Prologue: The Sword of Mercy

In 1657 Francesco Gizzio first wrote and performed La spada della misericordia [The sword of mercy], a “representation of the terrible scourge of plague, that afflicted the city and kingdom of Naples in the year 1656”.¹ The epidemic was so recent that the bodies of victims were still being buried. Gizzio, an Oratorian priest in Naples, had a message to impart: plague, though occasioned by God’s wrath for our sins, was also a sign of his divine mercy: God “punishes in life, so as not to punish us after death”. Although it follows a standardized format, Gizzio’s play has moments of originality and dramatic power.² More importantly for our purposes, the central scenes of La spada della misericordia highlight contemporary notions about plague in the city, through which we can better understand the public health response to epidemic disease in Naples over the course of the early modern period.

In scene III, two noblemen, Argellio and Gabrino, discuss the forty-six sudden deaths that morning “in the neighborhoods around the Mercato”. They are then joined by Albritio the Doctor, spouting Galenic aphorisms in Latin about plague. Argellio suggests the disease may not be plague, but the doctor fears the worst. Albritio warns them that “plague is a scourge sent by God alone; and so, he who sends the disease, knows the medicine”. The problem is that “plagues, being of different types and diverse climates, resulting in different diseases, make their treatment difficult”. Albritio tells them that the “contagion” can, however, be recognized: “by buboes, ampullae, petecchiae, vomiting, head and stomach ache, kidney rupture, dizziness and other similar affects”. And it can be prevented: first and foremost, by “keeping your affairs with God in order”, and secondarily by the use of special medical preservatives.

But in the next scene the three men encounter a sickly friend, Onofrio, from whom they all flee, including the doctor. And after a scene in which Mercy and Repentance discuss Onofrio’s sinful state, three devils (Asmodeo, Astaroth, and Leviatan) fight over his soul. The devils are in a cheerful mood, what with “the quick and sudden deaths, the odd infirmities, the frenzied deliria, the excessive frights”. Astaroth promises to “confound human prudence with a sea of intrigues”, while Asmodeo will persuade people “that it is not plague but a simple mortality”, and will ensure that “the corpses remain shut in houses and strewn throughout the streets, so that, unburied, they infect the whole city”.

Cheerful, too, are the two corpse-bearers (schiattamuorte in Neapolitan, beccamorti in Italian), Sardella and Porchione, who feature in scene VIII. The two wily rogues add a morbidly comic and popular touch to the play, as they complain in rhyming Neapolitan of the meagre recompense for their hard labors. When asked how many corpses he has “made” today, Sardella bemoans: “Among all the silver and gold / Just three hundred, all told”. So the two are more than happy when a moribund Onofrio calls out for help, imagining they can pocket his valuables and cart him off to the burial pits filled with other plague victims. In the end, Onofrio has to give them a ducat so they will leave him alone, which the two corpse-bearers are quite happy to do.

The scene shifts to two noblemen, Gabrino trying to persuade Fileno that with the epidemic raging it is time to flee the city. Fileno is reluctant because his wife, Fiordalisa, has been struck with plague and is at home. Time is short, Gabrino warns: “These so calamitous times should not be called times, but instants of time, because one sees people die talking and walking”. When Fileno insists that he wants a litter to bring his diseased wife with them, Garbino refuses and departs alone. Scene X takes us to Fileno’s household, where Fileno discovers that his doctor, doctor’s wife, their child and servant are all dead, and that Fileno’s son has just taken to his bed “with fever, vomiting, and a ruptured kidney”, and his two servants “with buboes”.

Scene XIII introduces us to the health deputy, Francuccio, who is present with soldiers. In a soliloquy, Francuccio complains: “I have lost my mariner’s map: I do not know where to look and what to do”. The dead outnumber the living, houses are nailed shut with worm-ridden corpses inside, the streets are criss-crossed with cadavers, the pesthouses are full of the dying and the dead, the bread remains

¹ Gizzio, La spada, 198-216.
² Ceriello, “Comedias”, 89-90.
unbaked because the bakers have died, people are falling dead in the street, their bodies tossed to the side, and only the holy sacrament makes its way through the streets and squares of the city. “It seems like Judgment Day”, Francuccio concludes. His sense of purpose returns when he hears the corpse-bearers’ cart approach: “I want to be present to encourage the corpse-bearers and to purify this neighborhood”. Porchione and Sardella arrive, singing: “The cart goes wherever there’s money / For us corpse-bearers, the plague is honey”.

Gizzio’s play ends as it begins, with a chorus of figures, secular and sacred, who consider the fate of the city. If Gizzio’s is a one-act play, the present study will consist of three, in which we shall look at the major epidemics that struck Naples during the early modern period: 1493 and 1526-7, 1656, and 1764. We shall examine what remained constant in the city’s response, and what changed during this time. When it comes to Naples, historians have tended to focus on the 1656 plague, the most disastrous and the most documented. The doctor and historian of medicine Salvatore De Renzi had a positivistic approach typical of nineteenth-century historiography. De Renzi, writing during yet another epidemic of cholera in the city, proposed his study as lesson of the dangers “that result from sacrificing the precepts of hygiene to unproductive fanaticism”. One hundred and fifteen years later, in what remains a fundamental study of the city, Giuseppe Galasso re-inserted the plague into its broader political, social, and religious context. The social historian Giulia Calvi wrote that to understand it historically one had to relate the level of the particular event, with its concatenation of causes, to the symbolic, with its apparently ahistorical and ritualized behavioral responses. More recently, the economic historian Idamaria Fusco has adopted a fiscal perspective to the epidemic and its effects, to explore the relations between center (capital) and periphery (the provinces).

Why study plague at all? The French historian Fernand Braudel famously referred to plague as a “structure” of the early modern period, its catastrophic effects and frequency shaping the very nature of society. From the arrival of the “Black Death” in 1347-50, to the last major outbreak, in 1656-7, there were 27 plague epidemics in Italy. Some were pandemics, affecting large areas of Italy and Europe; others were local or regional outbreaks; and many were not even plague but other diseases in epidemic form. The frequency of epidemics declined from the sixteenth century, but they became deadlier, often killing a third or more of a town’s population, and doing so within the space of a few months. Early modern plague epidemics utterly transformed familiar locations and the ubiquity of death shocked contemporaries. They demanded prompt and wide-ranging responses from secular and religious authorities alike, to control its spread and mitigate its effects. The history of epidemics during the early modern period is not just the history of a single disease or cluster of diseases; it is not just the history of the interaction between man and parasite. Rather, plague and the deliberate defensive measures taken in response to it can shed light on aspects of collective thought and action and on the nature of social, economic, and political structures. With the focus on Naples, that is what I aim to do in this essay.

