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Research Article / Araştırma Makalesi

Eighteenth-Century European Medical Encounters with The Ottoman Levant

On Sekizinci Yüzyılda Avrupalıların Osmanlı Doğu Akdeniz'indeki Tıp Tecrübeleri

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ABSTRACT

This essay is about some eighteenth-century cross-cultural encounters between Europeans and Ottomans. It mainly shows how eighteenth-century British and European travels and travel writings about the Ottoman Levant revealed the notion of plurality in the field of Enlightenment medicine. In reporting their medical encounters with Ottoman culture, British and European travellers showed their fascination with Levantine medical practices and medicines. Similarly, local cultures in the Ottoman Levant appreciated European medical knowledge. In these encounters, as this essay argues, a circulation of knowledge between East and West re-settles and complicates narratives of European triumphalism, heroism and colonialism usually attached to eighteenth-century European scientific travels and writing travels about non-Europeans.

Keywords: Cross-cultural encounter, Medicine, Enlightenment, Travel, Balsam of Mecca, Turkish bath, Ottoman Levant

ÖΖ

Bu makale Avrupalılar ve Osmanlılar arasındaki bazı kültürlerarası karşılaşmaları ele alarak on sekizinci yüzyıl İngilizlerin ve Avrupalıların Osmanlı Doğu Akdeniz'ine yaptığı seyahatlerin ve yazdıkları seyahatnamelerin Aydınlanma tıbbı alanında çoğulluğu nasıl ortaya koyduğunu göstermektedir. Osmanlı tıbbıyla ilgili tecrübelerini aktaran İngiliz ve Avrupalı seyyahlar Doğu Akdeniz tıp uygulamaları ve ilaçlarına dair meraklarını aktarmışlardır. Aynı şekilde söz konusu bölgedeki yerel kültürler de Avrupa tıp bilgisi takdir etmişlerdir. Makalenin öne sürdüğü üzere bu süreçte Doğu ve Batı arasındaki bilgi dolaşımı, genellikle Avrupalı olmayanlar üzerine on sekizinci yüzyıl Avrupa bilimsel yazıları ve seyahatnamelerinde görülen Avrupa'nın üstünlüğü, hamaseti ve kolonyalizmine dair anlatıları yeniden tanımlar ve karmaşıklaştırır.

Anahtar sözcükler: Kültürlerarası tecrübeler, tıp, Aydınlanma, seyahat, Mekke yağı, Osmanlı Doğu Akdeniz'i



Scholars of cross-cultural encounters between Europe and the Islamic world have demonstrated how the arrival of Eastern commodities on Western shores influenced European societies, economies and cultures. With the expansion of British trading posts in the Levant throughout the early-modern period, North Africa and India, as Gerald Maclean and Nabil Matar show, the importation of Eastern goods such as tobacco, calico, horses and turbans into Britain transformed "English social and cultural life" with the result that such exchanges "blunted the ever-present dangers of association with Islam"¹. The consumption of Eastern commodities further changed European cultures, mainly in the area of reading and writing habits. Focusing on the craze for Oriental fables, cultures and philosophies in Enlightenment literary cultures in Europe, Srinivas Arvamudan further shows how Europe's fascination with the Orient, what he called "Enlightenment Orientalism", complicates the nexus of knowledge and power scholars often attribute to Edward Said's Orientalism (1778) and argues that a hybrid literary genre as the Oriental tale often disturbed the story of national purity attributed to diffusionist and exclusionary narratives about the Enlightenment. "The paradox before us", Arvamudan argues, "is that many of the same sites now seen as repositories of ignorance, fanaticism, and underdevelopment were seen as sources of fiction, culture, wisdom, precedence, and even enlightenment (of Gnostic, mystical, and even Spinozistic varieties, if not quite the fruits of Kantian science) well into the eighteenth century".² European modern cultures, often associated with a rational republic of letters, also accommodated different ideas and practices that were not necessarily seen as inferior to those in Europe. In this article, I wish to follow the lead of MacLean, Matar and Arvamudan by showing how the importation of ideas and commodities from the Ottoman Levant into Europe shaped and changed European cultures. In so doing, I wish to contribute to the scholarship of cross-cultural encounters between Europe and the Ottoman Empire by focusing on an area of exchange that has been little examined by scholars: European fascination with Ottoman medicines and medical ideas in a period before the high age of imperialism (the nineteenth-century) when, as Lisa Lowe describes it, European writers "depicted foreign and colonial cultures as possessing exceedingly different and, by implication, less civilized-customs, religions, and practices from those of European society" (37).³

If Europeans today celebrate great eighteenth-century medical improvements such as Edward Jenner's discovery of the smallpox vaccine, then their eighteenth-century ancestors celebrated Ottoman and Arab medicines and medical practices. Historians of medicine have

¹ Gerald MacLean and Nabil Matar, *Britain and the Islamic World 1558-1713*, Oxford University Press, Oxford 2011, p. 202.

² Sirnivas Arvanudan, *Enlightenment Orientalism: Resisting the Rise of the Novel*, Chicago University Press, Chicago 2012, p 9.

³ Lisa Lowe, *Critical Terrain: French and British Orientalisms*, Cornell University Press, Ithaca and London, 1991, p. 37

showed how medical cultures in Enlightenment Europe placed an unprecedented emphasis on the idea of improvement.⁴ Despite the superstitious and traditional medical practices, cures and beliefs that remained vital to eighteenth-century medical cultures, improvement registered itself, wrote the English physician John Millar in his *A Discourse of the Duty of Physicians* (1776), in the rapid developments in the fields of "Anatomy, Surgery, Natural History and Natural Philosophy".⁵ Many scholars studied these developments, so there is no need to repeat their findings, but one here notes how studies of the Enlightenment left us with an unchartered territory: that is, the impact of Ottoman medical practices, diseases and cures on the medical Enlightenment.

A cursory survey of the field of travel writings informs us that there are many studies of European encounters with the Ottomans in the early-modern world, but only two scholars studied some of these encounters in the context of Enlightenment medicine. Emily Savage-Smith has argued that "European travellers of the eighteenth century frequently noted the failure of physicians in the Middle East to keep up with European developments in medicine..." ⁶ No circulation of knowledge or appreciation of indigenous practises was recorded in these travellers' observations of the medical cultures of the Ottoman Empire. Not until 2018 do we find another study offering a more nuanced reading of the European medical encounters with the Ottoman Empire than that of Savage-Smith. In *The Scottish Enlightenment Abroad*, Janet Starkey studied the medical observation of two eighteenth-century physicians, Alexander and Patrick Russell, who lived and practised in Ottoman Aleppo. In her detailed analysis of *The Natural History of Aleppo*, first published in 1756 by Alexander but then revised and edited by Patrick in 1794, Starkey shows how the Russells' accounts of the Ottoman medical landscape were shaped by, and also shaped, some "important medical developments that began in the Enlightenment".⁷

While Savage Smith and Starkey's studies recalled the cross-cultural context of the European Enlightenment, their analysis of the medical encounters between Europeans and the Ottomans downplayed the value of social relations in these encounters. These relations, as this essay shows, conditioned the circulation of medical knowledge between the Ottoman Empire and Europe. Moreover, while both scholars, in their different ways, focused on the accounts of the physicians who travelled and lived in the Ottoman Empire, they left uncovered a wealth of medical knowledge in the accounts of travellers who were not physicians. Yet

⁴ On medical improvements in eighteenth-century Europe, see the collection of essays in *The Medical Enlightenment in the Eighteenth-Century*, ed., Andrew Cunningham and Roger French, Cambridge University Press, Cambridge 1990.

⁵ John Millar, A Discourse of the Duty of Physicians, Printed for J. Johnson, No 72, London 1776, pp. 17-18.

