Provincial pestilence: Marseilles, Provence, and the last outbreak of plague in Western Europe

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Provincial Pestilence: Marseilles, Provence, and the Last Outbreak of Plague in Western Europe

An Honors Thesis submitted in partial fulfillment of the requirements of Honors Studies in History

By

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For my family, whose love and support are irreplaceable, and who have always believed in me.
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Introduction

May 25th, 1720 the trade ship Grand St. Antoine arrived at the port of Marseilles, after having left Syria, where the Bubonic Plague had resurfaced. Some of the sailors had died en route and upon arriving in Marseilles the ship’s eight passengers as well as the crew members were quarantined for fifteen days. Nevertheless, once the released crew and their contraband merchandise came into contact with the people of Marseilles, the plague was released into the city. Despite efforts made to limit the spread of the contagion, the entire region of Provence was ravaged by the plague.\(^1\) Although Provence had faced the plague before, stretching back to the original outbreak in 1347, fear still overtook Marseilles and the surrounding region. The local, national and international responses to the disease reveal how people viewed disease in an age of increasing rationalism. Nevertheless, the stark contrast between fear and rationality was evident as a seemingly small outbreak turned to epidemic.

Local, national and international responses to the outbreak from 1720-22 each represent a certain group’s perspective and how they interpreted disease. At each level of authority, people sought to stop the plague from spreading. Local authorities took every measure to ensure that the ship, upon entering the port, was disease free. Once the plague broke out, the national government declared a quarantine and sent the best doctors in the country to address the crisis. The British were also sending aid as well as scouts to assess the situation in Provence and attempt to control whether or not the disease would spread. Ultimately the overarching understanding of disease was to contain it as much as possible.

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possible. By examining these responses this paper will argue that people’s understanding of disease shifted in an era of increasing rationalism.

The 1720 outbreak is an important moment when looking at the development of modern France. It represents a microcosm, in which one can draw out important political and social development. Marseilles played a key role as one of the major port cities on the Mediterranean. The national government was well aware that port cities and cities along borders would be the first to be struck by any kind of contagion coming in from a foreign country. When Marseilles contracted the plague in 1720, there was a set protocol of how to approach the crisis. This reassured the residents that the government would come to their aid. Nevertheless the plague connoted chaos and destruction. The local, national and international witnesses were fearful for many different reasons. Fear was a common thread among the three different responses to the plague that this paper will discuss.

People sought to understand the plague as much as they sought to avoid it. The overarching trend of responding to disease from a socio-medical perspective, as opposed to that of religion or alchemy, is most obvious when looking at England’s fascination with the outbreak. The primary source plague literature from England in this era was shockingly abundant. The documents themselves tell a variety of stories about exactly how England placed itself within the larger context of the crisis. London had recently suffered from the plague between 1665 and 1666 and the fear that the disease could return played a major role in Britain’s interest. Nevertheless, sources from Provence and Marseilles specifically offer the most insight as to how people understood the plague. Understanding would prove to be key. The plague connoted fear among its
contemporaries. This time around the doctors and government officials sought to understand the plague so that it could not continue to do so much damage.

This is what creates a sense of irony around the entire event. Although the doctors took painstaking notes and detailed descriptions of the symptoms, this would be the last plague outbreak in Western Europe. Though this could not have been predicted, it is interesting to note that as people sought to understand the disease, it suddenly left and never returned. As people in 18th century France were beginning to modernize, so too did the way in which disease spread.

Modern is a term which has many different interpretations and is certainly contextual. The people in Provence who faced the plague had the most advanced medicine of the time and the most efficient way of dealing with disease. Doctors were approaching the plague from a sense of rationality as opposed to mysticism. As far as my research indicates the fear of disease did not culminate in anti-Semitism (as it did in 1347) nor were there any large penitential movements. People exhibited a more rational understanding of disease.

There is not an easy way to approach how people dealt with disease. It affects each person differently as they are faced with their own mortality. From a historical perspective, it is important to understand how disease has been viewed in the past. How we understand disease now has derived directly from incidents such as the plague outbreak of 1720. We are self-preserving creatures and we learn from generations past how to better protect ourselves. Although we still battle certain diseases today such as various forms of cancer, HIV/AIDS, and most recently the Ebola outbreak in northwest Africa, we would not have made the strides we have in modern medicine if it were not for
our continual desire to understand what may kill us. Studying how we have responded to
disease in the past provides salutary lessons about medicine and rationality confronting
dread in a crisis of public health.

In order to evaluate the impact of disease and death during the Age of Reason, I
have been able to attain notes from a key doctor who worked in Marseilles throughout the
plague\(^2\) as well as an eye-witness account of the epidemic\(^3\). The primary sources I am
working with are vital for the assessments I will make in this project. Other important
primary sources are government ordinances which detail how certain regions in Provence
were to respond to disease. I uncovered these documents in the Cannes Archives. They
were all located within the public health folders from 1713-1789. These will be useful for
both assessing the extent to which the national government was involved in responding to
the plague and how the locals did as well. The sources I have for England’s response to
the plague reveal the international response and will be discussed in detail later on.

Secondary scholarship on the matter has been completed by a number of authors
throughout the 20\(^{th}\) century. Shelby T. McCloy’s article “Government Assistance during
the Plague of 1720-22 in Southeastern France” assesses the ways, and the extent to
which, the national government was invested in aiding Provence. This work notes not
only medical assistance from the government, but financial help as well. Another
important work showing this relationship is Junko Takeda’s book *Between Crown and
Commerce: Marseilles and the Early Modern Mediterranean* (2003). Within this work

\(^2\) Chicoyneau, François, “A succinct account of the plague at Marseilles its symptoms, and the methods and
medicines used for curing it. Drawn up and presented to the governor and magistrates of Marseilles, by M.
Chicoyneau, Verney and Soulier ... Translated from the French.” London: 1721.

\(^3\) Bertrand, Jean-Baptiste. A Historical Relation of the Plague at Marseilles in the Year 1720 ... Plumptre,
Takeda looks at the growing prestige of Marseilles and the government’s attempt at asserting control upon many prominent merchants who valued their civic freedom above all else. She determines that the government used the plague crisis to reinforce its power.

Other important secondary scholarship includes that of Jean-Noel Biraben and his work “Demographic Characteristics of the Plague Epidemic in France” and Daniel Gordon’s article “The City and the Plague in the Age of the Enlightenment.” Biraben examines how the plague moved through the city and then through the surrounding Provencal towns. This is a key work for my research as it allows me to trace the way the plague moved through Provence, which I can cross reference with different primary sources to gather a more comprehensive understanding of just how the plague affected the region. This article also provides numbers of deaths in each region as well as the percentage of the population at the time. Although the officials within Marseilles kept records\(^4\), it would have been impossible to account for all the dead. Along with records, there was a plentitude of plague literature. Daniel Gordon examines why this occurred and how it related to city life within his work.\(^5\) Cities were the hub of intellectual life when the plague broke out within one of the largest cities in France, aside from Paris, there was an immediate desire to commemorate the event within literature. Gordon argues this was not the case during the worst plague crisis, The Black Death of the 14\(^{th}\) century. He correlates cities and the literary response to disease. This important study uses demographics as well as intellectual and cultural history to explain responses to a medical epidemic. French scholars have produced a great deal of scholarship on the

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\(^4\) These are located within the Marseilles Archives as well as the national Archives, Biraben cites them in his work.

plague. The source for this project that will be the most important is that of Charles Carrière who wrote *Marseilles La Ville Morte* (1968), a comprehensive study of the plague outbreak in Marseilles.