Act I: One Man and His Boat

On the eve of our period, the response to epidemic disease in Naples assumed characteristics that it would keep throughout. The city already had a system of maritime controls in place to protect itself from plague, requiring health passes for ships entering port and a period of quarantine, purgacione, of suspect vessels. Plague was something that arrived from “abroad”, and in the case of a port city like Naples, the most populous of the Mediterranean, this meant from the sea. In terms of then-current medical thinking, the policy was therefore the right one. The means of enforcement, however, were not up to the

---

3 De Renzi, *Napoli nell’anno 1656*, i.
6 Fusco, *Peste*.
8 Del Panta, *Epidemie*, 118.
9 Slack, "Responses".
task, given that the entire port of Naples was policed by a single man and his boat. We even know his
name: Girolamo Strabone, paid five ducats a month in 1502.\[10\] This maritime focus would characterize the
city’s strategy throughout the early modern period.

It did not work, at least not in 1493. When plague broke out, the immediate response was to
ascertain a cause, at a time when causation was always various, mixing divine wrath with natural vectors.
It often remained easier to blame and target individuals or groups, accused of spreading the epidemic
either unwittingly or, more often, intentionally. In 1493 it was the turn of the Jews. However, on this
occasion the accusation may have had some truth to it. With their expulsion from Spain and Sicily in
1492, many Jewish refugees set sail for Naples, where they were still permitted to live. Given the foul
conditions of maritime travel in the period, and their large numbers, it is certainly possible that they
brought epidemic disease with them: perhaps not plague itself, but quite likely other diseases. We shall
return to the overlap between plague and other forms of epidemic disease. If Jewish refugees brought
plague to the city with them, they were also numerous among the victims: 25,000 Jews perished in the
epidemic, along with 30,000 “Christians”, according to a contemporary chronicler.\[11\]

Another constant in the control of epidemic disease was that it remained a political and
administrative concern, more than a strictly medical one. The political interest on the part of Aragonese
sovereigns like Ferrante passed to the Spanish viceroys, but this was strictly limited. The main
administrative responsibility belonged to the Eletti, who represented the city’s government. When it came
to implementing measures day to day, and paying for them, the city was on its own. With plague
threatening Naples from 1493, King Ferrante responded by fleeing the city, ordering: “let the citizens take
care of things themselves”.\[12\] The single Eletto del Popolo, representing the city’s “citizens” or
“commoners”, and elected for a period of six months, was charged with appointing health deputies, while
the Eletti dei Nobili, representing the city’s patriciate, were supposed to supply the necessary funds
(though this arrangement would change). They also oversaw the city’s pesthouse, or lazaretto, operational
from 1479 and located near the catacombs just outside the northern walls, adjacent to the
basilica of San Gennaro extra moenia [outside the walls], from which it took its name. Other Italian cities
had likewise decided such structures were necessary to house large numbers of victims, Venice and
Genoa in the 1460s and Milan in 1488.\[13\]

The administrative difficulties of the Eletti were not made any easier by the fact that Naples had
no permanent health magistracy of the sort already in existence in cities like Venice and Florence; rather,
deputies, with limited powers, had to be appointed as the need arose. The ad hoc nature of what would
later become the city’s health board, the Deputazione della Salute, was present from the start and would
persist throughout the early modern period. Another indication that epidemic disease control was more
administrative than medical is the fact that these health deputies, in common with their counterparts
throughout the Italian states, were not physicians but laymen. The high status of medicine in the city did
not routinely extend to the control of epidemics.\[14\]

Three decades later, when plague threatened the kingdom from Sicily to the south and the Papal
States to the north, Neapolitan officials could see it coming and had time to react. The city also had a
more interventionist ruler, Viceroy Lannoy. He had his hands full, ensuring that the city’s Eletti co-
operated with one another. Even before plague had appeared in the city, the Eletto del Popolo had warned
other municipalities to be on guard and had walled up the city’s recently-built Incurabili Hospital as an
isolation area for the sick. But he came into conflict with the noble Eletti over the “insecure guarding” of
the city’s gates, which was the prerogative of the latter. Lannoy succeeded in persuading the nobles to
fund a small guard at each of the city gates. This was not enough to keep plague out of the city, however,
and on 10 January 1527 the Eletto del Popolo informed Lannoy that he was appointing a physician to

---

\[13\] Benvenuto, *Peste*, 172.
\[14\] Gentilcore, *Healers*, 29-55; Musi, "Medici".
identify plague victims throughout the city. It was a mammoth task for a city of over 100,000 people, even if the physician was to be assisted in his efforts by a team of four barbers, “to let blood and treat the sick”, two confessors, and two guards, or alguzini, “to use force against those who cause disorder by hiding their disease and associating” with the healthy.15

The guards would prove necessary. In Naples, as throughout Europe, the measures taken to fight epidemics focused on the isolation of victims. This was easier said than done; indeed the harshness of the edicts is a sign of how difficult they were to enforce. Even before the 1526 outbreak the Eletto del Popolo had threatened that he would hang “the first person who gets plague and does not shut himself in and walks about the city”.16 The Eletto in question was Girolamo Pellegrino, financier and tax farmer, who chose the heavy-handed approach, meting out hanging and physical punishments to those who ignored the plague edicts. The recipients included several corpse-bearers, who “stole infected goods when they carted the dead away”, of the kind sent up by Gizzio.17 Even Pellegrino was not enough to prevent plague from killing as much as half the city’s population. High mortality rates were experienced in Florence and Bologna, too.

In the aftermath of the 1526-7 epidemic the city’s Eletti came together to appoint a “plague deputy” who was for the first time a physician. And in 1531 they appointed a further two deputies to oversee plague measures on a permanent basis. It was their duty to prevent the movement of infected merchants, soldiers, and outsiders, to oversee the arrival of people and goods into the city, to check the validity of health passes, to ensure the treatment of plague victims by medical practitioners, to see that victims were promptly isolated, and to employ a sufficient number of carriatori to cart victims away and bury them.18 By the middle of the sixteenth century similar systems of public health were in place throughout Italy. In northern Italian cities in particular – Venice, Florence, Milan, and Genoa – this was based on special permanent magistracies, combining legislative, judicial, and executive powers. Their jurisdiction might extend to the recording of deaths, the burying of corpses, the selling of food and disposal of waste, and the overseeing of hospitals and poor relief. In Naples, as in Rome, there was no permanent magistracy, but boards that came into being as the need arose, by which time it may have been too late. This has been seen as an example of the kingdom’s backwardness with respect to northern Italy.19 However, even the most evolved magistracies in Europe, in Venice and Florence, were unable to prevent the epidemic of 1630 being one of the most calamitous of the early modern period, and the same applies to Genoa in 1656; while an ad hoc magistracy set up in Rome in 1656 seems to have been effective in confining that epidemic to the Trastevere district of the city.20 In any case, Naples, as part of the Spanish dominions, more closely resembled its sister cities in Spain, where there were likewise no permanent entities with judicial powers to oversee public health, and where responses were made by individual cities, with nothing on a national level prior to the establishment of the Supreme Board of Health in Madrid in 1720.21