⁶ Emily Savage-Smith, "Islam", The Cambridge History of Science, Vol 4, ed., Roy Porter, Cambridge University Press, Cambridge 2003, p. 663.

⁷ Janet Starkey, *The Scottish Enlightenment Abroad: the Russells of Aleppo and Bradshaw*, Brill, Amsterdam 2018, p.16.

their medical observations were heavily cited by serious-minded Enlightenment physicians and appeared in respectable medical publications during the period. As this article shows, in examining the medical observations of both social groups-the physicians and the lay travellerswe will be able to see how the production and dissemination of medical knowledge from East to West broadened the parameters of class and gender in the medical Enlightenment. Thus, not only the trained physicians, but also the modestly educated travellers and women visiting the Levant, can be seen as a participant in a medical Enlightenment.

While seeking to address these two gaps, this essay argues that the circulation of medical knowledge between the Ottoman Empire and Europe destabilised the homogenising tendency in the discourse of Orientalism studied by Edward Said. In his Orientalism (1978), Said argued that Western representations of the Orient are mostly manifestations of a systematic discourse of power and knowledge.⁸ Rethinking the systematicity of this discourse and its association with empire, this essay demonstrates how eighteenth-century medical encounters did not reveal the master-slave or coloniser-colonised paradigm. First, the travellers discussed in this essay visited and lived in the Levant in a period when the region was not subject to European colonial projects. As such, they did not act as, in the words of Adriana Craciun and Mary Terrall, "history's mobile agents of global change"⁹. They were rather the knowledge brokers between Europe and the Ottoman Empire. Second, the knowledge-making practises in these travellers' accounts revealed the social relations which demanded from the participants, both Europeans and Muslims, a set of cross-cultural performances including accommodating and appreciating the other's knowledge. This article, then, seeks to rethink the systematic discourse of power and knowledge espoused by Said by tracing the different social relations involved in the process of producing and disseminating knowledge between East and West. In so doing, it focuses on two major nexuses: a) European appreciation of Ottoman medicines and cultural practices related to health and hygiene, and b) Ottoman appreciation of European physicians and their medical skills.

Balsam of Mecca

The first European who reported about a treasured object in Arabia called the balsam of Mecca is the Italian aristocrat Ludovico di Varthema who travelled in the Levant and Arabia between 1503 and 1508. In *The Travels of Ludovico di Varthema* (1863), translated from the original travel book *Itinerario de Ludouico de Varthema Bolognese* (1510), we note how Varthema entered the "temple of Mecca" and saw two jars "full of balsam" that

⁸ Said Edward, Orientalism, Penguin Books, 1978; rpt, London 2003, p. 3.

⁹ Adriana Craciun and Mary Terrall, "Introduction", Curious Encounters: Voyage Collecting and Making Knowledge in the Long Eighteenth Century, ed., Adriana Craciun and Mary Terrall, The University of Toronto Press, Toronto 2019, p.7.

were "treasures of the Sultan".¹⁰ Varthema did not mention anything about the tree from which this balsam was distilled. Forty years later, Pierre Belon saw the plant in Egypt. In his *Les observations de plusieurs singularitez et choses memorables trouvées en Grèce, Asie, Judée, Egypte, Arabie*, Belon dedicated a full chapter to the plant: he described the leaves in detail and noted how the local rulers of Egypt often protect the premises where the tree is planted (1533).¹¹ Although these two travellers recalled how Arabs and Muslims greatly value the balsam of Mecca, they did not mention the local views regarding its medical value. Importantly, unlike eighteenth-century European travellers in the Levant and Arabia, they did not view this plant from a commercial perspective: that is, the balsam in their accounts did not appear as an article of exchange and profits between Europe and the Middle East.

During the eighteenth century, many pharmacies and druggists' shops in Ottoman metropolitan cities such as Cairo and Aleppo stocked European medicine, of which the Theriac of Venice was a famous example.¹² But Islamic and Ottoman medicines also appeared in many European pharmacies and medical prescriptions.¹³ "British merchants" in Ottoman cities in the Levant, the British traveller and poet Aaron Hill wrote in 1709, exported "large quantities" of "Rhubarb, Opium, Aloes, Balm of Gilead, Cassia, Coffee, and a thousand other drugs of noted efficacy in medicinal Operations".¹⁴ Among all these medical drugs, the Balm of Gilead was the most celebrated in Europe. This article of medicine was widely known in European medical circles, both hawkish and licensed, as the Balsam of Mecca, Balsam of Judea and *Opobalsamum*.¹⁵ The popularity of this balsam in Europe was often attributed to the Biblical references (Gen 37.25 and Jer. 8.22) in which this nostrum was lauded. Religious-minded writers, since at least the early-modern period, frequently referred to the Biblical Balm of Gilead as a spiritual cure and relief for the distressed.¹⁶ But scientifically minded physicians and botanists of the Enlightenment were interested in verifying whether

¹⁰ Lodvico di Varthema, The Travels of Ludovico di Varthema, The Hakluyt Society, London 1863, p. 40.

¹¹ Pierre Belon, Les observations de plusieurs singularitez et choses memorables trouvées en Grèce, Asie, Judée..., En la boutique de Gilles Coorozet, en la grand salle du Palais, Paris, 1533, pp. 110-113.

¹² Alexander Russell, *The Natural History of Aleppo: A Description of the City, and the Principal Natural Productions in Its Neighbourhood, together with an Account of the Climate, Inhabitants, and Diseases; Particularly the Plague*, Printed for G. G and J. Robinson, II, London 1794, p. 133.

¹³ The French traveller Calude Etienne Savary noted how the laboratory of Sal Ammoniac that he visited in Giza in Egypt exports its powder in great quantity to Europe. "It is a considerable article of commerce between the Egyptians and the Europeans. The tinners [tanners], the goldsmiths, the founders, and the chemists make use of it in their preparations", *Letters on Egypt* 1787, Printed for Luke White, Dublin, 1787, p. 213.

¹⁴ Aaron Hill, A Full Account of the Present State of the Ottoman Empire in all its Branches With the Government, and Policy, Religion, Customs and Way of Living of the Turks, in General, faithfully related From a Serious Observation, taken in many Years Travels though those Countries, Printed for J. Dodsley, Pall-Mall, London 1709, pp. 87.

¹⁵ James Bruce, Travel to Discover the Source of the Nile, Printed by J. Ruthven, V, Edinburgh 1790, p. 18.

¹⁶ Joseph Hall, *The Balm of Gilead, Or Comforts for the Distressed, Both Moral and Divine: Most Fit for these woful times*, Printed by Thomas Newcomb, London 1798, p. 3.

the tree really existed, and to what extent the medical benefits of its balsam can be proven empirically.¹⁷



Figure 1: Man tapping balsam, late 15th century. Credit: Wellcome Collection. Attribution 4.0 International (CC BY 4.0)

17 In 1760, the author John Cartwright mentioned many medical benefits of the balsam. He recalled that these benefits were widely known both Europe and the Ottoman Levant. "The Balsam when genuine", he wrote, "is the most sovereign remedy in the world, it does wonders in weak and decayed constitutions, opens obstructions of the lungs, heals acrimonious erosions, and the worst kind of ulcers; it has a detergent as well as consolidating quality, so that it cleanses and heals wounds either external or internal, even in the most foul state; nothing is so efficacious in spitting of blood, inward decays, soreness of the stomach and breast, pleurisies, asthmas, and all those kinds of complaints which require expectoration, particularly disorders of the lungs", *An Essay Upon the Virtues of Balm of Gilead*, London 1760, p 17. The eighteenth-century Swedish physician and traveller in the Levant, Fredrick Hasselquist, also learned from "a Turkish surgeon" in Smyrna about the medical benefits of this drug: "it is the best somachick they [Ottomans] know, if taken to three grains, to strengthen a weak stomach; secondly, that it is a most excellent and capital remedy for curing wounds; for if a few drops of it are applied to the fresh wounds, it cures in a very short time", *Voyages and Travels in the Levant in the Years 1749*, *50*, *51*, *52*, Printed for L. Davis and C. Reymers, London 1766, p. 293.

