

Stjepan Krasić, *Zdravstvena kultura i nekadašnja ljekarna Dominikanskoga samostana u Dubrovniku. Health Care and the Old Pharmacy in the Dominican Monastery in Dubrovnik*. Dubrovnik: Matica Hrvatska - Ogranak Dubrovnik, 2010. Pages 133.

This scientific and valued book for the history of pharmacy authored by Stjepan Krasić *Health Care and the Old Pharmacy in the Dominican Monastery in Dubrovnik* was published by Matrix Croatica—Dubrovnik Branch in 2010. It was printed bilingually in English and Croatian. One of 14 illustrations found within the book was chosen to design an attractive cover page for the hardcover book. Its description, which is closely related to the contents of the book, was written by Vladimir Grdinić in the review published in 2011 (Vladimir Grdinić, »Zdravstvena kultura i nekadašnja ljekarna Dominikanskoga samostana u Dubrovniku: kritički prikaz djela i dopunske bilješke«. *Farmaceutski glasnik* 67/3 (2011): pp. 161-184). Opposite Hippocrates holding a medicinal plant is the figure of Hermes in the physical form of astrologer, master of 'Hermetic art', or the first alchemist. In the lower part of the picture, in a medallion, is the biblical scene of mercy: a beaten and robbed traveller representing a patient is healed by the Good Samaritan, a pharmacist who uses animal, vegetable and mineral substances to prepare his medications.

In the first 5 of 10 numbered but untitled chapters, outbreaks of contagious diseases, especially pandemic plague in Europe in the fourteenth century, are presented as a challenge to the development of public health, medicine and pharmacy. The knowledge that the illness spread from one person to another through direct contact, first recognized on the valid basis of practical experience by the Italian physician Guglielmo di Varignana, marked a major breakthrough not only in the fight against the plague, but also against all similar diseases. The regions and cities of the eastern Adriatic were not spared by the Black Plague either, especially Dubrovnik. As an important trading centre with both the Balkan mainland and the Middle East, Dubrovnik was vulnerable to the danger of contagion and spread of pestilence. Dubrovnik historians mention numerous epidemics of plague, typhoid spotted fever, abdominal typhus, smallpox and influenza which raged in the Dubrovnik area from as early as the ninth century. But Dubrovnik also used defensive measures. One particularly fortunate circumstance was the fact that the city already had good connections with advanced Italian cities so it could make good use of their knowledge and experience.

The author does not emphasize that the idea of quarantine was the original invention of Dubrovnik, of which Grmek and other authors have written, but states that after Milan and Venice, it was not long before Dubrovnik began to apply similar measures. On 27 July 1377 a ban was introduced on access to the city of goods and people coming from areas affected by the plague. It was also decreed that all such goods as well as people be subject to one-month isolation on the islets of Mrkan, Bobara and Supetar. Special health officials chosen from the Senate, notably during epidemics, had considerable authority. They supervised the harbour masters and employees in the health institutions. There were one or two physicians or surgeons permanently employed by the city, as well as pharmacists, and under the terms of their contracts, they were to offer free treatment to the citizens of Dubrovnik. In 1540 the first hospital under the name *Domus Christi* opened its doors to the citizens. Health

care was complemented by hygiene and sanitary measures: regulations on street cleaning and employment of full-time cleaners, pavement of the streets (with bricks and stone slabs), construction of water supply and sewerage. On the basis of these achievements Dubrovnik has earned a prominent place in the history of medicine, amply evidenced by the historical sources kept in the State Archives and the writings of older chroniclers.

The remaining chapters describe the health conditions in Dubrovnik's monastic communities, organized health care, care for the sick brethren, the establishment of hospital rooms (*infirmaria*) and pharmacies in the Franciscan and Dominican monasteries. The health conditions in the monastic communities of Dubrovnik were similar to those amongst the other city inhabitants. Life in a community carried many disadvantages when infectious disease was concerned, the plague in particular. The rules introduced by the highest authorities of the orders testify, though implicitly, to their behaviour in these particular circumstances. Care for the sick mainly consisted of accommodating them as comfortably as possible in separate rooms, furnished and equipped to suit the purpose.

Indirect data indicating the construction of hospital rooms in the Dominican and later in the Franciscan monastery have been derived from the wills of wealthy citizens, who for this purpose bequeathed certain amounts of money. However, the assumption that a pharmacy existed within the complex of these rooms has found no confirmation in the archival sources. According to the original documents, a pharmacy is known to have existed in the Dominican monastery from the middle of the seventeenth century. In the aftermath of the great earthquake in 1667, Friar Martin went around the city helping the victims and giving out free medicine. The pharmacy prospered under his headship, and in 1690 turned into a mixed or joint-stock company with substantial earnings. Its income not only allowed for an annual twelve-ducat contribution to each member for the provision of clothes, bedding and other necessities, but also loans and credits to individuals outside the monastery. Apart from Friar Martin, the names of other monastery pharmacists are known: Friar

Marin, Friar Vitale Lanzi, Friar Lujo, and younger assistants Friar Joakim and Friar Marko Radi. The pharmacy also had administrative staff appointed for three years from among the members of the monastery council. It was located on the north-east side of the monastery's ground floor. It had a door leading out into a small garden where medicinal herbs were grown, and on the other side there was a door out onto the public street in the suburb of Ploče, from which the citizens had easy access to purchase medicines. The last pharmacist was Friar Vitale De Santis. His handbook on plants, which is kept in the Franciscan library in Dubrovnik, was written in 1775. It contains 604 names of plants in Croatian and Italian. His death in 1803 marked the end of the monastery pharmacy because the Dominicans did not manage to find another educated pharmacist to continue his work.