What can we say about the nature of the response? When it came to identifying plague, this was a time when physicians treated the individual patient, when diseases were fluid entities and manifested themselves differently in different people. The health officials, by contrast, treated the entire community. Their emphasis on prevention had taught health officials how plague might travel, who was likely to be most affected, and in what conditions. Their working model mixed ancient ideas about how plague might originate (from the “miasmas” emanating from foul air or putrid water), with more recent ideas about how it was transmitted from goods to people or from person to person (“contagion”). Like the doctor Albritio in Gizzio’s play, physicians had divided opinions. One of the most difficult enigmas for early modern

15 Sirleo, Peste, 52-3.
16 Sirleo, Peste, 52-3.
17 “Racconti di storia napoletana”, as cited in Lopez, Napoli, 66.
18 Lopez, Napoli, 60 and 64.
19 Cipolla, Fighting, 5 and 49.
20 On the ruthless measures adopted in papal Rome, Boiteux, "Le bouclage".
21 Casey, Early Modern Spain, 39; Lopez Piñero, “Los origines”; Varela Peris, "El papel".
physicians and health officials alike remained how to determine when a high concentration of mortality was, in fact, plague. Contemporaries were aware that plague was not the only disease that spread quickly and attacked large numbers of people. Discerning by symptoms, or “signs”, was not enough. Buboes and carbuncles might be sufficient indicators, but high temperature, petecchiae on the skin (small, lentil-sized spots), vomiting, mental dullness, headache, and delirium, were all signs that plague shared with other “fevers”, particularly what was then called “spotted fever” (typhus). Physicians, with their doctrinal interpretations, and health officials, with their more practical concerns, were often at loggerheads when it came to identifying and responding to epidemics. In Gizzio’s play, the devil Asmodeo pledges to make the most of this confusion in order to wreak havoc in Naples.

When it came to preventive measures, we know that in 1619 the city Eletti decided to build a quarantine station on Chiuppino, a small island off Nisida, where suspect ships bound for Naples were quarantined. Five years later a decree was issued by the “Superintendent of Health”, the marquis of Corleto, the health deputy chosen by the noble seggio [ward] of Porto, in response to a plague outbreak in Sicily. The decree specified that the Health Deputation, located at the port, would be open two hours in the morning and three in the evening for the examination of ships’ bills of health. All ships coming into and leaving port had to inform the superintendent, providing him with the names of the ship’s master, sailors, and passengers, with their place of origin noted. Worryingly perhaps, ships providing regular shipments of foodstuffs to the capital were exempted from this provision. The deputies, who were permitted to carry firearms, were to have the authority to order guards to assist in their efforts if necessary in case of resistance. Two feluccas under their authority would patrol the port, day and night. These were standard and time-tested procedures in Mediterranean ports, differing from 1493 only in their scale. They relied on a high degree of trust: not for nothing were the ships’ bills of health called fedi. Given that no ship’s captain wanted his ship and personnel quarantined—which meant delays, with the possible ruin of cargo, as well as fees to pay—the procedures were open to corruption. On one occasion, a Venetian official in Naples made a complaint against health officials in Ancona for selling packets of already signed fedi to ships’ captains working throughout the Adriatic.

Northern Italian cities, although belonging to separate states, routinely exchanged information about outbreaks around the Mediterranean with one another. Thus, on 14 June 1652, the Genoese health magistracy notified its counterparts in other northern Italian cities that “information has been received here in Genoa by qualified persons that in the city of Alghero in Sardinia contagious diseases have been uncovered which have caused the death of several people”. The epidemic had spread from Catalonia to Mallorca, and from there to Sardinia. Genoa suspended all maritime trade with Sardinia and suggested that other states do the same. The Tuscan government went further. On 30 July it proposed a “convention” binding the states most exposed to the threat to a common strategy. The Grand-Duchy, the Republic of Genoa, and the Papal States would henceforth adopt common measures to keep the ports of Livorno, Genoa, and Civitavecchia plague-free, including posting officers in one another’s ports.

The response of Naples to this development suggests both the limited roles of the health deputies and the city’s place within the Spanish orbit. The Florentine health magistracy proposed extending this convention to include Naples, even though the city’s health deputation was known to be “not accustomed to exchange information” with offices in other states. The Florentine ambassador in Naples approached the head of the kingdom’s Collateral Council, the regent Giovacamillo Cacace, an austere and difficult man and dedicated functionary of the viceregal government. He told the ambassador that he had no faith

---

22 On the difficulties for modern-day medicine and historians alike, Cohn, *Cultures*, 39-76. Typhus, chickenpox, pneumonia, influenza, and typhoid can easily be mistaken for plague in the absence of proper biological tests.
24 Osheim, “Plague”, 71.
26 Cipolla, *Fighting*, 48n.
27 Mazzacane, "Cacace".
in the local health deputies: there were only two of them, a nobleman and a commoner, and they both bought their positions, he said. The sale of offices was indeed quite common in the kingdom, as elsewhere, but the office of health deputy cannot have been a particularly attractive one. The choice of the two deputies was by this time the responsibility of the noble seggio of Porto and the citizen seggio del Popolo, with the two deputies receiving a stipend from the city council.\textsuperscript{28} In any case, when the Florentine ambassador returned before Cacace a few days later with a copy of the convention, the regent assured the ambassador that Naples followed the same practices and precautions as Florence and Genoa. Cacace added, however, that since Naples was a Spanish dominion it could not proceed in concert with Florence and Genoa when it was a question of suspending trade with other Spanish territories, like Sardinia.\textsuperscript{29} The city’s fate was sealed.

\textit{Act II. Naples Deformed by Plague}

When plague finally made its appearance in Naples, it caught the city off guard. One chronicler spoke of “forgetfulness”, 130 years after the previous epidemic.\textsuperscript{30} And yet the authorities should not have been so surprised. Not only had plague broken out and wrought havoc in other Mediterranean ports; it was doing so on the island that was the principal stopping-off point for maritime trade from Spain directed towards Naples, the island of Sardinia.\textsuperscript{31} The health deputies ought to have been accustomed to inspecting incoming ships, but the fact that the Eletti had to propose “reactivating” the Chiuppino quarantine station in March of 1656, when plague had already broken out, suggests that it must have been conceived as a temporary structure, which had to be brought back into service when necessary. It was deemed to be too far away to be of use, in any case.\textsuperscript{32} Unable to keep plague out of the city, the health deputies were completely overwhelmed when faced with plague in their midst.