In early-modern Europe, the plant from which this balsam was extracted was briefly described by Prosper Alpinus (1553-1617), an Italian physician who served in the Italian consulate in Cairo in 1580.¹⁸ Since then, the medical benefits of this drug were known in Europe, but it was not until the eighteenth-century, an age when the field of medicine became heavily commercialised, that travellers in the Ottoman Levant began to compete among themselves to offer new facts and information about it rather than just rely on the medical writings of Alpinus. In Smyrna, in 1722, the Swedish physician Fredrick Hasselquist reported that "I saw some the 13th of February, which I am sure was of the true kind; as it agreed with the descriptions the best authors have given us..."¹⁹ Hasselquist, through his connections in a city that included European consuls, native doctors and merchants learned that this balsam travels from Arabia into Smyrna with the pilgrimage caravan. What was celebrated in Europe as a magical cure by both the physicians and quacks. Hasselquist understood, was an Ottoman commodity whose transportation between East and West depended on the Islamic annual ritual of pilgrimage. "A few of the common Turks", he learned, "who make pilgrimages to Mecca, may chance to bring a small quantity not mixed".²⁰ Few pilgrims obtained the genuine balsam, however, as the majority was an adulterated "mixture" which "they had made it of Turpentine, &c".²¹ Hasselquist recalled how he "asked creditable persons, who had been in Mecca" about the Balsam. These "persons" were "an Aga of the Castle at Rosetta and a Scheck [Sheikh] at Cairo". Hasselquist had previously seen a sample in the possession of "a Turkish surgeon" who "described it," informed him of its "virtues" and conducted an experiment in front of him showing the difference between true and forged material. The social context of encounter here is important since it shows how conversations between Muslims and Europeans included exchanging ideas and knowledge about the Balsam of Mecca. Here, as Katrina O'Loughlin writes in another context, "curiosity...retains a strong social valance".²²

Hasselquist was the first eighteenth-century botanist and physician to describe the Ottoman methods of preparing the balm. But not until 1775 do we find the first detailed description of the plant itself. According to the German traveller in the Levant and Arabia Carsten Niebuhr, the Swedish botanist Peter Forskal "wrote the first botanical description of the species".²³ Peter Forsakl's description of the plant appeared in his *Flora aegyptiaco*-

¹⁸ The first description of the plant in Europe appeared in Alpinus's *De Plantis Aegypti liber*, Venice 1592, p. 24. The medical benefits of the balm appeared in Alpinus's treatise *De balsamo dialogus* (1591).

¹⁹ Fredrick Hasselquist, *Voyages and Travels in the Levant in the Years 1749, 50, 51, 52*, Printed for L. Davis and C. Reymers, London 1766, p. 27.

²⁰ Hasselquist, Voyages and Travels in the Levant, p. 26.

²¹ Hasselquist, ibid, p. 26.

²² Katrina O'Loughlin, *Women, Writing and Travel in the Eighteenth Century*, Cambridge University Press, Cambridge 2020, p. 31.

²³ Carsten Niebuhr, *Travels through Arabia and other countries in the East*, Printed for Morrison and Son, Edinburgh 1792, I, p. 355.

arabica, published posthumously in 1775.²⁴ Niebuhr, a companion of Forskal in his travels, recalled how they both saw the tree from which this balm was extracted in Yemen. Niebuhr wrote that Forskal, a pupil of the celebrated botanist of the Enlightenment Carl Linnaeus, gave this plant a new name "Amyris", "a name which has since been adopted by botanists".²⁵ Among all European travellers who wrote about the balsam before Forskal, there was no specific name given to the tree, as its balsam was what mattered for most of them. The botanising activity by Forskal which appeared in his efforts to assign a specific name for the plant here serves to illustrate how the balsam tree now became an object in the European scientific imagination, an object that was surveyed, described, illustrated and reshaped to fit the categories of plants originally devised by Linnaeus and sustained by his pupils. But although Forskal gave this plant a new name, he was not entirely distanced from the people among whom he travelled. "In consequence of his botanical excursion," Niebuhr wrote, "he had learned more than any of us, of the Arabic tongue and its different dialects".²⁶ Even the reader of Forsakl's *Flora aegyptiaco-arabica* would note how he wrote the names of each plant he discovered in Egypt and Arabia in both Latin and Arabic. Again, the Latin name he gave to the plant is "Amyris". The Arabic name was "ماش وبا"/Abuscham".27

Forskal did not live long enough to celebrate his discovery or even see the popularity of his discovery celebrated by Enlightenment botanists. He was taken ill with malaria and died in Yemen in 1763. But his description of the Amyris was known among the celebrity botanists of the Enlightenment including Carl Linnaeus, the tutor of Hasselquist and Forskal. In Europe, the balsam tree and its genuine nostrum became the possessions of the elites and was placed in botanical cabinets and museums. In Smyrna, where pilgrims often bring back with them from Mecca balsamic drugs, Hasselquist obtained "many seeds" of the balsam tree. He sent these seeds to Linnaeus hopping that they might be useful for his "Museum".²⁸ Women "of distinction in Europe" such as Madame de Villesavin also kept bottles of Balsam among their collections of "Curiosities" and the "late George of Denmark" once used it.²⁹ In his *Materia Medica, or a description of simple medicines Generally Used in Physic,* first published in English in 1708, the French physician, botanist and traveller in the Ottoman Empire, Joseph Pitton de Tournefort explained why it was difficult for travellers to access the genuine balm of Mecca: "This tree is planted in Syria, Arabia and Egypt, upon Hedges, unto which no Christians are permitted to approach, by the command of the Emperour of the Turks,

²⁴ Peter Forskal, Flora Aegyptiaco-Arabica: sive descriptiones plantarum quas per Aegyptum inferiorem et Arabiam felicem, Hauniae 1775, pp. 79-80.

²⁵ Niebuhr, Travels through Arabia and other countries in the East, I, p. 356.

²⁶ Niebuhr, ibid, I, p. 358.

²⁷ Forskal, Flora Aegyptiaco-Arabica, p. 80.

²⁸ Hasselquist, Voyages and Travels in the Levant, p. 436.

²⁹ See the entry "Balsam of Mecca" in James Robert, *A medicinal dictionary; including physic, surgery, anatomy, chymistry, and botany, in all their branches relative to medicine*, Printed and Sold by T. Osborne, I, London, 1743.

who has appointed a company of Soldiers to guard every one of these Trees perpetually".³⁰ Only the Ottoman Sultan, he pointed out, can access this tree, make use of it financially, or send genuine doses of balsam to his royal friends in Europe.³¹

In the circles of the upper classes in Europe the Balsam was an object of curiosity. Among the European scientific and medical personalities who travelled in the Levant, the Enlightenment sensibility of improvement encouraged them to report back to the learned circles in their countries about this tree and balsam: they published their observations and also drew plates of the tree itself as they saw it.³² But the Balsam of Mecca could not resist the marketisation of knowledge and medicine during the long eighteenth-century. For many physicians, it became the cure of many diseases. According to the learned John Cartwright, "the most eminent physicians of every age have acknowledged" that the cures of this medicine "exceed all other things yet known in physic".³³ James Robert, the writer of *A medicinal dictionary; including physic, surgery, anatomy, chymistry, and botany, in all their branches relative to medicine* (1743), agreed that "it is an undoubtedly an excellent Medicine for deterging Ulcers in the Lungs, Kidneys and Bladder and even for dissolving pulmonary concretions".³⁴

The balsam also captured the minds of many European physicians who specialised in women's health. In addition to its usefulness for internal physical illnesses, the balsam of Mecca, as the author of *Letters to the Ladies on the Preservation of Health and Beauty by a Physician* (1770) noted, was recommended by physicians as a useful cure for "destroying freckles and red spots and rendering the skin smooth".³⁵ But the genuine balsam was not something that women from the lower ranks of society could obtain. Writing from Belgrade Forest, Istanbul on 1717, Mary Wortley Montagu recalled how the "balm of Mecca" enjoyed

³⁰ Joseph Pitton de Turnefort, *Materia Medica, or a description of simple medicines Generally Used in Physic,* London 1708, p. 366.