Although priests and monks were not usually permitted to work as doctors, this did not prevent them from devoting themselves to biology or medical theory. As authors of valuable treatises in medicine Krsić singles out Grgur Budislavić and his nephew Toma, as well as Ignacije Aquilini. The large monastery library, which housed many books used by the members of the monastery, in 1501 was granted the status of the first public library on the eastern coast of Adriatic. However, the present day monastery library represents only the remains of the former collection which was destroyed in the great earthquake of 1667 and during the French occupation of Dubrovnik. Despite this, it still houses many works from the fields of medicine and chemistry, mineralogy, anthropology, anatomy and hygiene. Numerous notes, sketches, annotations and marginal comments as well as hand-drawn decorations are witness to the living relationship of these books with their former users. Some books found their place in the library as legacies of Dubrovnik's doctors. A careful study of their content could lead researchers to new and unexpected insights into health care in Dubrovnik. The overview of 4 manuscripts, 6 incunabula and 206 books is given by title at the end of the last chapter.

The book by Stjepan Krsić shows all the complexity of the study of the history of pharmacy. The second edition, however, should pay attention

to some corrections connected with the chronology of the formation of medical and pharmaceutical services in Dubrovnik. The first contract, for which we know to have been concluded about the free medical treatment of citizens of Dubrovnik (p. 23), was a contract with Ricardus, *medicus fisicus* from 1302 (Risto Jeremić and Jorjo Tadić, *Prilozi za istoriju zdravstvene kulture starog Dubrovnika*, II. Beograd: Biblioteka Centralnog higijenskog zavoda, 1939: p. 8). The Statute of 1272 does not mention pharmacists, the decision on measures relating to *spetiarius* was added in 1336 (*Statut grada Dubrovnika sastavljen godine 1272*. Dubrovnik: Državni arhiv u Dubrovniku, 2002: VIII, 77). Although *Basilius* of Bar (p. 27) was the first pharmacist entered in notarial records, we have no proof that he ever worked in Dubrovnik. According to the original text, in Dubrovnik his agent was Nikola Stramača (*Spisi dubrovačke kancelarije. Zapisi notara Tomazina de Savere 1278-1282.*, ed. Gregor Čremošnik. [Monumenta historica Ragusina, I]. Zagreb: JAZU, 1951: pp. 187-188). The first pharmacist for whom we can claim with certainty to have been a resident of Dubrovnik is Rollandinus, about whom we have nine records from the period 1282-1285 (*Spisi dubrovačke kancelarije. Zapisi notara Tomazina de Savere, 1282-1284*, ed. Josip Lučić. [Monumenta historica Ragusina, II]. Zagreb: JAZU, 1984 and *Spisi dubrovačke kancelarije. Zapisi notara Tomazina de Savere, 1284-1286. Zapisi notara Aca de Titullo 1295-1297.*, ed. Josip Lučić. [Monumenta historica Ragusina, III]. Zagreb: JAZU, 1988). The first pharmacist employed by the Republic was Marcus Pero from Venice in 1293 (Josip Lučić, *Obrti i usluge u Dubrovniku do početka XIV stoljeća*. Zagreb: Liber, 1979: p. 102). Sporadic inaccuracies should not come as a surprise, mainly because the works on the history of Dubrovnik's medicine and pharmacy are dealing with most diverse issues and scattered in various publications. The biggest dilemma for the reader leaves the author's late founding date of the Franciscan pharmacy to the seventeenth century (p. 47). To Grdinić's objections to this statement in the earlier mentioned review one should add that the incorrect connection of the establishment of the patient room or *infirmaria*,

mentioned in the will from 1357, with the beginning of the pharmacy has already been discussed by Vinko Velnić (Vinko Velnić, »Ljekarna Male Braće«, in: *Samostan Male Braće u Dubrovniku*. Zagreb–Dubrovnik, 1985: pp. 775-793). Velnić associates the existence of the pharmacy with the fifth chapter of the Rules of the Order of the Minorites, which regulates the material and financial issues and not with chapter 6, which speaks of “caring for the sick brethren”. Furthermore, Velnić believes that the establishment of the pharmacy should be assigned to an earlier date— the year 1235, when the monastery of St. Thomas in Pile was founded. Judging by the methodology Stjepan Krsić applied to his study of pharmacies in the Dominican convent, by which the presence of a pharmacist implies the existence of a pharmacy

(p. 59), we could argue that the Franciscan pharmacy has existed at least since the mid-sixteenth century, for according to the published work (Zdenka Kesterčanek, »Prinosi biografijama dubrovačkih apotekara«, in: *Zbornik Drugog kongresa farmaceuta Jugoslavije*. Beograd, 1956: pp. 179-188), in 1550 Friar Ivan, Franciscan monastery pharmacist, testified in court to a fight between two doctors. Therefore, the assumption which is repeated in the conclusion that the pharmacy in the Dominican convent had been founded before the pharmacy in the Franciscan monastery can only be accepted as a challenge in which all available sources should be carefully and systematically reviewed.

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