The main chroniclers agree that the epidemic started in early January 1656, brought to Naples by several Spanish soldiers arriving from Sardinia. One of these was hospitalized in the Annunziata hospital, where he was cared for by a doctor, Giuseppe Bozzuto. When Bozzuto spread the alarm, contradicting the opinions of court doctors, he was imprisoned by the viceroy for spreading “false” news, and in prison he died of plague.\textsuperscript{33} The viceroy was the energetic and decisive count of Castrillo; but when it came to allowing Naples some limited degree of autonomy from Madrid, in response to local needs, his hands were tied by the politics of the monarchy. History has judged Castrillo harshly, his initial reluctance or indecision over the epidemic making him responsible for the rapid and dramatic spread of plague in the city. However, a declaration of plague would have isolated the capital, causing economic paralysis, preventing it from sending the requested troops to defend Milan, and threatening the city with hunger and serious social unrest. For Castrillo, who had been sent to Naples to bring peace to the city after the rebellion of 1647, these were all risks that needed to be avoided or delayed as much as possible.\textsuperscript{34} In Sicily, political, administrative, and medical—was the standard first reaction to plague throughout early modern Europe. The same thing had already happened in Seville, in 1648, when the local authorities reluctantly declared a state of plague only when people started dying at the rate of 500 a day and only once the annual fleet for the Indies had cleared harbor.\textsuperscript{35}

Given Castrillo’s rash reaction, it is not surprising that even as late as 22 May Neapolitan doctors were still refusing to use the “p” word, referring to the outbreak as the “contagious disease” or “current

\textsuperscript{28} Capaccio, \textit{Forastiero}, 651.  
\textsuperscript{29} Cipolla, \textit{Fighting}, 49; the convention came to an end when the plague broke out in Genoa in 1656, the worst in that city's history.  
\textsuperscript{30} Pasquale, \textit{A' posteri ori}, 20.  
\textsuperscript{31} Manconi, \textit{Castigo}, 41.  
\textsuperscript{32} Nappi, \textit{Aspetti}, 14.  
\textsuperscript{33} The main historical account from which all scholars must draw, not least because many of the archival documents were later destroyed in a fire, is De Renzi, \textit{Napoli nell’anno 1656}.  
\textsuperscript{34} Fusco, "Il viceré".  
\textsuperscript{35} Casey, \textit{Early Modern Spain}, 37-38.
disease” in official communications. A doctor resident in the city, Geronimo Gatta, referred to it as a “half plague” when fetched to treat a victim in February. Gatta did not hang about to discover whether the contagion would become fully-fledged plague, but followed the best medical advice and left the city. Doctors, like Gizzio’s Albritio, do not figure well in the eyes of contemporaries, given their tendency to flee. Moreover, the lack of accepted cures for plague explains another constant of plague epidemics: the bewildering variety of treatments proposed to the health officers in time of plague, by doctors, itinerants, and improvised healers alike. In 1656 a Neapolitan alchemist offered a sure-fire remedy to the Roman authorities, while in Naples “a Milanese offered to cure everyone once an acceptable fee had been agreed”. At least the four sufferers treated by the Milanese as part of his demonstration died “without much suffering”. The health deputies had a particular interest in ascertaining the most effective treatments. They were the ones called on to fund the costs, like the eighty-eight ducats paid to Gasparrino del Negro in July 1656, to reimburse his costs “in the purchase of many things to make unguents and other antidotes in the service of public health”.

By April 1656 large numbers of cases were occurring in the southern part of Naples, in the crowded neighborhoods of Mercato, Porto, and Pendino. This was where most of the city’s population and its trade and craft activities were found. Rumors of plague-spreaders soon broke out and a few unfortunate suspects were summarily executed. The health deputies blamed spoilt grain as the source of contagion; then spoilt salt fish consumed during the previous Lent. On 15 May, at the behest of the Collateral Council, the kingdom’s protomedico [first physician, a public official], Francesco Leotta, was ordered to identify the doctors who had left the city, so that they could be brought back and a decision taken as to their fate. Leotta himself was accused of not doing enough. Viceroy Castrillo complained that the health deputies were slow to act, while the deputies complained that Leotta was “little experienced in his job”. They then spent “whole days debating whether they had the authority, and if so, whether it was enough, without deciding anything useful for the public good”. The health deputy for the seggio del Popolo, Vincenzo Manna, accused Leotta of negligence and of being overly cautious. In response, the viceroy replaced Leotta with another doctor, Francesco Mosca, apparently less learned but more active. Gizzio’s devil Asmodeo was evidently busy at work.

The Health Deputation now numbered twenty-one officials: seventeen nobles and four citizens. Their immediate response was two-pronged, natural and supernatural. On 30 May the health deputies ordered each of the city’s twenty-nine ottine, or neighborhoods, to elect a deputy who, along with the captain of justice, responsible for local order, would identify the sick of the ottina on a regular basis. Plague victims who could take care of themselves at home were to be shut in their houses and a white cross to be painted on their front door, so it became off limits. But servants and others were to be sent to the pesthouse of San Gennaro extra moenia, with a note signed by the doctor, and their goods burnt. A doctor was assigned to each ottina, along with surgeons and barbers. Medical practitioners were ordered to remain in the city. Water-sellers were put out of work when the earthenware jugs they used were suspected as a source of contagion; the Health Deputation offered them the less than attractive alternatives of working either at the pesthouse or as litter-bearers for the sick. And on 2 June two autopsies were carried out for the deputies, under the protophysician’s supervision. Their report was as detailed as it was inconclusive, discussing at length the various preservative remedies that might be employed.

