemic symptom. Their duties entailed checking the cargo, conferring the invoices, and collecting their tribute, which necessarily implied physical contact with people and goods, placing these inspectors at risk. While on board, they communicated with land through a defined set of signs with flags and lights: during the day, the signal corresponded to a white flag near the main mast; while at night, the captain ordered two shots fired, reinforced with light from a lantern (AML, *Livro 2º de Consultas e Decretos de D. João V do Senado Oriental*, fs. 5-6v.).

In the year 1706, the judge André Freire de Carvalho, city councillor of Lisbon and serving as *provedor-mor da Saúde da Corte e do Reino*, when consulted by King D. Pedro II on November 8, declared the need to renew the old health rules, as they were damaged, and one couldn’t ascertain what certain chapters ordered. He also mentioned that the Senate, confronted daily with diverse health occurrences, proposed elaborating a new *regimento* (AML, *Livro 1º de Consultas e Decretos de D. João V do Senado Oriental*, f. 284).

As this matter took some time to be analysed - perhaps a consequence of the time between the death of King D. Pedro II and King D. João V fully assuming his obligations in the realm, and because the royal resolution requesting the analysis of the old rules was only issued in October 1707, on November 23 -, the Senate sent a new consultation reaffirming the importance of resolving the matter, reinforced by the chief physician of the Kingdom⁸ who called attention to some irregularities, blaming the health officer (AML, *Livro 1º de Consultas e Decretos de D. João V do Senado Oriental*, f. 285). Three points stand out in the insistence of this consultation: the declaration of the exclusive duties of the chief physician, the *provedor*, surgeons and doctors, in terms of health characteristics; an allusion to complaints by the officers themselves, due to usurpation of duties and undue interference in each other’s specific jurisdiction, situations that ultimately affected the public good; and a reference to the chapter on gravediggers, which had to be updated. There were also references to other matters regarding burial fees and death certificates, and a request that the king allow the reformulation of the *Regimento do porto de Belém*, as non-compliance with these rules corresponded to situations of negligence.

Despite the importance of the situation, the king disciplined the action of the health officers almost immediately and, with the resolution of December 15, 1707, ordered the *Regimento do Provedor mor da Saude, e dos Provedores della desta Cidade de Lisboa* [rules of procedure for the chief health officer and officers of the city of Lisbon]. The first chapter mentioned the need to clarify and specify the competences of the *provedor-mor* and his direct assistants - the health *provedores* and guards⁹ - and also that “nas condemnações, e despeza da saude haja mais ordem” [there be more order in the condemnations and health expenses], where the *provedor-mor* would have total authority to punish, arrest or fire any negligent health officer and “deve devassar cada anno dos Officiaes della, assim dos da Cidade como dos do porto de Bellem” [he should each year inspect the city officers and those of the Belém Port] (*Collecção dos Regimentos...*, 1819, p. 64).

The concession given to the chief physician, and afterwards the chief surgeon, to lead procedures and penalize

⁸ The *Regimento do físico-mor do Reino* [the rules of procedure of the Kingdom’s chief physician] was elaborated in 1476, during the rule of King D. João II. Later, in 1496 and already as king, he would confirm these rules, renewing the superintendence of the chief physician in everything that concerned the exercise of medicine and pharmacy and the supervision and administration of the various categories of the medical profession (Correia, 1937, cap. IV).

⁹ This regiment, with thirty-two chapters, has no reference to a chief guard, direct representative of the *provedor-mor*, as in the previous *Regimento*, but only the appointment of health guards and health *provedor*, as assistants to the health *provedor-mor*.