There are many other important secondary works on the plague but for the purpose of this paper, the works aforementioned give a survey of the questions I seek to answer and how current scholarship has assessed the plague epidemic in France in 1720. What is lacking is any kind of significant secondary literature on England’s response to the plague. For this section of my thesis I will focus on the primary sources from England. These sources give excellent insight into how the British understood and responded to the plague.

The trajectory of this project will begin with the local responses, move to an analysis of the national government’s involvement then finally examine the international understanding of the outbreak. Through examining these three facets of approaching the we will move from a more localized view of the plague to how its’ effects reached across to other parts of Europe. The local responses to the plague reveal not only their understanding of the outbreak but also how the disease spread through Marseilles and then the rest of Provence. Provence being the region of Southeastern France, sharing it’s eastern most border with Italy and reaching as far west as Avignon and Arles. Looking at how the local doctors as well as the local government responded to the crisis reveals an advance over pre-modern thinking. As we move to the national response this project will focus on how the royal government responded and whether its response also reflects a shift into a more secular and medical approach to disease. The scope of the international
response will be primarily limited to England but the source base allows one to make interesting assessments about the nature of the time.

Section One: Local responses to the plague

Although the outbreak is often called “the plague of Marseilles,” the smaller localities in Provence were hit just as hard, if not harder, as the disease gained in strength. Doctor’s reports of the symptoms and death rates in certain smaller towns are sometimes more severe than those which were found in Marseilles. In order to understand the local responses to the plague, we must first track its creeping path throughout the Provençal countryside. The work by Jean Noel Biraben fits well here as it is an important comprehensive look at the plague’s movements throughout southeastern France in the years 1720-1722.

Jean Baptiste Bertrand (1670-1752) was a physician who studied medicine in Marseilles and was one of twelve resident doctors in the city. He remained in the city throughout the entirety of the event and within his Relation Historique de la Peste de Marseilles (1721) he posits various ideas about the spread of disease. This source allows me to examine of how Marseilles evolved and responded to the plague. He is also careful to describe how the plague arrived and spread. This work sheds important light on the regulations of ships coming in from the Levant. As we approach the plague’s arrival, let us first look at how an important port city dealt with the constant threat of disease. Bertrand lays out the protocol for ships coming in from the Levant. He writes:

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“...since the countries of the Levant are frequently desolated by the plague, and that there is always danger of the commodities...being infected with this malady...All the different sorts of merchandise are here [a lazaretto erected outside of the city], and exposed to the air till they are purified from any danger of infection. The crews are also detained there in quarantine, while the vessels themselves are commonly sent for purification to Jarre, a small island at a little distance from Marseilles.”

This was the common protocol for all ships coming in from the Levant, however the Grand St. Antoine, captained by a man named Chartaud, was sent directly to the Island of Jarre. Jean-Noel Biraben informs us that some of the sailors had died en route and there was concern they had passed away as a result of the plague, however the ship’s crew attributed their deaths to limited food and poor hygiene conditions aboard the ship. This is confirmed by the Bertrand source. What is interesting to note is that both sources agree that the ship set out from Seyde, a town in Syria. Nevertheless Bertrand relays in his account that when Chartaud made port at Tripoli he took on some fresh merchandise as well as two Turks who were seeking passage to Cyprus. One of them fell sick and died upon the ship within a few days. Whether or not the plague originated from Syria or when the ship ported at Tripoli these minor discrepancies between the two sources reveal how concerned those who were living at the time were with tracing the source of the plague. It was very important to know as more ships were coming in from the Levant.

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9 Biraben, Jean-Noel, “Certain Demographic Characteristics of the Plague Epidemic in France, 1720-22” 536.
10 Bertrand, *A Historical Relation of the Plague at Marseilles* 34.
Biraben is not as concerned with the exact origins in his source because he is writing for a modern audience.

It is certain that the merchandise and the ship were both burned, however there were some passengers who were released into the city carrying their personal items as well as some merchandise. Before these people were granted freedom from quarantine, the disease had been kept away from the city. Although the physicians at first were convinced those who had been aboard the ship were falling ill with a malignant fever, it was only when the telltale buboes appeared on one victim that it was certain that this ship had been afflicted with the plague. Bertrand emphasized that all of this was kept well hidden from the rest of the community and all of this took place the infirmary.\textsuperscript{11} He also notes that as the disease spread into the city, the magistrates took care to remove those who were ill into the infirmary at night “to avoid alarming the people.”\textsuperscript{12} The citizens of Marseilles remained blissfully unaware of the terror that would soon strike.

On June 20 a woman fell sick with what seemed to be the plague namely because of a carbuncle on her lip. Those passengers who had been released had already exposed the city to the disease, and yet the same physician who worked within the sailors’ infirmary declared that this woman was afflicted with “no more than a common carbuncle.”\textsuperscript{13} Although Bertrand expresses disdain toward this doctor who had twice now misinterpreted the symptoms of the plague, it is also important to keep in mind that these physicians were also trying to avoid a mass panic. One could not acknowledge the presence of, let alone an epidemic of, the plague without chaos ensuing. These doctors

\textsuperscript{11} Bertrand, \textit{A Historical Relation of the Plague at Marseilles}, 34–40.
\textsuperscript{12} Bertrand, \textit{A Historical Relation of the Plague at Marseilles}, 50.
\textsuperscript{13} Bertrand, \textit{A Historical Relation of the Plague at Marseilles}, 43.
were also well aware that if the plague was in fact present then that would not bode well for Marseilles’ thriving commerce. From a modern perspective one can easily point the finger at the physicians who did not identify the plague right away as the cause of the intensity of the outbreak, however this response placed within context makes perfect sense. If there were not obvious signs, then it was prudent to hesitate before announcing the presence of the plague within the city. Charles Carrière, author of *Marseilles Ville Morte: La Peste de 1720*, writes that the plague initially remained discrete. He does not blame the physicians but approaches this issue as though these events were unfolding before our eyes. In this way, the actions of the doctors tend to make more sense. He also writes that as the death rates began to rise the doctors knew, whether or not it was the plague, that there was some kind of contagion ravaging the city.\textsuperscript{14} The plague was beginning to ensnare Marseilles. The false sense of security would soon wane and those who could do so would leave the city in haste. Their attempt to flee would result in the rest of the region being affected by the scourge as well.

