







MEDICINA NEI SECOLI

Journal of History of Medicine and Medical Humanities 37/1 (2025) 159-164

Revised: 20.02.2024 Accepted: 10.06.2024

DOI: 10.13133/2531-7288/3101

Corresponding Author: etonina@insubria.it

The beginnings of Public Hygiene in Milan during the 14th century. The studies of Francesco La Cava (1877-1958)

Barbara Pezzoni

CROP - Centre of Research in Osteoarchaeology and Paleopathology, Department of Biotechnology and Life Sciences, University of Insubria, Varese, Italy

Enrica Tonina

CROP - Centre of Research in Osteoarchaeology and Paleopathology, Department of Biotechnology and Life Sciences, University of Insubria, Varese, Italy

Omar Larentis

CROP - Centre of Research in Osteoarchaeology and Paleopathology, Department of Biotechnology and Life Sciences, University of Insubria, Varese, Italy; Soprintendenza Archeologia Belle Arti e Paesaggio per le province di Como, Lecco, Monza-Brianza, Sondrio, Pavia e Varese, MiC, Italy

Ilaria Gorini

CROP - Centre of Research in Osteoarchaeology and Paleopathology, Department of Biotechnology and Life Sciences, University of Insubria, Varese, Italy

ABSTRACT

The studies of Francesco La Cava (1877-1958)

Health as a primary good is a well-established goal in the social action of our time. The process that led to the determination of the set of rules governing healthcare needs and provisions for public hygiene has its origins far back in the history of medicine, with some chapters that are partly unknown. Here, we want to remember the figure of Francesco La Cava (Careri 1877- Roma 1958), a virtuous man, physician, and scholar with numerous facets, to whom we attribute the merit of having investigated the still unexplored chapter of Lombard healthcare in the 14th century.

Keywords: History of Medicine - Italy - Lombardy - Middle ages - Public hygiene

160 Ilaria Gorini

The recent health situation has caused a renewed interest in the pandemic events that have taken place in history. The current historical-medical literature has frequently underlined the similarities between the Covid-19 pandemic and past events, paying attention to socio-cultural, clinical, and epidemiological issues, and consequently, to individual and collective hygiene practices¹⁻³.

Today, health as a primary and collective good is a well-established aim in social action, but the process that led to the development of rules for public health and hygiene has a far origin in history.

Some passages are still little known, such as that of Milan in the fourteenth century. At that time, Europe was affected by great epidemics, against which medicine couldn't do enough to defend people's health. Etiological and therapeutic knowledge was scarce, especially concerning the methods of prevention for these devastating diseases. There was an urgent need to carry out studies and research to update scientific knowledge. Above all, there was an increasing need to develop hygiene rules and improve sanitary measures to protect the communities. In this context, Milan was the first Italian city to implement innovative works in addition to drafting legal and hygienic legislation⁴.

We owe the study of the Lombard health of the period to Francesco La Cava (1877-1958), a doctor of internal medicine and pediatrician, who oversaw public health at the Milan Hygiene Office for many years⁵⁻⁸. His passion for the history of medicine led him to conduct extensive archival research and, as a result, to rediscover important documents lost or forgotten in museums or libraries⁹⁻¹¹. This article does not aim to provide a comprehensive review of the literature on La Cava, but rather focuses on the physician and scholar's interest in the History of Medicine, one of the discipline within the Medical Humanities, and on a lesser-known aspect of medieval Milan.

One of the several studies he undertook concerned the fourteenth-century transcription, accompanied by a deep commentary, of the *Codex statutorum veterum mediolanensis*. The results of the research were reported in *Igiene e Sanità negli Statuti di Milano nel sec. XIV* (Hygiene and Health in the Statutes of Milan in the fourteenth century), published in 1946 in the third volume of the series *Studi di Storia della Medicina* (Studies of the History of Medicine), printed in Milan by Ulrico Hoepli.

Supported by historical sources, he described the hygienic-sanitary situation in Milan during the late Middle Ages^{12,13}. After that, he turned his interest to the innovative formula proposed, compared to the legislation of the time, also paying attention to prophylactic interventions^{14,15}.

Public health at that time was not only faced with the risks of contagion but also had to find solutions to other problems of the population affected by war and pestilence¹⁶. The Duchy of Milan faced socio-economic instability with targeted interventions¹⁷; it distinguished the poor from the sick and provided several places of assistance or care. In this regard, the activities of religious institutes converged with those of civil authority, favoring the social control and stabilization of power¹⁸.

According to La Cava, the ancient municipal hygienic-sanitary rules reflected the communities' socio-economic organization, traditions, level of education. They included rules on prophylaxis in cases of illness and the first attempts to establish legal authorities responsible for the health of the population, such as health offices, doctors, surgeons, pharmacies, and hospitals; therefore, they represented a valid instrument for studies of the past.