³¹ James Bruce recalled "When Sultan Salim made the conquest of Egypt and Arabia in 1516, three pound was then the tribute ordered to be sent to Constantinople yearly, and this proportion is kept up to this day", *Travel to Discover the Source of the Nile*, Printed by J. Ruthven, V, Edinburgh 1790, p. 23. In his *A Guide to His or Advice to Both Sexes* (65th edition), the self-styled physician Samuel Solomon wrote: "In the year 1766, Fredrick the Great, King of Prussia, being extremely concerned about the ill state of health of his general, Mons. L. Fonquet obtained...through the medium of his ambassador at Constantinople, frequent supplies of the Balm of Gilead, by which means his Majesty had the satisfaction of improving the health of...his best generals and faithful friends", London 1818, p. 56.

³² One famous drawing of the plant appeared in Bruce' *Travels* (1790). The drawing is based on "specimens" which Bruce said he obtained from Petra in Jordan, *Travels to Discover the Source of the Nile*, V, Edinburgh 1790, 17. Bruce's description and drawing of the plant reappeared in a respectable medical print in eighteenth-century Britain: *The Medical and Physical Journal*, I, March 1799, p. 33-39.

³³ John Cartwright, An Essay Upon the Virtues of the Balm of Gilead, Printed for G. Kearsly, at the Golden Lion in Ludgate-Street, London, 1760, p. 1.

³⁴ The "Balsam of Meccha" entry in Robert, A medicinal dictionary.

³⁵ Anon, Letters to the Ladies on the Preservation of Health and Beauty by a Physician, London 1770, p. 21.

a "universal applause".³⁶ "All the ladies of my acquaintance at London and Vienna begged me to send pots of it to them", Montagu recalled.³⁷ Montagu herself owned "a small quantity" which was "valuable" and "of the best sort".³⁸ She used the balm herself for cosmetic purposes. Montagu's face suffered as a result of using this balm, as she wrote, despite that many around her told her face was "much mended by the operation".³⁹ Yet Montagu acknowledged that "if one were to form an opinion of their [Ottoman women] faces, one should think well of it".⁴⁰ Ottoman women, mainly those from the upper ranks, "all make use of it", she added, "and have the loveliest bloom in the world".⁴¹

As the above descriptions of the balm indicate, this medical nostrum was the talking points of the medical professionals, botanists and members of elite society in Europe. But in an increasingly commercialised medical culture in eighteenth-century Europe, the merchant classes and quacks tapped into the collective imaginary that highly praised this medicine. "[H]ow cruelly both Physician and Patient are frustrated in their expectations," Robert wrote, "when instead of this precious Balsam, one of a very different kind is substituted in its Room".⁴²

Physicians in Europe recommended this balm as excellent cure for many diseases, but quacks and merchants, both in Europe and the Ottoman Levant, were the first to stock fake nostrums instead of the genuine balsam. "I saw their merchants", Hasselquist wrote, "in Smyrna buy such mixtures and send them to Europe, there to be disposed under the name of the true Balsam of Mecca".⁴³The nostrum that Europeans easily access in their "Druggists and Apothecaries" was a product of the trade between East and West rooted in what Cartwright, in *An Essay Upon the Virtues of the Balm of Gilead* (1760), called "an air of quackery and puff".⁴⁴

As this nostrum increasingly became a valuable commodity in Europe and the Levant, the trade attracted new international participants. According to Niebuhr, "America produces also some trees of the genus of Amyris, so that the value of the balsam of Mecca may fall in time".⁴⁵ Merchants in America and England tapped into this trade but the product they produced, Cartwright wrote is entirely fake: "A great part of what is commonly sold for Balm of Gilead

- 40 Montagu, ibid, p.190.
- 41 Montagu, ibid, p.190.

³⁶ Mary Wortley Montagu, Letters from the Levant during the embassy to Constantinople, 1716-18, London 1883, p.190.

³⁷ Montagu, Letters from the Levant, p. 190.

³⁸ Montagu, ibid, p. 190.

³⁹ Montagu, ibid, p.190.

⁴² The "Balsam of Meccha" entry in Robert, A Medical Dictionary.

⁴³ Hasselquist, Voyages and Travels in the Levant, pp. 26-7.

⁴⁴ Cartwright, An Essay Upon the Virtues of the Balm of Gilead, p. 1.

⁴⁵ Niebuhr, Travels through Arabia and other countries in the East, I, p. 356

in England, is nothing more than turpentine which flows from a fir-tree in America, bearing the name of the Balm of Gilead Fir, from the resemblance between the genuine Balsam and this turpentine, which enables the trader cruelly to deceive us in so essential a point".⁴⁶

Thus, a little tree in the far corner of Arabia, which may or may not have existed, whose balsam was transported into different Ottoman cities with the pilgrimage caravan, became a symbol of commercial competition among physicians, quacks and merchants in the Ottoman Levant, Europe and America. Toward the end of the eighteenth century, with the great interposing spirit of Samuel Solomon, a Jewish-Irish quack who called himself doctor, a lotion was manufactured and bottled in England under the name of The Cordial Balm of Gilead. "Rumour had it", Gabriel A Sivan wrote, that this tonic was made from "a fine old French brandy laced with spices from the Holy Land and even dissolved gold".⁴⁷ Once arrived in the market, this lotion became an immediate success and was exported to Europe, India and the West Indies.⁴⁸ As a leading figure in this trade, Solomon secured great fame and fortune that none of the physicians and botanists we encountered in this section would have ever imagined.⁴⁹

The Turkish Bath

Scholars of eighteenth-century Orientalism argued that Montagu's description of the *harem* culture of the Ottoman bath served as a political indictment of the patriarchal structure of eighteenth-century Britain.⁵⁰ This reading has thus far been popular among scholars. But a reading of cross-cultural encounters in the Ottoman bath which examines ideas of health and cure in a global or transcultural context is surprisingly absent from recent scholarship. In early-modern Europe, many travel writers described the Ottoman bath.⁵¹ They emphasised the various medical benefits of frequenting the bath. Some travellers associated the bath with ancient Roman practices in the region, but they also associated it with Islam's emphasis on cleanliness. The "Turks" have "many fair Bagnios in their towns", the French botanist

⁴⁶ Cartwright, An Essay, p. 15.

⁴⁷ Gabriel A. Sivan, "Samuel Solomon (1745—1819): quack or entrepreneur?", *Jewish Historical Studies* Vol/ 42 (2009), p. 35.

⁴⁸ Solomon, Solomon's Balm of Gilead, London 1801, p. 2

⁴⁹ Sivan, "Samuel Solomon (1745-1819): quack or entrepreneur?", pp. 50-51.

⁵⁰ O'Loughlin, Women, Writing and Travel, p. 32.