As help was beginning to arrive from the royal government those living in Marseilles were beginning to feel the effects of the plague as it grew into a full-fledged epidemic. Even as more were falling ill, the magistrates of the city were posting guards along the streets where the disease had erupted. Certain quarters were hit harder than others and by July 23 upwards of fourteen people were dying each day.\textsuperscript{15} Within the first phase of the plague there was already a widespread shortage of provisions. As the surrounding towns, such as Aix and Toulon, began to hear of what was happening in

\textsuperscript{14} Carrière, Charles, *Marseilles Ville Morte: La Peste de 1720*, 56-57.
\textsuperscript{15} Bertrand, *A Historical Relation of the Plague at Marseilles*, 48.
Marseilles, they shut off all contact. Marseilles, being a commercial city, did not produce its own foodstuffs and relied on the trade with other cities to maintain its food supply. Bertrand writes that Aix and Toulon agreed to set up markets with double barriers outside of the city so that the contagion would not be exacerbated through famine. This agreement was made in mid-August. According to Biraben, the plague had reached Aix and Toulon around the same time. Although it is not expressly stated, it is likely that these cities encountered the plague through the markets they had conceded to set up outside along the roads between them and Marseilles. Plague scholar Jean-Noel Biraben suggests that the localities outside of Marseilles were not touched at random. He claims that “they clearly tend to follow the important routes of communication of the period.” As these markets were set up along the main roads between Marseilles and other cities, his conclusion makes sense.

There was also the concern of a mass exodus which could have brought the plague to other towns. Once it was certain that the disease was in fact the plague, many inhabitants of the city fled. Some sources say within the first month there were upwards of 10,000 civilians who left the city. Neighbors were not likely to help those who fled the city and some died from starvation rather than the disease. In a time of crisis many are often left to fend for themselves. Marseilles became a prison; a breeding ground for plague, death and starvation. How did the locals view their city now that it had been brought to its knees? One of the biggest problems within the city as the disease reached its peak (which was about August 1720) was the removal of the dead bodies from the

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16 Bertrand, *A Historical Relation of the Plague at Marseilles*, 62-63
18 Biraben, “Certain Demographic Characteristics of the Plague Epidemic in France, 1720-22, 537.
19 Bradley, *The Plague at Marseilles Consider’d & c.*, 3.
streets. Within the plague literature I have looked at for this project, almost every single one mentions the horrors of the number of bodies left in the streets. As death rates continued to spike, and more were falling victim each day, there was no one who could remove and bury the dead. Not only was this a sight of graphic terror, it was also a threat to public safety. The general consensus was that the plague was spread through touch and anyone who set foot into the streets became immediately more susceptible to the plague. Richard Bradley (1688-1732) was a professor of Botany at Cambridge and wrote an eye-witness account of the plague at Marseilles20:

“I arriv’d here the 8th and enter’d the Gare of Aix which leads to the Cours, which has always been esteem’d on of the most pleasant Prospects in the Kingdom, but that Day was a very dismal spectacle to me; all that great Place, both on the Right and Left, was fill’d with Dead, Sick and Dying Persons. Carts were continually employ’d in going and returning to carry away the Dead Carcasses, of which that Day were above four Thousand.”21

This somber image resonates throughout the course of the plague years. Certainly during the height of the outbreak, the number of dead bodies in the streets remained a problem. The magistrates and the royally appointed military commandant, the Monsieur le Chevalier Charles de Langeron, sought to fix this problem. Bertrand states that difficulty in moving the bodies was due not only to the number but also how far outside the city the bodies needed to be buried to avoid further contamination.22 The task was often forced upon the poorest of the poor, and eventually it was placed upon the convicts of the city.

21 Bradley, The Plague at Marseilles Consider’d &c. vi.
22 Bertrand, A Historical Relation of the Plague at Marseilles, 166.
Others within the city proposed a more disturbing way to manage the number of dead. “One advised them to make large piles in the public places and burn the bodies as had been done in Genoa during the last plague outbreak there…Another proposed to fill one of the largest vessels in the port with the dead, tow it out into the open sea and there sink it.”23 Neither of these measures were taken by the leaders of the city but not because of their macabre nature. These ideas were placed to the wayside because even if these measures were taken, the dead could still pollute the air. This response is indicative of how the people faced directly with the plague were willing to do anything and everything to avoid an almost certain fate which they saw others succumbing to almost daily.

Ultimately the decision was made to place the bodies in the vaults of the parish churches. Although this was opposed by the physicians as well as the bishop, the masses rose up in rebellion and opened the vaults anyway, in which they placed the dead and covered them with lime. 24 Those who opposed this measure did so for obvious reasons. They were concerned that even after the dead were placed there and the plague epidemic subsided, those doors could not be opened for years to come. It would also be logical to conclude that even if the dead were placed within the vaults that the plague could still spread since the churches were within the city. These two different opinions reflect differing local responses to the plague. Those with power and authority often went against the will of the people, often for the greater good. Nevertheless the fact the people rose up against this decision shows that fear outweighed logic. The problem with the amount of dead and the few means to bury them figures prominently in the imagery of

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23 Bertrand, A Historical Relation of the Plague at Marseilles, 167.
24 Bertrand, A Historical Relation of the Plague at Marseilles, 170.
the plague. This image, by Michel Serre (c. 1721) depicts the way in which Marseilles was in a state of chaos throughout this tumultuous period.²⁵

![Image of the plague in Marseilles](image.png)

*(Image courtesy of Institut National de Recherches Archéologiques Préventives.)*

The scene is certainly gruesome as workers are forced to remove bodies from the streets. The man on the horse is likely a city official. One such man was described by Richard Bradley as a medical phenomenon who had “been continually on Horseback ordering the Slaves who caries away the Dead in carts, or those that were Sick to the Hospitals, enjoys his Health as well as he did the first Day he began.”²⁶ It is possible that the man in the painting is a city official as Bradley cited in his work. Despite Bradley’s opinion the man on horseback is not depicted as a hero in the painting. Although he is the focal point so too is the man who is removing a corpse. The official is dressed well whereas the man on

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the street is in rags. Upon his horse, the official seems to be beating the man on the ground. The artist likely wanted to show this discrepancy between authority and the populace. Here one might consider that although the local merchants and officials learned to get along with men such as Langeron who were sent directly from the crown, the majority of the population would have been placed under a more restrictive government than they were used to as Marseilles enjoyed relative autonomy prior to the outbreak. Nevertheless this image represents the intensity of the situation as well as the methods used for handling it. This sort of systemized response reveals how standards and protocol revolutionized the ways communities were expected to deal with disease.

As the contagion spread to other localities people were encouraged to carry a bill of health with them and to strictly monitor communication with the outside. A document published in Grasse in 1720 outlines how people were to conduct themselves regarding interacting with outsiders, traveling outside the town and receiving goods or merchandise from the outside. This document requires people to carry a bill of health if they are to leave the locality. It was likely sent to many different Provencal towns. The text is printed while the town name, Grasse in this instance, was handwritten in a blank. In her work *Between Crown and Commerce: Marseilles and the Early-Modern Mediterranean*, Takeda describes the *certificats de santé* and quarantines which were ordered by the royal government. This document from Grasse is probably a result of that expanding administration.