La Cava was among the first to study the norms of the municipal statutes. He chose to investigate the Milanese *codex*, which contained the oldest sanitary dispositions. In fact, Milan was the first Italian city to promulgate rules for good governance, at a time when medicine was still tied to past theories. The *Codex Statutorum Veterum Mediolanensis*⁴ includes all the norms issued and revised during the 14th century by the princes or magistrates.

The first revision was carried out in 1330, the second in 1351, and the third in 1396. Since then, no changes were made until 1534 when Duke Francesco II Sforza (1401-1466) established the Magistrate of Health. This role continued to exist until 1786 when some political events determined its suppression¹⁹. Moreover, the Duke promulgated the new Statutes of Milan, because of the collection, integration, and organization of all the previous rules. This "corpus" represented the first municipal health police *codex* of Milan and of the Territorial Committee.

These renovations of the *codex* were the first step toward a medicine focused on social and hygienic facts, but only in 1779 did the Viennese clinician Johann Peter Frank (1745-1821) make the first organic systemization in the work Accomplished system of medical police. From that moment, medicine could guide the choices of politics and the organization of society, while medical police could play a role in the doctor's formation. For the study, La Cava used the version of the Milanese Statutes of 1481, restored in 1832 and kept at the archive of the *Ospedale Maggiore*²⁰. The paper code consists of 297 sheets divided into books and chapters, grouped into sections. It is written in italics in a single column and verse²¹. La Cava introduces and comments on some chapters, like the one entitled "Students, Doctors, Surgeons, and their colleagues". Here, the importance of medical culture was immediately emphasized, also derived from the texts. The value that was given to medical or legal books was underlined by the impossibility of transporting these out of town without authorization. In this way, they tried to attract young people interested in medical studies in cities, as well as with tax relief and exemption from military obligations.

The *Collegium medicorum fisice* was established, which doctors with three years of attendance at the courses could access after passing an exam. The legal status of the physicians was legally recognized and safeguarded. In addition, for surgeons, a boarding school was established where they had to enroll to practice the profession. At that time, we must remember the only university of medicine was the one in Pavia and that only between 1447 and 1450 was established a course in medicine in Milan. The

162 Ilaria Gorini

therapeutic remedies were dispensed by the apothecaries, gathered in a college, and submitted to the authority of the government and doctors; the Statute provided that their preparations were of quality, fresh, and unsophisticated or prepared differently from the prescriptions.

Milan had sixteen hospitals in the second half of the 14th century, also regulated by the Statutes. Most of them were supported by the clergy, both administratively and for assistance, but the civil authority tried several times to assert its administration. The number of structures was sufficient for the citizens of Milan; in fact, the 302nd Chapter of the Extraordinaria prohibited other buildings in the city. Otherwise, there was a penalty of one hundred pounds of tertiary and the immediate annexation of the structure to the municipality. Furthermore, the Vicar of Providence was in charge of electing sex probiviri to monitor the streets of the city and offer shelter to sick and homeless people. Of primary importance are the Statutes that La Cava collected in the chapter entitled "Hygiene of the soil, of the built-up area, of the waters; sewers, cesspools, prisons, burials". These acts prohibited the dispersion in public places of droppings or garbage, which had to be transported outside the walls. In the running waters of the city, it was strictly forbidden to "wash skins and papers, macerate flax or hemp, throw carrion or putrid things and introduce the residues of the dry cleaners and tanneries". In this way, it was hoped to avoid the miasmas considered the cause of diseases and epidemics. For the same reasons, the cesspools had to be constantly cleaned and the manure transported out of town.

Therefore, the Statutes provided thorough cleaning for the prisons. About the burials, fines were provided for those who didn't cover the corpse in the church or during transport. To preserve public health at the funeral ceremony, no more than twelve people per district could participate. Again, for the protection of public health, it was ordered that any citizen, after taking an oath, could report to the judge of the *Annona* the millers, bakers, butchers, innkeepers, fishermen, and fishmongers, pharmacists, cheesemakers, and any other food retailer. The supervision of butchers and meat occupied a place of primary importance in the Statutes, with severe penalties for those who transgressed. Slaughter could not take place in public areas, and waste had to be disposed of immediately. The meat for sale had to be displayed in the appropriate spaces and attached to one end, to allow *officiales* and buyers to assess the state of the meat and report any disease. To avoid intoxication, the sale of fish, cereals and legumes, bread, and wine was also regulated.

La Cava concluded his arguments on the *codex* underlining the severity of the penalties and fines provided for the event of fraud and food contamination, justified by the fear of infection and epidemics. The rules of hygiene we discussed were the result of observation, intuition, and experience; consequently, they belonged to a medicine that did not know the etiology of infectious diseases and couldn't rely on scientific evidence for their prevention. At the same time, they were avant-garde and anticipatory,

the result of a medicine that, despite lacking permanent mandates, remained deeply concerned whit public health.