⁵¹ Not until the middle of the nineteenth century that "The Turkish bath", as it was known in Europe, began to have a genre of its own in the European print scene. In the wake of the Public Health Act in Britain in 1848 many voices came out endorsing the medical benefits of the baths and called for the revival of this ancient Roman and Greek tradition in Victorian Britain. Mainly those who helped to establish Turkish baths in Victorian Britain- in London and Manchester- published their accounts praising the practice, citing the positive testimonies of physicians and also European travellers in the Ottoman Empire. Then the bath was seen as an ancient tradition practised by all cultures; nothing was distinctively Islamic or Ottoman about it. On this particular point, see David Urquhart, *Manual of the Turkish Bath: Heat a Mode of Cure and a Source of Strength for Men and Animals*, John Churchill and Sons, New Burlington Street, London 1865, p. 6.

and linguist Jean de Thevenot wrote, "and the sorriest Village, that is, has at least one a Bagnio".⁵² Muslims view their public baths "as though they were sacred and there is no cheat ever committed in them".⁵³ "The Baths where they wash their bodies entirely", wrote the late seventeenth-century French traveller Aubrey de La Mottraye, "are very proper to keep the people in in that Neatness and Cleanliness, which is so necessary for the preservation of Health".⁵⁴ Muslims, unlike Europeans, "are not subject to a Quarter of our distempers" because cleanliness is essential to their faith: "it seems as if Mahomet who enjoined these Bathings and Ablutions, made them an article of their Religion".⁵⁵

Eighteenth-century European travellers in the Levant continued to associate the bath with Islam's emphasis on cleanliness, but they also described their experiences in the bath. In so doing, they offered some medical opinions on causes of and remedies for some deadly diseases in eighteenth-century Europe: the gout and rheumatism, among others. James Capper whose observations on the Turkish bath was first published in his *Observations on The Passage to India* (1783) and were later popularised by *The London Magazine* in 1784, visited the Turkish bath in Cairo in 1775 and described its medical effects.⁵⁶ For Capper, "The Turkish manner of bathing is infinitely superior to anything of the kind that is now known, or at least practised in any part of Europe, for even most of the inhabitants of Italy, once so famous for the magnificence of their baths, have long neglected this luxurious but salutatory custom".⁵⁷

According to Captain Capper, it was unfortunate that European physicians did not attempt to study this Ottoman custom; otherwise they would have discovered its great health benefits. "It is to be wished", he wrote, "that some able physician would take the trouble of informing us what would be the probable effects of the use of the Turkish baths in England".⁵⁸ Once Europeans begin to use this useful mode of bathing, they would be able to discover solutions for some disturbing illnesses widely known in Europe. "If we were to judge by a comparison between the endemial disorders of Asia and Europe", he added, "we should suppose that the moderate use of the bath might render the gout and rheumatism as uncommon in this part of the world, as they are in the other".⁵⁹

⁵² Jean de Thevenot, *The Travels Of Monsieur De Thevenot Into The Levant: In Three Parts*, Printed for H. Clark for H. Faithorne, London 1687, p. 31.

⁵³ Thevenot, The Travels, p. 31.

⁵⁴ Aubrey de La Mottraye, *Travels Through Europe, Asia, and Into Parts of Africa, Printed for the Author, London 1723, I, p. 87.*

⁵⁵ Mottraye, ibid, p. 87.

⁵⁶ *The London Magazine* published Capper's observations of the Turkish bath without mentioning his name, an indication of how Capper's experience in the bath was appropriated by the magazine in order to entertain its bourgeoise readers, *The London Magazine Enlarged and Improved*, II (1784), pp. 364-5.

⁵⁷ James Capper, Observations on the Passage to India Through Egypt, and Across the Great Desert with Occasional Remarks on the adjacent Countries, and also Sketches of the different Routes, London 1783, p. 15.

⁵⁸ Capper, Observations, p. 17

⁵⁹ Capper, ibid, p.17.



Figure 2: The cooling room of a hammam. Engraving by J.T. Willmore after W.H. Bartlett. Credit: Welcome Collection. Attribution 4.0 International (CC BY 4.0)

Capper was not the only British traveller in the East who appreciated the medical benefits of the bath. The Anglo-Irish writer Eyles Irwin and his English companions in 1785 visited

the bath in Cairo "to refresh ourselves after the journey".⁶⁰ Irwin was fascinated with the architectural design of the bath he visited which included "a fountain of cold and hot water" and "a diversity of coloured marbles".⁶¹ The excessive use of the bath was not something that "the practitioners of physic" in Europe recommend, Irwin added, but the moderate use of it, as Irwin noted, is "healthy to the last degree".⁶² Like Irwin and Capper, Claude-Etienne Savary, the famous French Egyptologist and expert on Islam, visited a bath in Cairo in 1776 and recommended the importance of using it as "a radical cure for that fatal evil which attacks the sources of generation, the remedy for which is so dangerous in Europe".⁶³ Savary here was referring to asthma, the cure for which in Europe included surgical operations that Savary saw as dangerous and incomparable to the benefits of the Turkish bath.⁶⁴

The emphasis of these travellers on the medical benefits of the Ottoman bath serves to demonstrate how eighteenth-century encounters in the Ottoman Levant contributed to the development of medical knowledge in Europe, particularly in the field of alternative medicines. But the medicalisation of the Ottoman bath in these accounts had another function. It served to pluralise the medical culture in eighteenth-century Europe to include not only the trained physicians but also military officers (Capper and Irwin) and men of letters (Savary).

However, the Ottoman bath was highly admired not only by lay travellers but also by physicians who travelled and lived in the Levant. Joseph Pitton de Tournefort, who travelled between 1700 and 1702, spoke highly of the method of bathing that including pouring hot water on the body, cracking the joints and cleaning the skin with "perfumed soap". For Turnefort, the medicinal impact of the bagnio is incomparable to anything he had ever seen: "By discharging the Glands, the Bath certainly facilitates perspiration, and by consequence the circulation of Juices which Supply the body".⁶⁵ The Scottish physician Alexander Russell, who lived in Aleppo for many years during the eighteenth century, recalled two rituals that were expected to be performed in the bath. Once they enter the bath, men are given a "Dowa, or a depilatory to the pubes and armpits, which after it has remained about two minutes, or till the hair becomes loose, is carefully washed off".⁶⁶ The medical sensibility in Russell

⁶⁰ Eyles Irwin, A Series of Adventures in the Course of a Voyage Up the Red-Sea on the Coasts of Arabia and Egypt, Printed for J. Dodsley, Pall-Mall, London 1780, p. 338.

⁶¹ Irwin, A Series of Adventures, p. 339.

⁶² Irwin, ibid, p. 339.

⁶³ Savary, Letters on Egypt, p. 110.

⁶⁴ Dr Philip Sterne described this operation in the following words: "The use, therefore, of respiration, is to relieve the body from a certain matter ...which if entirely retained is incompatible with existence and, when retained in part, is productive of disease. It is separated from the blood by means of small ducts passing from the pulmonary arteries to the air vessels, where it is dissolved and carried off by the air. The existence of these ducts is easily demonstrated, by injecting almost any liquor, into the pulmonary artery, which liquor may, without difficulty, be made thus to fill the branches of the wind-pipe", *Medical Advice to the Consumptive and Asthmatic People of England and Ireland*, Dublin 1768, p. 7.

⁶⁵ Joseph Pitton de Turnefort A Voyage Into the Levant, London, II, 1741, p. 316.