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27 It is unclear if the man in the painting is really a “slave” as Bradley suggests. There are other sources that refer to these laborers as convicts (Bertrand) or beggars (McCloy).

Changing medical protocol reflects the importance of public health during this outbreak. This sort of response was different from outbreaks in the past; most notably with the Black Death. People looked to God, or penitence or scapegoats as ways of dealing with the disease. Although this sort of thinking had not been completely eradicated at this time the primary emphasis was put on the medical causes and treatment of the plague as well as the search for a cure.

A most important medical source was written by three influential doctors who worked within Provence throughout the crisis. “A Succinct Account of the Plague at Marseilles, Its Symptoms and the Methods and Medicines used for Curing it” was drawn up by Drs. Chicoyneau, Verney, and Soullier. These were all doctors who were commissioned by the royal government to come and treat the sick. They reduced the plague to five principal classes based on the patients they had observed. According to their description, the first two classes suffered a much swifter death than the others. These classes are all identifiable by specific symptoms and were all cases which these doctors witnessed. The first class did not include the telltale symptom of buboes, which is commonly how the plague is identified, however the doctors note that this was the class which would bring the swiftest death. At the end of describing this class they added the methods they used and which ones were effective or not.

“It is easy to judge by these Accidents, that the Sick of this kind were not in a Condition to bear Bleeding; and even such, on whom it was tried, died a little while after. Emeticks and Catharticks were equally here useless, and often hurtful, in exhausting the Patient’s Strength, by their fatal over-working. The Cordials and Sudorificks were the only Remedies to which we had recourse, which
nevertheless could be of no Service, or at the most prolong the last Moments but for a few Hours”

All of these methods were purgative in some way or another. The doctors believed one had to expel the disease from the body through some sort of bodily fluid. Nevertheless these methods of treatment, as cited above, were often harmful as they dehydrated the afflicted. The doctors went through great lengths to provide the treatment methods for each class. Regarding the negative effects of the purgative drugs one physician encourages the use of these drugs to produce a “gentle vomit.” The pains these doctors took to describe the exact effects treatments had for each strand of the plague reveals their belief in the humoral theory of disease. Humoral theory states that the human body is composed of four “humors”: yellow bile, black bile, phlegm and blood. If any of these were in deficit or excess then doctors believed it was a cause for disease.

Buboes have always been a hallmark manifestation of the plague. As the doctors began to encounter this symptom they began to use a very specific treatment method. The treatment is outlined in detail in the Chicoyneau source. As soon as these sorts of tumors appeared the doctors “attacked them without any delay.” They used a sort of poultice to apply to the buboes as a preemptive step before removal to avoid hemorrhaging or the patient suffering too much pain. In the early stages of the plague the buboes could be very painful. The way in which the author describes the ingredients and application of said poultice is an enlightening look at medical treatment methods of the 18th century:

29 Chicoyneau, A Succinct Account of the Plague at Marseilles, 12.
31 Chicoyneau, A Succinct Account of the Plague at Marseilles, 23.
“If the Tumour was small, deep, painful and one had Time to endeavor to mollify it, we began with the Application of emollient and anodyne Cataplasms, and as the Misery and Desertion would to suffer us to have Recourse to choice Druggs, we prepared on the Spot, and applied war a sort of Pultice composed of Crums of Bread, common Water, Oil of Olives, Yolk of an Egg, or a large Onion roasted in the Ashes, with which we first hollowed, and filled with [molasses], Soap, Oil of Scorpions or of Olives…”

Although this “poultice” seems rather rudimentary it is important to note that the author points out they were not well supplied. They did not have “recourse to choice drugs” so they were forced to make a similar emollient out of everyday items. This reveals that these doctors were willing to try everything in order to save their patients. But their lack of supplies also reveals another purpose which was unintentional. Most other doctors working in the smaller cities would not have had access to the preferred. Therefore this method they came up with on the spot would have been available to all doctors across Provence. This account was written in 1720 and would likely have been accessible throughout the region. Their reliance on everyday items forced doctors to become even more innovative.

When looking at a source written during a specific time period it is always important to address why the author wrote the text. In this case there are many angles one could pursue. First we will look at it from a local perspective. These doctors were writing to inform government officials as well as other physicians about their findings. This

32 Chicoineau, A Succinct Account of the Plague at Marseilles, 23.
would seem like a perfectly reasonable thing to do by today’s standards however for the time it was something new. The frequent communication between the physicians within Provence reveals how the medical community was beginning to unite. This text cites old treatment methods and explains why the doctors chose not to implement them. This information was not placed there trivially but instead served as a way to standardize medical treatment. In this way no one was shortchanged by a doctor who was not well informed about current treatment practices. Doctors had more authority than had been granted previously.

Nevertheless there was still skepticism among the populace as well as the medical community. Initially people were not willing to accept some of the more innovative medical treatments. There were other physicians within the city who recommended other approaches in dealing with the plague and some of these ideas were more detrimental than beneficial. It had been widely accepted that fire and smoke had cleansing powers and were used in times of medical emergency. An ordinance from 1713 outlines the importance of burning goods and livestock which could have been affected by a malignant fever. Therefore when a doctor within the city recommended lighting purgative fires the city council supported the idea wholeheartedly. Bertrand describes this incident and makes it quite clear that most other physicians did not condone this idea. He also claims that Monsieur Sicard, the doctor who had proposed the fires, had refused to visit the sick. Sicard recommended the following:

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33 “De Par le Roy,” 1.
34 Bertrand, A Historical Relation of the Plague at Marseilles, 79.
“…for three evenings successively, beginning about five o’clock, great fires should be lighted in all the squares and marketplaces, and around the city; and at the same time each individual should make one before the door of his house, and burn sulphur in every room of the house, exposing all his clothes and effects of every kind in the smoke…In effect these fires appeared only to increase those of the contagion, in heating to an insupportable degree the air…”

Bertrand scoffs at the magistrates and people of the city who believed that the fires would work in eliminating the plague. The people grasped at such a small hope. There was no certitude in the medical treatments. According to Bertrand, Monsieur Sicard presented his solution with such conviction that the masses believed that it could really be effective. This plan certainly uplifted people’s morale. Nevertheless the desperation in this plan reveals how the population was becoming more aware of the direness of the situation.

This response reflects the transitory nature of the time. The doctors understood not only the importance of medicine but of morale as well. There is a subtle tone within the work which indicates not only do the patients need to believe for themselves but they also for the doctors. If the people do not believe in treatment or a cure then how could the doctors believe in themselves? This is an important development in how people responded to disease. Even though the disease seemed relentless and some people lost hope, the doctors who put their lives on the line every day to try and find a cure reflected an emerging faith in science which had not been as present in previous times.