surgeons, barbers, apothecaries and *cristaleiras*, is described and authorized in this *regimento's* final section. Continuing to adjust the qualifications and duties of each office, chapter VIII refers to the obligation of the *provedor-mor*, the doctor and the surgeon of the city and its outskirts to issue death certificates properly, under penalty of seeing their offices suspended. Chapter XIV is related to these certificates, ordering the health clerk to register, in a specific book, the names of the deceased and the cause of death, in each parish, as in the certificates sent to the *Casa de São Sebastião* [House of S. Sebastian] by the *cabeças da saúde*¹⁰. A few disastrous consequences for public health, contrary to contagion prevention, were at stake. Therefore, as mentioned previously, clarifying the powers of these officers, and extending their means of punishment was urgent. Thus, chapters III and IV established how the *provedor-mor* should proceed regarding accusations, sentences, and orders, against or in favour, of officers considered careless in their service, whatever their category, and Chapter VI legislated the possibility of pay cuts for the *cabeças da saúde* if they didn't fulfil their obligations, both bureaucratic and practical. The authority of the *provedor-mor* is again stated, in chapter XII, prohibiting any court from interfering in his domain, so no one could be neither privileged or falsely accused¹¹. The *provedor* should be present during inspection of shops and food warehouses and, if “cousas que sejam podres ou corruptas, e de mau cheiro” [things that are rotten or corrupt, or with foul smell] were found, he should call the city doctor and chief surgeon to urgently take the necessary measures, for example, order the goods burned. Chapters XXI and XXII indicate the health *provedores* should prohibit entry into the city of Lisbon of *água-pe* [piquette] or new wine before S. Martin's day and its sale during the month following that November 11. As harmful products and considering the non-compliance with its prohibition, the officers would make a full report of occurrences to the *provedor-mor*¹². There was cooperation with other municipal services, such as *Almotaçaria* [inspection] or Cleaning, for better sanitary prevention: Chapter X indicates the provisions regarding cleaning of public fountains and washing the streets, together with the *almotacés* [inspectors], and Chapter XIII refers the care with cleaning places where fish and meat were sold. Collaboration with customs officers and in the *Casa da Índia* [House of India] was also important because it was necessary to have information about exotic products coming from distant lands and take the necessary measures, under supervision of an apothecary, before distribution in the city. Chapter XI mentions the inspection of pastry shops by the examining physician¹³, surgeon and apothecaries, as their shops “tem conservas, e outras cousas damnadas pelo muito prejuizo que pode resultar aos doentes” [have preserves and other things that can cause much damage to the sick]. Pharmacy visits were reserved for the chief physician, who would report them exclusively to the *provedor-mor*, if falsified medication or material were reported.

Another important item enunciated by the Lisbon Senate in the consultation of November 23, 1707, lead the king to establish five chapters in this *Regimento do Provedor-mor da Saude* to complement the *Regimento do provimento da Saude para o porto de Bellem*. In order to decidedly implement this decision, he ordered that “entendendo que he necessaria a muitas cousas principalmente no tempo da saude para conservação della (...) este Regimento se registara no Livro da Camera e no da Casa da Saude, ou de S. Sebastião, onde estão Portarias e outras Posturas da Saude” [considering they are necessary for many things, particularly in healthy periods so health is preserved, these rules will be recorded in the books of the City Council and Health Office, or House of S. Sebastian, where there are other health ordinances and positions] (AML, *Livro 1º de Consultas e Decretos de D. João V do Senado Oriental*, f. 285).

¹⁰ This House was the headquarters of the city's public health administration. The bureaucratic work must have been immense, if we consider that the clerk's records were used for the daily reports of deaths sent to the Senate, so the city council had a constant knowledge of the city's state of health. There were also other registry books, such as the books of convictions, chapter XXV, noting fines paid in cash, and another, *Livro das achadas*, recording the same convictions, when the guilty party did not pay or was pardoned, in case he appealed and was acquitted. That is, in practice, one book certified the other, both registered the revenues and were the responsibility of the health clerk. They were signed by the *provedor* and then sent to the *provedor-mor* every month. The depository of net revenues, based on the book of convictions, would also make a list of all revenues spent on “obras com augmentos da dita Casa de S. Sebastião, e nas festas e noutras diligencias por causa da saúde” [works to expand the House of S. Sebastian, and the festivities and other matters because of health], with the approval of the *provedor-mor*. In the end of the year, both books were sent to the city treasurer for verification and comparison with the reports of detentions and sentences by the *provedor*, to confirm all the work done (*Collecção dos Regimentos...*, 1819, p. 70).