On 12 June, “having considered and put into practice … every expedient that could by natural means liberate our city from its present calamity”, the city authorities matched this with a recourse to
supernatural means.\textsuperscript{43} Gizzio would have been pleased: it was accepted wisdom that even the best natural means depended on supernatural assistance for their efficacy. The Eletti, noting that “Divine justice wants to exercise the rigor merited by our sins”, made a public vow to defend the Immaculate Conception of the Virgin and prayed for her aid in restoring the health of the city. In fulfillment of the vow they commissioned frescoes to be painted above seven of the city’s main gates, depicting the Immaculate Conception and child, along with saints Gennaro, Francis Xavier, and Rosalia. The figures were carefully chosen. Gennaro (Januarius) was, of course, the city’s most important patron saint. His relics were housed in the \textit{tesoro}, or treasury, a richly decorated chapel in the cathedral, first planned in fulfillment of a vow made in the 1527 plague, and finally completed in 1646.\textsuperscript{44} The cult of the Immaculate Conception was firmly entrenched in the civic religion of Naples, having been encouraged by the viceroy. The inclusion of Francis Xavier, missionary and co-founder of the Society of Jesus, canonized in 1622, was no doubt in recognition of the rising influence of the Jesuits in the city. Finally, Rosalia (Rosalie), a medieval hermit saint of Palermo, had been “rediscovered” in 1624-5, when the liberation of that city from plague was attributed to her intercession.\textsuperscript{45} The site of the frescoes was symbolically important as communal entryways into the city, part of the walls that enveloped the civic space. Similar iconography was used on the health certificates later issued by the health deputies, engraved by Nicholas Perrey.

At this stage, the biggest difficulty faced by the health deputies was in identifying available personnel. As in Gizzio’s play, those who could flee, did. This problem was faced at every level of government, secular and religious. The archbishop, cardinal Ascanio Filomarino, after ordering diocesan priests to stay put, left his palace for the relative safety of the Carthusian monastery of San Martino, on a high hill overlooking the city, where he was to remain for the duration. The Collateral Council was soon running short of officials, deaths from plague exacerbated by their policy of allowing office-holders to leave the city as long as they could provide a substitute, and were willing to pay for the privilege. It was not just the wealthy and the well-connected who fled Naples for the provinces. Anyone who could sought to return to his or her place of origin, thus reversing the trend that saw Naples as a magnet attracting migration from the rest of the kingdom. With the capital too busy dealing with its own difficulties to be concerned about the rest of the kingdom, the epidemic followed the main roads out of the capital.

In Naples, the plague spread northwards, where the city’s noble palaces and its religious institutions were concentrated. By June, deaths were in the order of 1,000 to 1,500 each day. And death came fast, with many dying “in an instant, others in the space of a few hours, others in a few days, and very rare are those who reach the seventh [day]”.\textsuperscript{46} There was barely time to get to the pesthouse of San Gennaro extra moenia, with most reaching it only to be buried, or dying along the way. The pesthouses were not considered a welcome prospect: even the family of protophysician Leotta refused to let officials take a sufferer away from their house. San Gennaro’s 500 beds soon housed 1,500. New personnel were engaged to assist plague victims, large sums were spent on medicines, and Capuchin friars were sent to assist in its everyday running. But it soon proved insufficient. It was alleged that more inmates of San Gennaro and its sister pesthouse, Santa Maria di Loreto (opened in early June), were dying of hunger than of plague, because of a lack of funds. So many plague sufferers were leaving San Gennaro each day that the health deputies were asked to issue an edict ordering the ottina captains to denounce escapees living in their neighborhoods. When some inmates at San Gennaro unexpectedly recovered, on 3 July, it was so unusual that it was attributed to saintly intercession, as it followed another vow to St Francis Xavier by the city’s Eletti.

As corpses accumulated inside houses and in city streets, burying the dead became as important as caring for the living. As early as May a convoy of carts, drawn by oxen and horses, was organized by the ottina captains, to transport bodies away to caves outside the city, in particular the mass grave of the

\textsuperscript{43} Giuseppe Campanile, "Della peste di Napoli dell’anno bisesile 1656", manuscript cited in Clifton, “Mattia Preti's Frescoes”, 479.
\textsuperscript{44} Nichols, "Plague".
\textsuperscript{45} Bailey, "Anthony van Dyck".
\textsuperscript{46} Anonymous, "Relazione", 342.
Sportiglioni on the Poggioreale hill. The health deputies bought or hired the carts, purchased fodder for the animals and waxed-cloth capes and hoods for the corpse-bearers, to protect them from infection. And when the caves at San Gennaro extra moenia and Sportiglioni filled up, trenches were dug along the roads to Poggioreale, San Carlo Vecchio, and the Maddalena bridge. Cisterns were also turned into improvised burial pits and central burial pits were also opened, in areas like the Piazza del Mercato and Piazza San Lorenzo. Eventually, the deputies had to decree the burning of corpses. This was the kind of desperate moment bemoaned by Gizzio’s health deputy Francuccio.

It was at this low point that the corpse-bearers became the most feared and reviled figures in the beleaguered city. They are a source of sardonic, carnivalesque humor in Gizzio’s play. In Naples, as in other cities, corpse-bearers performed unpleasant but essential tasks: bearing the sick to the pesthouses, carting away the dead and burying them, and disinfecting property and goods, for which they were salaried by the health officials and given protective clothing to wear. Their low prestige derived not so much from the foulness of the jobs they performed, but from factors of a religious and moral nature.47 Corpse-bearers were associated with the carting off of victims to a mass grave, generally without any kind of religious ceremony, at a time when people greatly feared dying without any of the rituals normally associated with death, burial, and the afterlife. Recruiting corpse-bearers was no easy feat, so they were well paid and might also consist of criminals and galley-slaves freed for the purpose. Their pampered status is clear in this payment, recorded as a withdrawal from the Annunziata bank by the health deputies on 24 August: “to Giuseppe Perrone and Antonio Ariemma, corpse-bearers … for everything they might demand for their labors in burying the dead”.48 The power of those in so low an occupation was a clear example of how plague overturned the normal social hierarchy, symbolizing a time of inversion and disorder.

The health deputies in Naples may have been granted judicial authority during the plague, with powers to carry out sentences and condemn offenders to the galleys, but they were unable to perform basic measures like ensuring the closure of infected houses. Their sporadic measures were ineffective and inadequate. In the words of the papal nuncio to Naples, Giulio Spinola, writing in mid-June, the deputies “bring everyone’s health and minds to despair”.49 Their main problem was financial. The Deputation was always short of ready cash to pay for measures, supplies, and personnel, which included the payment of informants to supply news on what was happening throughout the city. The epidemic exacerbated a kingdom-wide recession already underway. Following the death from plague of regent Cacace, without heirs, the city authorities stipulated that 60,000 ducats from his estate would be made available to the health deputies. This is perhaps ironic in view of Cacace’s low opinion of the officials; but in any case the money would not have gone far. Funds deposited in the various banks for the Deputation’s use were just as quickly withdrawn.