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35 Bertrand, A Historical Relation of the Plague at Marseilles, 79-82.
It is estimated that about 90,000 people lost their lives in Provence throughout the course of the plague years out of about a total population of nearly 300,000.\(^{36}\) Although this number is impossible to calculate exactly it is the consensus among many scholars that 90,000 approximates total number of deaths. The plague eventually died out in 1722. It waxed and waned throughout the seasons but the whole of Provence was fearful until every locality had a clean bill of health. The local response to the outbreak reveals the chaos which was associated with the plague. People were not only fearful of disease but also total social and political collapse. This section underscores the way in which people reacted to the plague more systematically. Local officials and doctors worked together to ease the strain of the epidemic. Although Provence was certainly a dark place when the plague was at its height, the region was able to recover.

**Section Two: National Response to the Plague**

To set the stage for the national government’s role during the plague years one must begin in 1481 when the countship of Provence was incorporated into the Kingdom of France. Marseilles enjoyed relative political autonomy until it rebelled in 1659 and lost to the royal army. Louis XIV entered the city and ordered the building of Fort St. Nicholas from which the city could be permanently monitored. The governor of the city was to be appointed directly by the crown as well. Nevertheless it is important to note that what Marseilles gave up in political independence it would gain in commercial activities. In 1669 Louis XIV made Marseilles a duty free port and “its career as the leading center of seaborne trade in France took off.”\(^{37}\)

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\(^{36}\) McCloy, “Government Aid in France’s Plague of 1720”, 301.

Louis XIV died in 1715 and his nephew, Philippe, Duke of Orléans, was left as Regent. Louis XV was a mere five years old when his great-grandfather died after a 72 year reign. Philippe remained Regent until 1723, therefore he was in charge during the plague years. This Regent, although he is described as “a man of considerable intelligence, with a wide knowledge of politics, music, painting and chemistry,” was in fact too “absorbed in a life of debauchery to [be able to] pursue a coherent policy which could solve the many problems which faced France.” Nevertheless, Philippe bequeathed some of his power to the Parlement in an attempt to regain the trust and support of many nobles whom Louis XIV placed to the wayside during his reign. He also promised to introduce some important reforms in the machinery of government by setting up a series of councils to manage affairs. The conseil de santé was the group which had the most direct hand in how the national government responded to the crisis. This council, presided over by the Prime Minister, Guillaume Dubois, made the executive orders to deal with the plague. J.H. Shennan argues in his work, *Philippe, Duke of Orléans*, that the council knew “a coordinated government response was needed to combat the terrible plague.” Another scholar claims that the Regent also had a direct hand in dealing with the contagion. W.H. Lewis writes “Orléan’s response was energetic: medical instructions and a team of research workers, free grain and flour, were sent to the relief of the city, and though Paris was in the throes of a financial crisis, he somehow managed to collect and send to Marseilles no less than £63,000 in real money.”

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Before examining how the plague affected relations between the national government and the region of Provence, I note the precedents which had been set by earlier outbreaks of disease. A document from 1713, located in the Cannes Communal Archives, is an Ordinance from the King of France giving protocol directions when threatened by a possible contagion which had originated north of France.\(^{41}\) It reveals that strict governmental control over goods and people during a time of disease was not uncommon and we may trace the ways in which information about public health was spread, how it was dealt with, as well as how communities viewed disease.

This ordinance was dictated in order to address a contagion threatening France from the north, but the document was located in Cannes, a town along the southeastern coast of France. The source’s physical location shows the efficiency of communication between the crown and the people. It was originally printed in Marseilles, and somehow ended up in Cannes. This sort of efficiency allowed for people within the region to be just as informed as those in the city. Even though the contagion was unlikely to reach that far south, it was important that regions along the coast be aware of any possible threat. Suffice it to say that the French government kept its people well informed concerning these types of emergencies. Not only was the ordinance sent to Marseilles, it was written that the “Ordonnance sera lue, publiée & affichée à la diligence des Maires & Consuls, dans les Villes & lieux de Provence”\(^{42}\). This emphasizes the government’s efficiency in relaying important information as well as making sure that not only the heads of the localities, but also the population were receiving said information. Everyone in a border


\(^{42}\) “The Ordinance will be read publically and posted, at the diligence of the Mayors and Consuls, in the cities and localities of Provence.”
This document, in as much as it reveals about how communication between the crown and the realm operated, also dictates the exact steps in order to prevent the spread of disease. The specific issue in this letter was a contagion which had been ravaging the north. The ordinance says specifically “la Maladie contagieuse qui s’étoit faite ressentir dans le Nord, s’est répandue dans les Pays héréditaires de la Mason d’Autriche, & en quelques autres Provinces & Lieux de l’Allemagne…” Therefore the state was well aware from whence the disease could spread, and outlined special precautions that all citizens were to follow. The source also details that no one who lived in a country that still continued free communication and travel with the affected areas was allowed within the realm. It then goes on to outline exactly how to deal with interacting with goods, people and livestock which might have entered from the contaminated region.

The document is divided into twelve sections. Within the first of these, it is written that persons carrying contaminated goods were to have these goods confiscated and burned on site. Any animals which could be diseased as well were slaughtered and burned. Although this may seem harsh, this procedure gives valuable insight into how disease was viewed in the early 18th century. Fire was not a means of punishment, but a means of cleansing. People were beginning to understand how disease could spread. The borders were closed to the north and those who lived within the realm but had family in the contaminated areas were not to have communication with their relatives. Once again, town was to have heard and be able to obey this set of rules. Which is why it was sent down to Provence from the north.

43 “the contagious malady which has affected the North, has spread in the age old country of the house of Austria and in certain other provinces and localities of Germany.”
this was only a means of prevention. It would seem that in this regard, the best offense was a good defense. If the disease had entered the realm it is likely there was little doctors could do to fight it head on. It is important to keep these trends in mind as we approach the plague outbreak of 1720.

Border patrols were also set up along the main roads. These were monitored by certain officers of the region. This procedure is outlined in section IV of the source. Organization and a hierarchy was key in dealing with medical national emergencies. There was a set network and these rules would have been implemented effectively. If not, there would be documentation of another contagion in the years prior to the 1720 outbreak. Communication was vital and efforts were made to ensure that these lines would remain open throughout the crisis. Section IX of the document deals specifically with communication lines. Not only was mail important within the realm, but also internationally. This was how the country remained informed about the possible outbreak in Germany and how to handle the crisis. Couriers were to throw their packages and mail thirty steps from the barrier, where an officer would pick up the package with pincers and then decontaminate it by dipping it in vinegar and different perfumes. They would then pass it along to a French courier who would take the mail to the nearest post office where it would be sent out from there to the designated recipient. This detailed ritual of how to deal with possibly contaminated goods while keeping communication lines open would prove to be very important. France’s response in this situation is similar to that of Britain’s seven years later during the plague outbreak. Although it is unclear within this text what exactly the disease was, it functions more importantly as a contextual source regarding how France dealt with disease. This document sheds light on local, national
and international responses to disease. It prefaces what we will see when looking at the outbreak in 1720.