⁶⁶ Russell, The Natural History of Aleppo, I, p. 134.

invited him to investigate the ingredients of this Dowa. It "is composed of quick lime, and orpiment.... intimately rubbed together in a mortar to a powder which is moistened a little with water, at the time of application".⁶⁷ The second medical ritual that fascinated Russell was what women, particularly those who recently gave birth, anointed their bodies in the bath with a cream called Shidood. It was made of "ginger, pepper, nutmeg and other hot ingredients, beat up with honey, which after laying [on the body] on a certain time, is washed off with warm water".⁶⁸ Russell was fascinated with the medical benefits of this anointment: "The Shidood is supposed to prevent many disorders consequent to childbed and is sometimes also applied to convalescents from chronic distempers".⁶⁹

In a period in which heavy medications of chemical nature were widely prescribed in Europe, the bath, with the wide variety of herbs and balms used there, captured the imagination of European travellers. Further, in a period in which medical practitioners were widely suspected by the general public for being self-indulging, greedy and bent on prescribing heavy medications that often result in the downfall of the patient, the talent of the healers in the Turkish bath attracted European travellers. Many described their remarkable skills in using soap, pouring hot water and massaging their clients. William George Browne visited a bath in Cairo in 1792 and found "the charge very reasonable" but he mostly admired the work of the "attendants" who were "extremely dexterous".⁷⁰ This idea about the dexterity of the workers in the bath was noted by Sr James Porter, the British ambassador in Constantinople between 1746-1761. "The bath-man or woman, according to the sex of the bather," Porter marvelled, "attends, washes, rubs and dries them with surprising dexterity and art, suppling and stretching the joints in such a manner that imagination would persuade one they dislocate every part of the body".⁷¹ But this is not the case, since "this operation occasion aggregable sensations".⁷² This is further confirmed by Niebuhr in Cairo. "Strangers are surprised when those bathers begin to handle them, and afraid of having their limbs dislocated. But after being a little accustomed to the ceremony, they find it sufficiently agreeable".⁷³

⁶⁷ Russell, The Natural History of Aleppo, I, p. 134.

⁶⁸ Russell, ibid, p. 139.

⁶⁹ Russell, ibid, p. 140.

⁷⁰ William George Browne, Travels in Africa, Egypt, and Syria, from the Year 1792 to 1798, London 1806, p. 68.

⁷¹ James Porter, Observations on the religion, law, government, and manners, of the Turks, London 1768, I, 80.

⁷² Porter, Observations, I, p. 80.

⁷³ Niebuhr, *Travels Through Arabia and Other Countries*, I, p. 62. The French traveller in Algeria Jean Louis Marie Poiret reported how he "lately went to the baths which are generally used by the Mahometans in Barbary and Turkey". He admired how a man employed there "there some pail-fulls of water over my body, and began to rub my skin, and press it all over in order to free it from the smallest particle of filth". Poiret was also fascinated with the messaging skills of these workers. Poiret recalled how in the bath the worker put "his knee on my breast, he made all the joints of my arms, legs and thigs crack". At the start of this process, Poiret was afraid but at the end he "admired the dexterity with which he bent and turned me in all directions without exposing me to the least pains", *Travels through Barbary*, London 1779, p. 80.

But not all Europeans enjoyed the bath and appreciated its medical effects and the dexterity of the workers in this institution. The French traveller Constantine Volney found the path in Cairo disagreeable. "I found the path", he wrote, "produce in me a vertigo and trembling at the knees, which lasted two days".⁷⁴ Volney disliked the excessive heat and the profuse perspiration the bath caused him. But he disliked more than anything else what he considered some excessive practises in the baths such as the consumption of "opium" and male-to-male intimacy which he associated with the experience of frequenting the bath.⁷⁵

The Plural World of Medicine: European-Ottoman Exchanges

During the period, there appeared a form of commercial circulation in which commoditiessuch as the balsam of Mecca constantly flowed from the Levant to Europe. But another form of circulation also emerged in the exchange of ideas, skills and medical practices between both cultures: European and Ottoman. Throughout the eighteenth-century, many European physicians lived and worked in the Levant. Some, mainly Italian and French physicians, were directly employed by local Ottoman governors. Others served in their country's trading missions and consulates. Whether they worked for the Ottomans or for their countries' missions, European doctors in the Levant found it financially rewarding to live, work and settle in the region.⁷⁶ These doctors introduced locals to European medical practices and cures. For example, Hasselquist, in his travel account, recalled that "a French surgeon, now in Constantinople... knows how to prepare" a cure for the plague.⁷⁷ The exchange of knowledge between Europeans and Muslims in the East enabled European travellers to reflect on the medical conditions in their own countries. The movement of physicians, medicines and medical practices between East and West, so this section shows, engendered new meanings within the eighteenth-century European medical profession that complicated the view that the medical profession in Europe was the exclusive property of rational, objective and detached male practitioners.

Perhaps among the medical encounters of the eighteenth-century, Lady Mary Wortley Montagu's fascination with the Ottoman method of inoculation for the smallpox was the most remarkable. Having suffered from small pox herself, Montagu wrote passionately about this Ottoman medical practice and was highly in favour of introducing it in her own country. She went the extra mile in her efforts to convince the English of the benefit of this method.

⁷⁴ Constantin Francois Volney, *Travels Through Syria and Egypt: In the Years 1783, 1784, and 1785*, I, Dublin 1793, p. 156.

⁷⁵ Volney, ibid, p. 156.

⁷⁶ Janet Starkey wrote about the financial rewards the English levant company doctors reaped in Aleppo: "In Aleppo, physicians could charge subscription fees for each patient allowing any number of consultations. The rate was then about £30 p.a. (equivalent to c. £3500 in 2016), with extra charges for medicines", *The Scottish Enlightenment Abroad: the Russells of Aleppo and Bradshaw*, Brill, Amsterdam 2018, p. 44.

⁷⁷ Hasselquist, Voyages and Travels, p. 381.

She inoculated her own son in Adrianople. In so doing, Montagu, as she wrote, showed how learning about Ottoman medical practices was the duty of the English patriot who was willing to sacrifice one's self and family for the sake of healing the nation: "I am a patriot enough to take pains to bring this useful invention into fashion in England".⁷⁸ According to Montagu, English patriotism in this particular medical encounter demanded learning about an Ottoman medical method.

In Adrianople, Montagu inquired after this native method and found it patriotic to describe its usefulness to her fellow Britons. In England, when it was first introduced, the practice quickly entered aristocratic spaces. In 1721, Montagu's daughter and two children of the Caroline, the Princess of Wales, were among the first of the upper echelons of society to be inoculated. Women from elite society such as the Princes of Wales, Felicity Nusbaum wrote, "encouraged" this practice that arrived in England from the Ottoman Empire.⁷⁹ "The Royal inoculations were critical to the acceptance of inoculation by the English public," as Andrea A. Runsock argues, "but they did not convince everyone of its benefits, especially in the wake of two well-known publicized deaths related to inoculation in the Spring of 1722".⁸⁰ Throughout the eighteenth century, Nadja Durbach demonstrates, this new practice was suspiciously viewed by many in England. And not before the early decades of the nineteenth century, Durbach wrote, do we find accounts showing how "the practice had become embedded within popular medical culture" (20).⁸¹ Yet the public campaign led by Montagu in defense of this practice showed how a new meaning was further attached to the Ottoman method of inoculation. The arrival of the new method in England symbolised, as Nusbaum argues, the active role "eighteenth-century women" played "in advancing medical knowledge and the public health".82

The circulation of this medical method between the Ottoman Empire and Europe reshaped the medical landscape in eighteenth-century Britain: it sparked the patriotism of an English aristocrat in the Ottoman Empire, impowered a female writer to enter the medical print culture of the period, and then became the medicine encouraged by the elites and the state. With the medical men who were favoured by the state, this Ottoman method became a representation of the power of the medic over the lower classes. According to Dr William Black, the author of *Observations: Medical and Political On the Small Pox and Occultation* (1781), Dr Richard Mead, an expert in contagious diseases in eighteenth-century England,

⁷⁸ Montagu, Letters from the Levant, p. 148.