¹¹ The king's intervention in the local reactions against the independence of the chief health *provedor* motivated the decree on August 4, 1688, ordering the Senate to notify all City Councils and Courts in the country that they should obey the *provedor-mor* in all health matters, as he was the sole responsible officer, resolving or ordering according to the matter at hand (AML, *Livro 10º de Consultas e Decretos de D. Pedro II*, f. 89).

¹² The doctor and his assistants gave an opinion based on the analysis of the wines produced in the period following the harvest and considered that these *new wines* were still *impure*, as they had not *resting* enough time, which was thought to seriously harm health due to fermentation (AML, *Livro 10º de Consultas e Decretos de D. João V do Senado Ocidental*, f. 180).

¹³ The reference to this officer, his nomination, and his competences, were already present in item IX of Pedro Vaz's *Regimento* and continued to be chosen among the “melhores da terra, a que se da premio conveniente por seu trabalho” [best in the land, who is awarded conveniently for his work].

In line with this complement to the *Regimento do provimento da Saude para o porto de Bellem*, in chapter XV we find that the port *provedor* had a residence on site, in a house paid by the city, a provision absent in the previous rules. This officer was continuously at his post, observing the daily movement, except when he went to the *Casa de São Sebastião*.

As for the control of maritime activity entering the Tagus river, in the new rules there is only a reference in chapter XVI to procedures with suspected ships and persons, which are placed in isolation. In the previous rules, this clause was divided into several chapters, and the duties of this *provedor* and his performance with ships in general is distributed in several items. The next chapter orders that foreigners be treated well and, when suspected, not be threatened, at which time a report must be sent to the higher authorities. This has no equivalent in the previous rules and is probably a diplomatic procedure, based on the cordial relations the monarch intended to maintain with European partners.

The drastic measures of previous reigns were thus moderated. Better knowledge of epidemic outbreaks and how to mitigate them, the implementation of effective sanitary measures, along with concerns with good international relations, contributed towards such moderation. The danger of contagious diseases, however, remained present in the following years and reigns. By way of example, citing but a few documents, we come across a warning of plague in Algiers, in July 1752, and the specific appropriate measures taken for its prevention (AML, *Livro 3º de consultas, decretos e avisos de José I*, fs. 51-52v.; *Livro 4º de consultas, decretos e avisos de José I*, fs. 40-41v.); in October 1761, a strict quarantine was enforced upon all ships coming from the Adriatic Sea (AML, *Livro 12º de consultas, decretos e avisos de D. José I*, fs. 228-229v.); three years later, in July 1764, a new mandatory quarantine was decreed, now for vessels from Naples and Sicily (AML, *Livro 13º de consultas, decretos e avisos de José I*, fs. 200-201v.); in May 1767, the entry of ships from Genoa was prohibited (AML, *Livro 16º de consultas, decretos e avisos de D. José I*, fs. 40-43v.); and finally in this short survey, in July 1770, quarantine was imposed in Portuguese ports for ships from the Mediterranean, due to the plague in Alexandria, Smyrna and other ports in the Ottoman Empire (AML, *Livro 17º de consultas, decretos e avisos de D. José I*, fs. 46-47v.).

In conclusion, these procedures demonstrate the zeal when facing any suspected outbreak of contagion. Security measures were taken to the extreme, trying above all to provide protection against pestilences. These *regimentos*, normative public health documents, are rich repositories of information, which allow us to reconstruct the evolution of knowledge of epidemics, both in terms of prevention and mitigation. They also allow us to evaluate the methods of supervision, particularly at the municipal level, but also the efforts of the royal power to establish authority over the existing society and control epidemic outbreaks.

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