The national government was active in helping Marseilles and the rest of Provence during the plague years. Paris was not watching from afar but the whole nation came together to help their fellow countrymen. Although France has deep regional divides, the people were more than willing to aid in many different ways. At this point France had a well-functioning bureaucracy as well as an autocratic monarch who could efficiently manage the state. The 1713 source makes it apparent that communication between the different regions and the crown was smooth and effective. The same can be said for the plague of 1720. The national and regional authorities worked in tandem to contain the outbreak as much as possible. That is not to say there were not certain points of contention as there is still disagreement among scholars to this day as to how helpful the national government really was. Through medical, spiritual and economic aid from the national government, Marseilles as well as the rest of Provence was able to fight the plague.

Shelby T. McCloy takes a close look at the national government’s role during the crisis, pointing to major areas in which the national government was responsive and effective. Other scholars, such as Junko Takeda have pointed to the dissention and discrepancies between the regions and the national government, noting that the government used the crisis as a way of asserting control over a thriving merchant driven city. These two opposing views offer unique insight as to how government aid operated but how it was viewed as well. Marseilles was the largest city in France, after Paris, and the plague threatened one of the most heavily populated areas in France.
and remains a port city, and the town’s economic contribution to the state was immense. Takeda focuses her research primarily on the wealthy sea merchants of the city and how their use of commerce as a political tool helped to shape the Early Modern Era. This paper is trying to uncover how people in the Early Modern Era understood and responded to disease. By understanding the socio-political climate of the time, this task becomes easier. McCloy’s work gives a micro-account of the plague years and how much the national government was involved whereas Takeda’s account takes a larger look at the ongoing relationship between the national and local governments before, during and after the plague years. The references to documents located in the Archives Nationales in McCloy’s work allow for thorough and careful analysis of her work as an accurate account of the plague years and the national government’s involvement.

First and foremost the crown sent medical assistance to Marseilles as well as the rest of the region. Some of these doctors volunteered to come on their own but many were sent from the national government, as well as other provincial governments throughout the state. This response was swift, for with the first signs of some kind of contagion people began calling on the power of the state. McCloy writes that the local doctors did not identify the disease as the plague, but only as a malignant fever and some city authorities were not satisfied with that diagnosis. They then asked the government to send other doctors to draw their own conclusions. Two men were sent by the regent from the University of Montpellier by the name of Chicoyneau and Verny.44 Montpellier had one of the top two medical schools in France (Paris had the other) and these men worked tirelessly to fight the plague within Provence. Their account of the plague deals primarily

with the medical symptoms and curing methods, which will be addressed later in this section.

The physicians who were sent by the crown were the best of their day, with the most advanced medical technology. McCloy writes that it is important to note that only chosen physicians were sent by the royal government it was regarded as receiving a “signal honor.”\textsuperscript{45} Local physicians also worked tirelessly to fight the plague. Here lies a point of contention between state and local doctors. The state doctors were paid a salary by the provincial government, and did not charge their patients directly, whereas the local doctors were not being paid by the state to do their job. This caused some tension between these two groups.\textsuperscript{46} The underlying economic strife laced within this conflict directly reflects the sentiments of the provincial governments toward the national government at this time.

The account composed by Drs. Chicoyneau, Verny and Soullier is important for this section as we look at the national response to the plague. This text reveals how the greatest medical minds of the time, the ones who had been handpicked by the state, who understood and reacted to the plague. The document assesses these methods and adds more for each of the following four classes of the plague. The detail provides important information to any other doctor who would be treating other plague victims across the region. This source was published as early as November 1720. The plague would continue for almost another two years. Although this paper does not have the source base to confirm that this report was read and consulted by other physicians, one can conclude

\textsuperscript{45} McCloy, “Government Aid in France’s Plague of 1720,” 307.
\textsuperscript{46} McCloy, “Government Aid in France’s Plague of 1720,” 306
that it was likely the case. However the source this paper consults is a translation from the original French which was published in England in 1721. This in and of itself proves that these medical writings were of great note at the time.

The McCloy source also points to the importance of different medical drugs and treatments which were shipped into Provence from the royal government. Some of the most important of these were used for disinfectant purposes. Solutions known as parfums were used as disinfectant on household items but were also applied directly to the flesh. McCloy cites an incident where an alderman was directing removal of the dead from the streets when he was hit in the face with some bandages from a sick person thrown from a window. According to McCloy, the man washed his face with the parfum in his flask and continued the day without a problem.\textsuperscript{47} These are similar to the parfums we encountered with the 1713 ordinance from the King. The method of purifying letters and other parcels of mail through dipping them into certain perfumes was a well-practiced form of disinfection. McCloy also cites the burning of sulfur and the use of wine, soap and garlic as preventative and germicides. Fire was used as a form of cleansing and disinfection on the 1713 source as well. We saw that animals and goods brought in from a contaminated realm were dealt with in that way.

Although the source includes detailed accounts of the medical aspect of the plague, it lacks feeling. The writing is very scientific, although it describes such horrors. However, it is important to keep in mind that these men were professionals and sought to achieve one task: heal as many people as they could. There are many sources which detail

\textsuperscript{47} McCloy, “Government Aid in France’s Plague of 1720,” 308.
the excruciating suffering and sadness the city of Marseilles as well as the rest of Provence endured between the years of 1720-1722. This source was strictly a medical source. McCloy notes the “magnificent service” which was rendered by physicians such as Chicoyneau and Verno. 48 Parisian physicians of note were Bailly, Lemoine and the Abbé Quintrand. Bailly and Lemoine “labored faithfully…despite the fact that each became sick, Lemoine twice, with the plague. They took to their beds only when compelled and were up serving the public within a few days.” 49 These men who were chosen by the state to administer care did their job quickly yet skillfully. On the other hand, the royal government’s response could have been much more effective in other areas; specifically within the economic realm.

Beyond strictly medical support the national government sent bureaucratic aid as well. In an eyewitness account written by the Englishman Richard Bradley, he observes that the state of things in Marseilles were very bad until the arrival of one Monsieur le Chevalier de Langeron on 12 September 1720. 50 He had been appointed directly by the crown as well as other military commandants who were appointed in different cities had no ties to parlement, and were direct liaisons between the crown and municipal leaders. 51 Bradley writes that upon his arrival, “[Langeron] caused the Dead to be Buried, the Cloaths and Goods to be burnt, and the shops to be open’d for the Sustenance of the Publick.” 52 Langeron is lauded as one who could save the city. Not only was the city in a state of medical emergency, but there were many other aspects of daily living that were

48 McCloy, “Government Aid in France’s Plague of 1720,” 305.
49 Arch. Nat., G7, 1729 ff, There are several letters from various southeastern France officials praising the work of these two doctors. McCloy, 306.
50 Bertrand, Jean Baptiste, A Historical Relation of the Plague at Marseilles, 180.
51 Junko, Takeda, Between Crown and Commerce, 140.
52 Bradley, The Plague at Marseilles Consider’d & c., vi.
now no longer manageable. Many of the city’s elites had either fled, been too apathetic to help, or become ill and the social order within Marseilles was beginning to crumble as the plague developed into a full epidemic.\footnote{Bertrand, A Historical Relation of the Plague at Marseilles, 180.}