The epidemic began to wane in August. On the feast of the blessed Gaetano da Thiene, 7 August, no deaths were reported at either of the city’s main pesthouses. With the Theatines and the Jesuits disputing whether to attribute the end of the plague to the intercession of the blessed Gaetano da Thiene (founder of the Theatines) or to St. Francis Xavier, on 20 September the health deputies held an investigation into what had caused the plague in the first place. They concluded that only God knew for certain what brought on plagues and the factors that led to it breaking out. On 28 September the viceroy decreed that the city tribunals should open for business one day a week; from 1 December gabelle [indirect taxes] were collected again; and the archbishop returned from his hilltop sanctuary. A vast “purge” of the city was undertaken: mattresses were brought to the Maddalena bridge for disinfection, rubbish was collected, buildings were whitewashed, tons of salt fish were dumped into the sea, giant burial pits were paved over, and church cemeteries declared filled and duly closed. The city was declared free of plague on the feast day of the Immaculate Conception, 8 December, and the authorities took part in a magnificent procession to mark the end of the epidemic. The Eletti began to pay for numerous works

47 Crawshaw, "Beasts".
48 Nappi, Aspetti, 58.
49 Calvi, "L'oro", 443.
of art and religious monuments and numerous donors came together to build the cemetery church of Santa Maria del Pianto, on the site of the mass grave of the Sportiglioni.\textsuperscript{50}

Although the health deputies had been uninterested in preventing people from leaving Naples several months earlier, once the epidemic was on the wane they were adamant that no one should enter the city from the provinces without the requisite health pass. Plague was still raging throughout the kingdom, and would for at least another year. But those who had left the city now wished to return. The situation reveals the different treatment meted out to different ranks in society. One Oratio Capuano, returning from Pescopagano, climbed the city walls in order to rejoin his family in Naples, but was caught and duly hanged on 15 October 1656 by order of the Vicaria tribunal.\textsuperscript{51} But the notary of the Sacred Royal Council, Antonio de lo Litto, simply paid 600 ducats in order to re-enter Naples on 25 September 1657.\textsuperscript{52} The situation also reveals the ongoing jurisdictional dispute between state and church, coming to a head when the archbishop claimed authority over the re-admission of ecclesiastics into the city, going over the heads of the health deputies and the viceroy.

The city was reduced to less than half its former size, religious and secular institutions were brought to a virtual standstill, trade and manufacture interrupted, and revenues were down and hard to collect. Naples was much slower to recover than the last time around, after 1527. By way of example, the Rua Catalana, “formerly one of the most beautiful and populous streets, I say not just of Naples but of all Italy”, was “completely depopulated” by the epidemic, and it was only in 1692 that the street “has begun to recover”.\textsuperscript{53} For a generation or two the working classes at least were able to benefit, charging more for their scarce services. This was much to the dismay of the local elites, who bemoaned that the moral order or society was being overturned. This forms the main theme of Giovanni Battista Valentino’s poetic whinge, \textit{Napole scontrafatto dopo la pesta} [Naples deformed after the plague], published in Neapolitan in 1666. Valentino lamented the absence of beggars from city streets, since they all had cash of their own now, and was shocked at how soon Neapolitans forgot the horrors of the plague, to the extent of eating and drinking within a few feet of the mass graves at the Sportiglioni caves.\textsuperscript{54}

If Neapolitans were too quick to forget the plague, as both Valentino and Gizzio asserted, another epidemic barely a generation later brought them back to earth. The kingdom had not yet recovered from 1656 when plague broke out in the province of Bari in 1690. Naples’ Health Deputation sent plenty of advice, including the recipe for a medical preservative against plague, but otherwise confined its responses to the capital.\textsuperscript{55} It also insisted on being informed of every development, somewhat ironic given that the Deputation was still unwilling (or unable) to share information with Venetian agents resident in the city.\textsuperscript{56} Unlike in 1656, it was quick to act, perhaps over-react, to protect the capital. The Deputation, now composed of some twenty officials, undertook the usual measures: pesthouses were made available, strict edicts were passed, a cordon sanitaire was put into place, and the customary destruction of large quantities of salt fish was undertaken. Viceroy Santisteban himself inspected the guards posted at all the gates into the city. Suspect people were singled out: this time suspicion fell on groups of gypsies heading from Puglia towards Naples. In this climate of fear, Gizzio warned against complacency in the face of God’s evident wrath, republishing his play. Thanks to “great vigilance and attention” the plague did not spread and eventually waned.\textsuperscript{57} It was just as well: the Collateral Council calculated that maintaining the cordon sanitaire, sixty miles long, would cost 18,000 ducats for a hundred days, money that it simply did not have, and the health deputies were soon short of funds.\textsuperscript{58}

\textsuperscript{50} Ehlert, “S. Maria del Pianto”, 51.
\textsuperscript{51} De Renzi, \textit{Napoli nell'anno 1656}, 385.
\textsuperscript{52} Fusco, \textit{Peste}, 39.
\textsuperscript{53} Celano, \textit{Notitie}, 4:180.
\textsuperscript{54} Valentino, \textit{Napole}, 337.
\textsuperscript{55} Ascione, "Una peste politica?", 758-59.
\textsuperscript{56} Osheim, "Foreign Threats", 75.
\textsuperscript{57} Ascione, "Una peste politica?", 751.
\textsuperscript{58} Ascione, "Una peste politica?", 757.
The Health Deputation became a permanent entity with the plague of 1691 but it did not have its own designated building until the 1730s. This was a time of great building projects under the new king, Charles of Bourbon, part of a broader “sense of optimism and progress” within Neapolitan culture and society. The building, located in the harbor, became known as the Immacolatella, after the small statue of Our Lady of the Immaculate Conception—appropriately enough—adorning the façade. Its construction coincided with new legislation, renewed in 1751 with the “General instructions regarding health”. These were more detailed than ever before and, for the first time, the procedures applied to the entire kingdom, although each community was still responsible for implementing them. There is some indication that the Neapolitan Deputation was beginning to take on a concern for public health more broadly, consulting with physicians on the opening of new cemeteries, for instance. When it came to epidemics, however, the focus continued to be on the sea and ships, rather than the city itself and its hinterland. The final epidemic in our survey came by land, however.

Act III. Naples Reduced to One Large Hospital

The 1764 famine, and the epidemic that followed in its wake, suggest how little the administration of both city and kingdom changed over the course of the early modern period. Once again, the city was unable to take quick and effective action in response to crisis. Events unfolded with deadly rapidity: the epidemic broke out in Naples in April, was already in decline by the following August, and had all but disappeared by October. But it left some 20,000 people dead in the city. Unlike 1656, the cause was clear enough to contemporaries this time around. The disastrous harvest of 1763 had reached a crisis the following spring, with food shortages throughout the kingdom. The rural poor, left on their own, flocked to the capital for relief, in the hopes that its provisioning system, the Annona, would provide food. And they brought disease with them. If contemporary explanations tended away from the humoral theories still present within medicine, and towards more physiological notions, the response was the same as in the previous century: the isolation of sufferers. If much would have been familiar to Gizzio, much had also changed since his time.