⁷⁹ Felicity Nussbaum, *The Limits of the Human: Fictions of Anomaly, Race and Gender in the Long Eighteenth Century*, Cambridge University Press, Cambridge 2003, p. 114.

⁸⁰ Andrea A. Runsock, *Vital Accounts: Quantifying Health and Population in Eighteenth-Century England and France*, Cambridge University Press, Cambridge, 2002, p. 44.

⁸¹ Nadia Durbach, Bodily Matters: the Anti-vaccination Movement in England, 1853 – 1907, Duke University Press, Durham and London, 2005, p. 20.

⁸² Nussbaum, The Limits of the Human, p. 114.

in 1721 applied the Ottoman method on six prisoners and the Chinese method on only one prisoner in Newgate in London. Mead, one of the "stars" of medicine in eighteenth-century Britain, discovered that the Chinese method of inoculation is more violent than the "Turkey practice".⁸³ "The Brain in the former case was found to be dangerously affected", Black wrote, "and in all probability, the Chinese practice will not hereafter be revived nor imitated by any nation".⁸⁴ According to Black, Dr Mead recommended the Turkey "practice" and Black himself was grateful to the dispatch of this "Turkey practise" from the Ottoman Empire to the rest of the world: "It appears to have been seldom exercised, and its peculiar advantages over the natural disease, concealed from the world until we received illumination from Turkey".⁸⁵ *Le siècle des lumières* then, at least in early eighteenth-century Europe, contracted some medical rays from the Ottoman East despite that in the latter part of the century the expertise on inoculation in Europe was exported to the world as an English invention.⁸⁶

The eighteenth-century world of medicine revealed how important was the role played by the Ottoman medical scene in the complex relationship in Europe between the medical profession, society and the state. In the Ottoman Levant, the method of inoculation was mostly practised by non-specialised practitioners, mostly females from the lower classes. In London, however, this practise was pursued by professional physicians in the service of the state and also among the elite. Ottoman medical practices also played an important role in the debate within the medical profession regarding the efficacious use of potent and heavy drugs. In an eighteenth-century Europe in which many medical professionals often recommended the use of "potent drugs" and "surgical interventions", as Dorothy and Roy Porter wrote, Ottoman medical practices were greatly admired for the less pain they caused the patient.⁸⁷ Also, the percentage of death on those who use them was quite low in comparison with the European methods. Thus, Montagu recommended the use of the Ottoman practice of inoculation because, unlike the European methods of treatment, she said, it causes zero fatality. Dr William Rowley, an English physician who travelled in Europe confirmed the violent method of treatment "in France, Holland, Flanders [and] Italy". In these countries, he added, "the application of bleeding, refrigeratory medicine of nitre, &c. of consequence an enormous fatality happens...".88

In contrast to what Rowley found in Europe, almost all eighteenth-century European commentators on the medical profession in the Ottoman Levant focused on the softer method

⁸³ William Black, Black, William. Observations: Medical and Political On the Small Pox and Occultation. London 1781, p. 23. Dorothy Porter and Roy Porter, Patient's Progress: Doctors and Doctoring in Eighteenth-Century England, Stanford University Press, Stanford and California 1989, p. 64.

⁸⁴ Black, Observations, p. 23.

⁸⁵ Black, ibid, p. 30.

⁸⁶ In 1784, Thomas Dimsdale travelled to Russia to inoculate Catherine the Great and her son the Grand Duke Paul. Inna Gorbatov, *Catherine the Great and the French Philosophers of the Enlightenment*, Academic Press, Maryland 2006, p. 83.

⁸⁷ Porter and Porter, Patient's Progress, p. 60.

⁸⁸ William Rowley, A treatise on putrid, malignant, infectious fevers, London 1804, p.116.

of treatment among the medical professionals. In so doing, they mounted a subtle critique of European heavy medicines and rough methods of treatment. Carsten Niebuhr noted how in the period before he visited Cairo the main "Mouritan", hospital in the city, "formerly provided" the patients "with everything that tend to sooth their distress, not excepting even music".⁸⁹ As Niebuhr remarked on this softer method of treatment, "Over all the East the power of sympathy in curing diseases is firmly believed".⁹⁰ This observation was made by another visitor and medical practitioner in the Ottoman Empire. For Alexander Russell, writing in his *The Natural History of Aleppo*, Ottoman medical practitioners believed in softer treatment in contrast to their European colleagues. They disliked the European medical methods which tended to use antiseptics, excision, amputation, dissection and, to a large extent, bloodletting as healing methods.

Despite expressing their admiration of the soft methods of treatments in the Levant, eighteenth-century European travellers in the region decried the superstitious and un-scientific medical practices and lack of a rational culture of inquiry among the medical professionals in the region. While in Aleppo, Russell noted how the local libraries housed many medieval Arabic translations of famous Greek physicians such as Hippocrates and Galen. But he regretted that medical practitioners in Aleppo are not trained to regard medicine as a field of study and inquiry. They rather saw it as a trade inherited by the father and passed on to his children. This treatment of the profession as a family business rather than a field of study does not lead to the improvement of knowledge or imitation of medical methods and theories found in other nations. "It will sufficiently appear," Russel wrote, "that physic…is at a very low ebb in Syria, and that in the present circumstances of that country, there is little prospect, of those who profess it, being roused from indolence, by due encouragement, or excited to attempt improvements by a liberal spirit of emulation".⁹¹

Like Montagu, Mead, and Black, Russell believed that imitation played an important part in the efforts to develop the medical field. But he regretted that some medical professionals in Aleppo did not encourage learning from their European colleagues. However, Russell did not consider local Ottoman physicians as inferior to their peers in European. First, "They have a copious Materia Medica, and their books contain a large collection of compound remedies... .⁹² Second, some people among them, mainly the governors, encourage European physicians to settle and practise in their region. According to Russell, the governor of Aleppo, Koca Mehmet Raghib Pasha, a man of "liberal" character, "offered" him "a written permission... to open any subject who had died, of what I considered an extraordinary disorder".⁹³ Third, there were many physicians and practitioners who "not only more learned, but in their

⁸⁹ Niebuhr, Travels Through Arabia, I, 62

⁹⁰ Niebuhr, Travels Through Arabia, II, 277.

⁹¹ Russell, The Natural History of Aleppo, II, 143.

⁹² Russell, ibid, p. II, 133.

⁹³ Russell, ibid, p. II, 131.

practice sagacious, active and rational"; that is with all the medical backwardness in Aleppo, one finds medical talents in the city.⁹⁴

Although Russell idealised the medical practices and theories in Europe and regretted the absence of rational medical methods in Aleppo, he acknowledged that this is not a negative thing for the medical personalities in the city: it saves them "fruitless labour of wading through the ingenious and exploded theories" of Enlightenment Europe.⁹⁵ The reader of Russell's book will note how his account about the medical cultures of the Levant revealed an ambivalent position regarding the state of the medical field in Europe. While praising modern medical theories in Europe like Harvey's circulation of the blood, Russell suspected the "violent" methods widely practised by European doctors. Thus, while gathering knowledge about local practices in Aleppo, Russell began to re-evaluate the benefits of using violent practices and medicines in Europe.