Another author of the time, Jean-Baptiste Bertrand, noted that the Marquis de Langeron was appointed by the king to perform a number of tasks. Those tasks being that the local magistrates could no longer adequately maintain such as “[providing] for the public wants, the care of the sick, for the sustenance of the poor and a thousand other things equally urgent and necessary.”\footnote{Bertrand, A Historical Relation of the Plague at Marseilles, 180.} Bertrand goes on to speak highly of Langeron’s work during his time as commandant of the city of Marseilles and its territories. He attempted to keep the streets clear of dead bodies and build the necessary infrastructure to battle the disease. Apartments were built for those surgeons, physicians, apothecaries and other officers who were not natives to the area, but had either volunteered or been sent to help.\footnote{Bertrand, A Historical Relation of the Plague at Marseille, 185.} Although Bertrand, as well as Bradley, speak highly of the efforts put forth by Langeron, Takeda paints a different picture. Langeron was not initially a welcome figure among the wealthy city merchants known as échevins. Takeda questions “how could these two groups, military personnel and elite négociant-administrators, join forces to police the plague stricken city?”\footnote{Takeda, Junko, Between Crown and Commerce: Marseilles and the Early Modern Mediterranean, Johns Hopkins Press: Baltimore, 2011, 143.} Nevertheless, these unlikely groups did end up working in tandem. The merchants’ power was expanded in the absence of any other local government and it was in their interest to maintain friendly relations with the royal military, which provided “the arms necessary to preserve such authority.”\footnote{Takeda, Between Crown and Commerce: Marseilles and the Early Modern Mediterranean, 143}
certain eyewitness accounts do not mention this initial tension, it would seem that eventually both groups took to working together.

Gordon asks how effective the national government’s involvement really was during the plague years, saying that the crown did little to help in the first several months of the plague outbreak. 58 Marseilles was cut off from the rest of France, and provisions were scarce. McCloy argues that although the state did not send provisions as quickly as it should have, ultimately the supplies they did send were the most helpful sort of aid from the crown. Both scholars cite hardships that the region endured prior to the outbreak, such as famine, the year prior to the outbreak. McCloy notes that the officials had to make arrangements within and without France in order to provide food. The famine continued to affect Provence into the plague years. In the Bertrand source, there is a letter from the physician Deidier who inquires to Langeron about the situation in Marseilles. Some of the doctors who were sent from Montpellier had been quarantined in Aix since the beginning of the outbreak, as Aix was the next city hit after Marseilles. Deidier demands to know if, “that besides the cruel malady which afflicts your city, the lower people are overwhelmed with famine and in a state of sedition?” 59 It is because of this sort of information that many modern scholars feel that the royal government should have done more to aid Provence. On the other hand, these letters can also suggest the opposite. Royally appointed officials and physicians having the sort of contact that as cited above emphasizes effective medical and political leadership.

59 Bertrand, A Historical Relation of the Plague at Marseilles, 190-191.
The same year as the contagion an economic collapse of John Law’s banking system left almost no usable funds for the city officials to help the poor.60 These issues left the region in a state of emergency at every level. The state’s initial lethargy did little to raise morale in the affected areas. Once the diagnosis of the plague had been confirmed by the physicians sent by the state many locals fled into the surrounding towns, which resulted in a region wide outbreak instead of being confined to Marseilles. This is important to keep in mind as we analyze the responses to the plague. Although it originated in Marseilles and national aid was primarily funneled there, as the plague spread the other localities were able to receive aid as well. The most immediate royally ordained measure was quarantine. Just as Marseilles and Aix were placed under quarantine, so too were the other smaller towns in Provence as the plague spread. A document from Toulon dated from 1721 gives an interesting insight as to how the royal government was entrenched in monitoring and containing the plague in not just the largest cities. Toulon, before the plague was a city of about 26,000 residents, about a third the size of Marseilles’ 90,000.61 The document in question is a declarative act on the state of health in Toulon, claiming a clean bill of health. The heads of the committee who composed this report were Monsieur Dupont the royally appointed Commandant of the city and a lieutenant consul of the king, Monsieur d’Antrechaux. The act was written on November 17, 1721 on the 28th day of the latest health quarantine.62 The previous quarantine of the city had been lifted after 60 days of no new cases of the plague,

60 Gordon, “The City and the Plague in the Age of Enlightenment, 72.
61 Biraben, “Certain Demographic Characteristics of the Plague in France, 1720-1722, 541.
62 “Acte Declaratif de L’état de Sante dans la Ville de Toulon,” Archives Municipales de Cannes, 1721.
however the surrounding hamlets had been affected and the city could not receive an official clean bill of health. This document reads:

“Il a été représenté par Monsieur d’Antrechaux premier Consul qu’il convenoit pour meriter la confiance de nos voisins & des Nations Etrangeres, de manifester par un Acte le bon Etat ou se trouve cette Ville, qui n’a eu nulle atteinte de Contagion depuis quatre vignts jours.”

All three perspectives, - local, national and international - were interwoven at the time. The royal Commandant was well aware that the city of Toulon could not receive a clean bill of health unless it was approved by the crown. He also knew that “foreign nations” would continue to avoid having contact with the city as well as the nation as long as the plague continued. It would comfort outside nations if they felt the plague receding or even subsiding. On a local level this document shows how delicately things were handled and processed within an average size city in Provence. Outside of Aix and Marseilles, the eyewitness accounts tend to thin out and administrative documents such as these are helpful when assessing how the plague affected smaller towns. There was a subsequent document composed nearly a month after the one aforementioned which confirms the state of health within Toulon. This document is extremely important as it mentions the plague specifically. Documents at the time often used words such as “contagion, malady, disease, illness.” Although most of these terms are referencing the plague, it would seem city officials did not prefer to use the term within legislation. It is likely they

63 “It has been attested by Mr. d’Anrechaux first Consul which convened to merit the confidence of our neighbors and foreign nations, to manifest by an Act of a good state of health which finds this City has not had any cases of Contagion in 80 days.”

64 Acte Declaratif de L’état de Sante dans la Ville de Toulon,” Archives Municipales de Cannes, 1721.
did this so as to avoid panic. These pieces of legislation were located in the Cannes municipal archives, under the category “public health.” It is likely that notices such as these were spread throughout Provence by either local or national officials to ensure other cities of the health of their particular locality. These documents were relatively small, about two to three pages in length.65

Approaching this from an economic perspective the royal government would have wanted to ensure that trade throughout France would not be disrupted while the plague was ravaging the southeastern coast. The Midi was an extremely important economic center. Marseilles was a trade hub for goods coming in from the Levant. Once it had become a duty-free port for Levantine commerce the royal government placed health

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65 “Acte Declaratif de L’état de Sante dans la Ville de Toulon,” Archives Municipales de Cannes, 1721.
management within the city under royal control and patronage. Since Marseilles was a center of commercial expansion the developments which threatened it were seen as national and not local concern. Nevertheless the local government saw public health as a civic matter. As the royal government was attempting to streamline the bureaucratic process and assure the health of the public, the locals within Marseilles were certainly frustrated by this kind of hands on governance. However the men who were in charge of the Bureau de la Santé were merchants and traders even though they were appointed by the crown. The logic was that merchants would want to avoid plague above all else since they had much to lose if there was some sort of outbreak. The commercial concern with the outbreak of 1720 reflects how the royal government saw itself in relation to the economy as well as its responsibility of public health. There was certainly an influx of royal support and control during the plague years. Whether or not this stemmed from commercial, security or administrative centralized state-building motives, the national government was more actively involved than during previous crises.