On 20 June 1764 the health deputies met “in the usual room” in the church of S. Lorenzo, as they had for centuries, their new building on the harbor evidently of little use to them on this occasion. They agreed to appoint three further physicians to the Deputation, in addition to the two already employed, in order to obtain a medical opinion on the epidemic’s origins and the “opportune and necessary means and expedients to prevent its advance and bring about its extinction”. The five doctors, led by Francesco Serao, first professor of medicine at the university and personal physician to the young King Ferdinand, proposed the establishment of hospitals in open areas outside the city, the washing and shaving of the sick and the burning of their clothes, the immediate burial of victims, and the isolation of sick beggars from the rest of the population. All of the measures were supported by the Deputation and put forward to the regency government under Bernardo Tanucci; and they met with the support of King Charles, now on the Spanish throne. Gone were the days when lay health officials, court physicians, and viceroys argued over how to respond. There was also agreement on the need to outfit new temporary hospitals, away from the city, although the king baulked at the “excessive expense” that the outfitting of new hospitals would require. So many buildings were commandeered for the purpose that the city was “reduced to one large hospital”, in the words of the doctor Tommaso Fasano. But at least it would mean that large numbers of

62 Botti, "Febbri"; Venturi, "Napoli".
64 Botti, "Febbri", 91.
65 De Renzi, *Napoli nell'anno 1764*, 147.
67 Fasano, *Della febbre epidemica sofferta in Napoli* (1765), as cited in Botti, "Febbri", 93.
sufferers were not dying in the streets, as in 1656. Measures were also immediately agreed upon to clean the streets and regulate rubbish disposal. The corpse-bearers once again became a regular feature of city streets, and once again were accused of mistreating corpses (this time, of selling the clothes off the corpses).68 The deputy Francesco Antonio Perrelli warned that the city must avoid at all cost having to burn corpses. This would not only terrify people and perhaps give rise to “disturbances due to vain superstition among the ignorant populace”, presumably referring to the lack of a proper religious burial, but it would signal to the world that plague had broken out, with the loss of trade that would result.69

The role of religion had changed. The health deputies do not appear to have made any direct appeals to the saints as part of their measures. If “it was all tears, all prayers, processions and acts of penitence”, in the words of Tanucci, this was the popular response, on the part of the urban poor most directly at risk, and not that of the authorities.70 The archbishop, cardinal Antonio Sersale, had to be persuaded to display the relics of San Gennaro by public demand. This time the epidemic did not affect the city’s elites, or its ecclesiastics, so greatly decimated by the 1656 plague. The church seemed reluctant to become involved: when asked to shoulder some of the burden, charitable institutions showed “repugnance at taking in the sick”.71 However, this time the archbishop remained in the city throughout and funded charitable measures.72

The epidemic was generally labeled “spotted fever” (febbre petecchiale)—typhus—and blamed on the beggars pouring into the city, the crowded and fetid living conditions of the poor in the city’s bassi [ground-floor lodgings], and the poor quality of wheat imported into the city during the famine. In early modern Europe, typhus was as much a killer as bubonic plague. The importance put on observation and direct study of the epidemic, and the increased place of the environment in descriptions of the disease—the need for clean air and open spaces—are evidence of a changing medical methodology and ideology, typical of Enlightenment medicine. But the still unseen role of fleas, in both bubonic plague and typhus, links 1764 to previous epidemics. As in 1656, medical remedies proliferated. The medical elites carried out the usual autopsies to determine “the causes and origin of the present infirmities”, as they had done in 1656, with equally inconclusive results.73 As in the previous epidemic, financial resources were inadequate to meet public health demands and ambitious schemes. This time the Eletti had the valid excuse that their coffers had been emptied dealing with the famine. As a result, health measures agreed upon were not enacted. Only at the end of July did the regency council come to the aid of the Incurabili Hospital and “open a hospital in a few houses at Posillipo”, with labor supplied by the beggars who had been confined at the Maddalena bridge.74 This reference to beggars reminds us that the measures taken were as much forms of social control, affecting the poorest most directly, as means of limiting contagion. Finally, as in 1656, there were responses which did more harm than good, showing a callous disregard to the kingdom as a whole. Such was the decision taken on 10 July, 1764, to open the Vicaria and Udienze [provincial] prisons, full of the sick and dying, “to clear the same prisons and return vagabonds and those charged with the theft of foodstuffs during the recent dearth to their home towns”.75

In 1764 the medical community seemed more united than in previous epidemics, carrying out dissections with the blessings of the governors at the Incurabili Hospital, where, in the same year, a new medico-surgical college was established, as part of the rise of clinical medicine in the city. Moreover, as a direct result of the epidemic the Health Deputation began to take a greater concern for the public health of the city. It consulted doctors on the opening of new cemeteries, the storage of second-hand clothes and

68 De Renzi, Napoli nell’anno 1764, 89 and 170-71.
69 Franco, Politica socio-sanitaria, 55.
70 Franco, Politica socio-sanitaria, 42.
71 Franco, Politica socio-sanitaria, 58.
72 Novaes, Elementi, 13:246.
73 Botti, “Febbri”, 93.
74 Mincuzzi, Lettere, 225 and 229.
75 Mincuzzi, Lettere, 222.
the transport of freshly-retted linen and hemp through the city streets.\textsuperscript{76} In 1782 it published a “plan to guarantee public health against the contagious disease consumption”, which went beyond administrative measures to include hospital provision.\textsuperscript{77} These were signs of an increasing collaboration between the health deputies, medical experts, and the crown.

However, these were relatively minor measures. Real structural change and a new broader vision of the function of public health began only during the so-called “French decade”, from 1806 to 1815, when the kingdom entered the Napoleonic sphere. The reforms of Joseph Napoleon and Joachim Murat resulted in a substantial reorganization, rationalization, and centralization of public health, along with many other aspects of the kingdom’s political and administrative structures. A \textit{Consiglio di Sanità} [health council], with oversight over military hospitals, was established; the Protomedicato, stripped of its fiscal functions, was moved to the new Ministry of the Interior, the city’s hospitals were secularized and better coordinated; the Health Deputation finally became a magistracy, with nation-wide powers, with the setting up of the \textit{Tribunale della Generale Salute} [tribunal of general health]; and the system of maritime controls was consolidated.\textsuperscript{78} These reforms, along with most others, were kept in place following the Bourbon restoration in 1815.