In an Enlightenment manner, many European commentators on the medical scene in the Ottoman Empire decried what they saw as a superstitious medical culture, but they also admired many medical traditions in the region. The French naturalist and traveller in Egypt Charles Sonnini reported how many French "sailors from Provence were so firmly persuaded of" the "prolific virtues" of the Nile water "that if they touched in Egypt...they never failed to fill a cask...and carry it home to their wives as the most effectual means of obtaining a numerous progeny".⁹⁶ Not only the commoners of Provence who happened to work as sailors believed in the "virtues" of the Nile water. Sonnini himself drank from it in "immoderate quantities" and "yet it never did me any harm; on the contrary, I observed it passed off very speedily, of course its salubrity cannot be questioned".⁹⁷ A British physician who travelled in the Ottoman Empire in 1775 recalled how "the women of Circassia, and like likewise those of Turkey,...devote a confiderable part of the day to dancing among themselves ; and I sincerely wish that the custom were adopted by the British ladies".98 Among "genteel" classes, dancing takes place once a week in "assembly-rooms".99 However, this is not enough. The "method of dancing a little daily", he added, would be of immense value to "health especially in the winter season when ladies often complain of fuch ailments as dancing would either cure or prevent".¹⁰⁰ British ladies would greatly benefit from imitating the daily dancing often practised among the ladies in the Ottoman Empire.

⁹⁴ Russell, The Natural History of Aleppo, II, 134.

⁹⁵ Russell, ibid, p. II, 133.

⁹⁶ Charles Sigisbert Sonnini, Travels in Upper and Lower Egypt, II, London, 1799, p. 11.

⁹⁷ Sonnini, Travels, II, p. 12.

⁹⁸ Anon, Letters to the Ladies on the Preservation of Health and Beauty by a Physician, London 1770, p. 158.

⁹⁹ Anon, ibid, p. 157.

¹⁰⁰ Anon, ibid, p.158.

Many many Ottoman cultural habits and medical practices and cures were admired by the European lay travellers of no medical education, men and women from the upper classes and also by physicians. In Ottoman societies, European medical personalities and expertise were also valued although some people disliked the violent cures pursued by European doctors. According to the Italian traveller Giovanni Mariti, "in all the villages of Syria, it is believed that the Europeans possess the gift of healing".¹⁰¹ John Taylor, an East India Company captain who travelled on the Syrian Overland Routes to India in 1789, confirmed that "they have everywhere a high opinion of the skills of the Europeans in physic".¹⁰²

Many British and European travellers in the Levant were aware of this and, therefore, offered themselves to the people among whom they travelled as medical experts. In so doing, they re-invented themselves in the Levant as modern men of improvement. James Capper advised his countrymen who intend to travel in the Levant, particularly across the desert routes to India, to carry with them European medicines and to learn how to "bleed and dress slight wounds".¹⁰³ In doing so, the European traveller will not only "save his own life or that of a friend" but also "obtain a great respect from the whole of the caravan".¹⁰⁴ Capper knew that for most European travellers in Egypt and Syria would find the act of dressing wounds and bleeding patients a difficult thing to do among the Muslims. However, as he wrote, "it is more disagreeable not to be able to administer relief to a fellow creature in distress".¹⁰⁵

In 1754, another Briton in the deserts of Syria, John Carmichael put himself forward in the Arab caravan as a medic. Carmichael was a military officer in the East India Company but he felt it his duty in the caravan in which he travelled to check the "pulse" of "a Sheik (i.e squire or gent)" in the caravan and, "finding it feverish" he "prescribed bleeding".¹⁰⁶ Carmichael did not perform the operation himself since he did not have his "lancet" with him. Rather a "barber" in the caravan did the job. Carmichael's medical expertise and advice proved of immense value to the Sheikh.¹⁰⁷ "Had my friend Dr Russel seen him eat" after he "perfectly recovered", then "he would admit my knowledge in therapeutic".¹⁰⁸ Carmichael, and many other Britons in the Levant, forged their medicalised identities among the people who highly admired the character of the European physician. In Britain, Carmichael would have been called a quack. In Ottoman Syria, he was greatly admired for his medical expertise.

¹⁰¹ Giovanni Mariti, Travels Through Cyprus, Syria, and Palestine; with a General History of the Levant, I, Dublin 1792, p. 384.

¹⁰² John Taylor, Travels from England to India, in the year 1789, London 1799, p. 323.

¹⁰³ Capper, Observations, p. xvi.

¹⁰⁴ Capper, ibid, p, xvi.

¹⁰⁵ Capper, ibid, p. xvi.

¹⁰⁶ John Carmichael, "Journey from Aleppo over the Desert to Basra" in *The Desert Route to India: Being the Journal of Four Travellers by the Great Desert Caravan Route between Aleppo and Basra 1745–1751*, ed., Douglass Carruthers, The Hakluyt Society, London 1928, p. 151.

¹⁰⁷ Carmichael, ibid, p. 151

¹⁰⁸ Carmichael, ibid, p. 151.

For the European travellers who were not necessarily trained as physicians, the idea of presenting themselves to their Muslim hosts as doctors allowed them to enjoy safe journeys in spaces that many during the period posited as full of robbers and bandits. For others, especially the trained physicians, nevertheless, their medical profession allowed them to increase the arsenal of knowledge in the European *material medica*. Hasselquist, whose journey in the Levant was mostly conducted for botanising purposes, recalled how in the Ottoman province of Manesia he was "much regarded by" the local Ottoman governor, "his servants" and "the whole town wherever I went".¹⁰⁹ Unlike European travellers in the Levant who sometimes suffered religious prejudices for being Christians, Hasselquist told us, he was treated with the utmost respect. "I saw and heard myself called and taken notice of", Hasselquist marvelled, "as Hekim Packi", a grand doctor.¹¹⁰ As a result of this eminent status that Hasselquist enjoyed in Manesia, and also because of medical service he offered to the governor, he was granted "liberty to go whither I pleased, and promissed to take care that the mountains and places where I intended to botanize should be clear, which I esteemed the best reward I could desiree".¹¹¹

In addition to the medical improvements they sought in the Ottoman Empire, some European doctors in the Levant reported the valuable material rewards they enjoyed as practitioners in the region. The anonymous English writer of *Letters to the Ladies on the Preservation of Health and Beauty by a Physician* (1770) recalled that he and his fellow English physician in Constantinople enjoyed the freedom to "rove" in that country in search for cosmetic products and secrets that would improve the "beauty" of the ladies back in England.¹¹² Because their medical expertise proved of immense importance to the Ottoman court, he noted, he and his friend were admitted into the "audience of the grand signior, who thanked us in the politest manner for the signal service we performed in the seraglio and present each of us with his picture set with diamonds, together with several jewels of immense value".¹¹³

Conclusion

The cross-cultural encounters discussed here contribute to our understanding of the globalizing process of the Enlightenment.¹¹⁴ Seen in a medical context, the Enlightenment was clearly a cross-cultural process in which people from both Europe and the Ottoman Empire

¹⁰⁹ Hasselquist, Voyages and Travels, p. 40.

¹¹⁰ Hasselquist, ibid, p. 40.

¹¹¹ Hasselquist, ibid, p.40.

¹¹² Anon, Letters, p. 7.

¹¹³ Anon, ibid, p. 7.

¹¹⁴ See the introduction and the collection of essays in *Curious Encounters: Voyaging, Collecting and Making Knowledge in the Long Eighteenth Century*, ed., Adriana Craciun and Mary Terrall, Toronto 2019; and *The Global Eighteenth Century*, ed., Felicity Nusbaum, The John Hopkins University Press, Baltimore, 2003.

were engaged in social and commercial relations rooted in the idea of improvement, backed up by commercial exchanges of key commodities. At the same time, the idea of improvement in European accounts about the medical cultures of the Ottoman Empire articulated the following: the cross-culture nature of the European Enlightenment, the two-way traffic in the eighteenth-century circulation of medical knowledge between East and West, and the importance of social relations in this circulation. This article examined these social relations in the circulation of medical knowledge between the Ottoman Empire and Europe. In so doing, this article paved the way for further research about European-Ottoman medical encounters.

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