The Milanese Statutes, collected in the *Codex Statutorum Veterum Mediolanensis* and updated over the years, were an instrument "that, according to the spirit of the time, constituted the complex of the most salient and permanent norms to guide the population of a city considered among the first in the vanguard of progress" ⁴.

Bibliography and notes

- 1. Simonetti O, Martini M, Armocida E, COVID-19 and Spanish flu-18: review of medical and social parallelisms between two global pandemics. J Prev Med Hyg 2021;62(3):E613. doi: 10.15167/2421-4248/jpmh2021.62.3.2124
- 2. Martini M, Lippi D, SARS-CoV-2 (COVID-19) and the Teaching of Ignaz Semmelweis and Florence Nightingale: a Lesson of Public Health from History, after the "Introduction of Handwashing" (1847). J Prev Med Hyg 2021;62(3):E621. doi: 10.15167/2421-4248/jpmh2021.62.3.2161
- 3. Franchini AF, Auxilia F, Galimberti PM, Piga MA, Castaldi S, Porro A, COVID 19 and Spanish flu pandemics: All it changes, nothing changes. Acta Biomed 2020;91(2):245. doi: 10.23750/abm.v91i2.9625
- 4. La Cava F, Igiene e Sanità negli Statuti di Milano nel sec. XIV. Studi di Storia della Medicina. III. Milano: Editore Ulrico Hoepli; 1946.
- 5. La Cava F, Un medico alla ricerca della verità. Dal Bottone d'Oriente al volto di Michelangelo e alle parabole del Vangelo. Torino: Edizioni Minerva Medica; 1977:3-5.
- 6. Pezzoni B, Francesco La Cava (1877-1958). Il medico, lo storico dell'arte e l'esegeta. Biografie Mediche. Rivista del Centro per lo Studio e la Promozione delle Professioni Mediche 2019;11-12:30-32.
- 7. Pezzoni B, Gorini I, Birkhoff JM, Rossetti C, Encounter and Confrontation Between Science and Religion: A Particular Debate in the First Half of the 20th Century. Medicina Historica 2021;5:e2021013.
- 8. Badino P, Pezzoni B, Francesco La Cava (1877-1958): Humanist Physician of the Early Twentieth Century. Medicina Historica 2021;4:e2020017.
- 9. Italiano G, La forza della semplicità. Francesco La Cava tra scienza e fede. Ardore Marina (RC): Arti Grafiche Edizioni; 2001.
- 10. La Cava F, La Peste di S. Carlo vista da un medico. Milano: Editore Unico Hoepli; 1945.
- 11. La Cava F, La Dietetica Romana di A.C. Celso. Milano: Editore Unico Hoepli; 1947.
- 12. Pilsworth C, Beyond the Medical Text: Health and Illness in Early Medieval Italian Sources. Social History of Medicine 2011;24(1):26-40. doi: 10.1093/shm/hkq115
- 13. Skinner P, Health and Medicine in Early Medieval Southern Italy. The Medieval Mediterranean (11). Leiden: Brill; 1997.
- 14. Geltner G, Weeda C, Underground and Over the Sea: More Community Prophylactics in Europe, 1100-1600. Journal of the History of Medicine and Allied Sciences 2021;76(2):123-146. doi: 10.1093/jhmas/jrab001
- 15. Marafioti M, Storytelling as Plague Prevention in Medieval and Early Modern Italy: The Decameron Tradition. London: Routledge; 2018. doi: 10.4324/9781315610887
- 16. Guy G, Roads to Health: Infrastructure and Urban Wellbeing in Later Medieval Italy. Pennsylvania: University of Pennsylvania Press; 2021.

164 Ilaria Gorini

- Epstein SR, Town and Country: Economy and Institutions in Late Medieval Italy. Economic History Review 1993;46(3):543-477. doi: 10.2307/2598363
- Mayall Brasher S, Hospitals and charity Religious culture and civic life in medieval northern Italy. Manchester: Manchester University Press; 2017. doi: 10.7765/9781526119292
- 19. Antonielli L, Il Magistrato di Sanità dello stato di Milano (1534-1786) e le sue politiche sanitarie
- 20. Statuti Viscontei di Milano. Archivio dell'Ospedale Maggiore, Codice 4.
- 21. Pezzoni B, Francesco La Cava (1877-1958) e i suoi studi sulla storia dell'Igiene pubblica. Atti del 52° Congresso Nazionale della Società Italiana di Storia della Medicina Monza 12-14 giugno 2019. Medicina Historica 2020;4(1):50-52.