\textit{Epilogue}

With the priest and playwright Francesco Gizzio as our guide, this survey of epidemic disease and public health in early modern Naples has brought to light both the continuities and the changes over the course of the period. The Christian view of plague as punishment, God’s “sword of mercy”, predisposed early modern Europeans to take action, to root out the evil and combat it. This meant not just public devotions, but public health. In Naples, the health deputies’ aims were essentially administrative in nature, limited to preventive measures against contagion, especially from the sea. Some growth of state power occurred as a result of measures to control contagion, particularly during epidemics, but not to the extent we see elsewhere in Italy, such as in Venice and Florence. Policing the plague was always hard to enforce: the city’s Health Deputation was perennially short of funds, support from church and state was not always forthcoming, and the various organs of city and kingdom administration did not work in concert.

In terms of the effectiveness of the public health response, it is tempting to suggest that mortality in Naples during epidemics might have been the same without the pesthouses and household isolation. Conversely, the quarantining of ships, cordons sanitaires, and destruction of infected goods may have had positive effects. But this is to miss the point, which is that the measures taken were consistent with the contemporary medical understanding of plague and its spread. Moreover, as a result, there was no real reason to change the nature of the response, since notions of etiology and epidemiology remained little changed until the end of the nineteenth century.

Some developments in the public health response did, however, occur in the later eighteenth century. For instance, we can just about perceive a more united front exhibited by the health deputies, prominent physicians, and rulers; an increasing secularization of approaches and measures; and the beginnings of a more broadly conceived notion of the relationship between public health and the city as a whole. But real change would come later. If the city’s health deputies had used the expression “public health” with reference to epidemics from the early sixteenth century, this would not be part of a unifying vision that brought together medicine, universities, hospitals, urban structures, and hygiene policies until the Napoleonic reforms of the “French decade”.

\textsuperscript{76} Borrelli, "Medicina", 149n.
\textsuperscript{77} "Piano".
\textsuperscript{78} Franco, \textit{Politica sanitaria}, 51-53; Botti, "L'organizzazione"; Borrelli, \textit{Istituzioni}, 184-95; Salvemini, "A tutela".
Works Cited:
Boiteux, Martine, “Le bouclage: Rome en temps de peste (1656-1657)”, in Fosi, La peste, 175-204.
Botti, Gabriella, “‘Febbri putride e maligne’ nell’anno della fama’: l’epidemia napoletana del 1764”, in Frascani, Sanità, 75-100.
Capaccio, Giulio Cesare, Il forastiero (Naples, 1634).
Celano, Carlo, Notitie del bello, dell’antico e del curioso della città di Napoli, per i signori forastieri, 10 vols. (Naples, 1692).
Ceriello, Gustavo Rodolfo, “Comedias de santos a Napoli nel ’600 (con documenti inediti)”, Bulletin Hispanique 22.2 (1920), 77-100.
Cipolla, Carlo, Fighting the Plague in Seventeenth-Century Italy (Madison, Wisc., 1981).
Cohn, Samuel, Cultures of Plague: Medical Thinking at the End of the Renaissance (Oxford, 2010).
De Renzi, Salvatore, Napoli nell’anno 1656 (Naples, 1867).
De Renzi, Salvatore, Napoli nell’anno 1764 (Naples, 1868).
Fasano, Tommaso, Della febbre epidemica sofferta in Napoli l’anno 1764 (Naples, 1765).
Franco, Silvano, La politica sanitaria durante il decennio francese nel Regno di Napoli (Marina di Minturno, 2000).
Franco, La politica socio-sanitaria di Bernardo Tanucci nel periodo della reggenza (1759-1767) (Marina di Minturno, 2003).
Fusco, Idamaria, Peste, demografia e fiscalità nel Regno di Napoli del XVII secolo (Milan, 2007).
Gizzio, Francesco, La spada della misericordia, in Gizzio, L’echo armoniosa delle sfere celesti, cioè la corrispondenza de’ santi con le virtù alla grata divina (Naples, 1693), 198-216.
"Istruzioni generali in materia di sanità", in Giustiniani, Nuova collezione, 9:246-93.
Gatta, Geronimo, Di una gravissima peste, che nella passata primavera e estate dell’anno 1656 depopulò la città di Napoli, suoi borghi e casali e molte altre città e terre del suo Regno (Naples, 1659).
Gentilcore, David, Healers and Healing in Early Modern Italy (Manchester, 1998).
Galasso, Giuseppe, Napoli spagnola dopo Masaniello: politica, cultura, società (Florence, 1982).
Gentilcore, “Negoziali rimedi in tempo di peste: alchimisti, ciarlatani, protomedici”, in Fosi, La peste, 75-91.
Gazzulli, Francesco, La spada della misericordia, in Gazzulli, L’echo armoniosa delle sfere celesti, cioè la corrispondenza de’ santi con le virtù alla grata divina (Naples, 1693), 198-216.
"Istruzioni generali in materia di sanità", in Giustiniani, Nuova collezione, 9:246-93.
Gatta, Geronimo, Di una gravissima peste, che nella passata primavera e estate dell’anno 1656 depopulò la città di Napoli, suoi borghi e casali e molte altre città e terre del suo Regno (Naples, 1659).
Gentilcore, David, Healers and Healing in Early Modern Italy (Manchester, 1998).
Gentilcore, “Negoziali rimedi in tempo di peste: alchimisti, ciarlatani, protomedici”, in Fosi, La peste, 75-91.
Gazzulli, Francesco, La spada della misericordia, in Gazzulli, L’echo armoniosa delle sfere celesti, cioè la corrispondenza de’ santi con le virtù alla grata divina (Naples, 1693), 198-216.
"Istruzioni generali in materia di sanità", in Giustiniani, Nuova collezione, 9:246-93.
Musi, Aurelio, “Medici e istituzioni a Napoli nell’età moderna”, in Frascani, Sanità, 19-71.
Nichols, Charlotte, “Plague and politics in early modern Naples: the relics of San Gennaro”, in Laurinda Dixon, ed., In Sickness and in Health: Disease as Metaphor in Art and Popular Wisdom (Newark, Del., 2004), 23-44.
Pasquale, Nicolò, A’ posteriori della peste di Napoli e suo Regno nell’anno 1656 dalla redentione del mondo (Naples, 1668).
"Piano per garantire la pubblica salute dal contagioso male di tisicia", in Giustiniani, Nuova collezione, 9:308-15.
Sarcione, Michele, Istoria ragionata de’ mali osservati in Napoli nell’intero corso dell’anno 1764 (Naples, 1765).
Sarleo, Luigi, La peste di Napoli del 1526 (da documenti inediti) (Naples, 1910).
Valentino, Giovanni Battista, Napole scontrafatto dapo la pesta (1666), in Collezione di tutti i poemi in