The national government sincerely wanted the best for the nation. One may conclude that although there was tension between the crown and the commercial power of Marseilles, the national government ultimately offered aid. The question remains, did the government offer aid to the best of its ability? And do we measure that ability by today’s standards? Or by the norms of what had been a relatively hands off national government until the rise of Louis XIV? This paper would argue that the state put forth as much effort as it saw fitting for the situation, however by today’s standards and our

perceptions of a strong national government, the aid from the crown fell quite short. McCloy argues that within the eyes of the royal government they expected Provence to do all it could before the crown needed to step in, and that when it did realize the helplessness of the situation the state did a “very credible job of rendering aid.”69 There was also an ideological push behind the royal government’s aid. Takeda claims that “the narrative of perfect republics, their fall and their restoration embodied a set of behavior patterns, models and metaphors that Marseillais administrators deployed in 1720 in response to the plague.”70 This assessment reveals how people in an age of increasing rationalism were attempting to do more than just fix the problem. This crisis presented itself as a way to impart certain modern ideological perspectives on a population. This sort of ideology condemned Machiavellian antics to achieve wealth and power, and instead promoted working together for the common good in a moment of crisis.

The national response to the plague reflects a shifting, more modernizing mentality in dealing with and responding to crises. Internationally, the response to the outbreak was also viewed with gravity. England produced a large amount of plague literature about the 1720 outbreak. Through examining their response to disease we may continue to analyze how socio-medical perspectives were changing within the early-modern era.

69 McCloy, “Government Aid During France’s Plague of 1720,” 316.
70 Takeda, Between Crown and Commerce: Marseilles and the Early-Modern Mediterranean, 142.
Section Three: International Responses to the Plague; primarily England.

The plague outbreak in Marseilles triggered a slew of international responses. As Marseilles was a major port city, there was reason for concern. Many goods which would be transported throughout the rest of Europe would pass through Marseilles. Although most other countries were primarily concerned with their own safety, England had a vested interest in the happenings in Provence between 1720 and 1722. There was a plethora of plague literature published ranging from poems and songs to entire stage productions. Speculations can be made as to why the British were so concerned, and one could even say fascinated, with the plague epidemic in France. This paper will argue that fear and trauma were the major factors which led them to fixate on the outbreak.

London was struck by the pestilence in the great outbreak of 1665. Many of the primary sources published in England about the plague in Provence refer back to the London outbreak and one source specifically combines an account of the London outbreak with the one in Marseilles. The British were traumatized. Their fear drove them to attempt to understand the outbreak in Marseilles and this is apparent in the more empirical sources, which describe in gory detail the physical trauma of the disease as well as methods used for treatment and how the plague spread geographically. On the other hand, fear is not an adequate answer for why the British would produce so much popular literature on the matter. There is an underlying sense of gratitude that they are not the victims of this pestilence yet again. The plague reminded them of their own mortality.

and how they were being spared, when nearly 60 years prior, they had not had been so lucky.

The British interest is similar to the masses who attend a public execution. They were all reminded of their freedom and their life when watching someone lose those things humans hold most dear. The plague outbreak in Provence represented something similar to those who witnessed it from afar. The symbolic “execution” of Marseilles, as well as Provence, was a public reminder to the rest of Europe that they could be next, and England, having escaped the noose once, was not ready to revisit the gallows. The “spectacle” of public execution could be likened to the celebrity status of the city of Marseilles. One could argue that the geographic location of the city on the Mediterranean promoted more international interest than if the plague had occurred in an inland French city such as Lyon.

There is evidence to suggest that the plague outbreak in London was not as severe as that of Provence. Jean-Noel Biraben noted that the “The London epidemic of 1665 was much less violent than that of Marseilles; only about 15% of the population died and whole quarters remained untouched.” 72 This supports fear as a primary catalyst for England’s interest. As the epidemic continued to worsen, the British would become acutely aware that their own 1665 epidemic was dwarfed by that of France. This meant this version of the plague’s ferocity could cause even more damage than before. Shelby McCloy claims that the plague epidemic in Marseilles and Provence was probably the greatest bubonic plague outbreak since the Black Death of the fourteenth century. 73

72 Biraben, “Demographic Characteristics of the Plague in France.”
Placed within this context, the outbreak in France would have terrified its European neighbors. It was a combination of fear and morbid curiosity which drove the British to have such an adamant interest in the plague outbreak in France.

One source displays both of those aspects: “The Plague at Marseilles Consider’d & c” by Richard Bradley in 1721. It is interesting to note that as we keep in mind this is a study of reception of the plague in an era of rationalism; that the dedication is made out to Sir Isaac Newton who was President of the Royal Society at the time. It is apparent at the beginning of this source that the author’s goal is to explain the symptoms, treatment and spread of the plague in a scientific and empirical way. Reflecting a desire to understand the plague on a medical level so that, if it did reach the shores of England, they would be able to identify it and treat it as soon as possible.

A delayed identification of the plague is what allowed the epidemic to rise quickly in Marseilles. There was contention among physicians who believed the contagion that had entered their realm could not possibly be the bubonic plague. By 1721, when the Bradley source was written, it was certain that the malady was indeed the plague and there it was continuing to spread. Therefore, within the preface of his work he cites two letters from French doctors. One physician wrote from Aix, the next largest city to be struck by the plague, and this account confirms the timeline as constructed by Biraben in his demographic study on the plague. The letter goes into detail about how to identify the plague, and its primary symptoms. The physician wrote that the outbreak in

74 McCloy. “Government Aid in France’s Plague of 1720.”
75 It is unclear from the source whether or not these letters were sent directly by these French physicians directly to English recipients, or if they were published and then translated into English. The second letter from Marseilles is identified as having been sent to a Mr. John Wheake, and he gave our author the abstract.
Aix was manifested more violently than the diseased in Marseilles. He wrote, “it [the diseased person’s body] breaks out in Carbuncles, Buboes, livid blisters and Purple Spots…”⁷⁶ Among other preliminary symptoms he writes about the signs of a rapid death which included pains in the head, “consternations”, wild looks, a trembling voice, “cadaverous face”, coldness in all extremities, low irregular pulse and “reachings to vomit.”⁷⁷ These were all noted as forerunners of sudden death.

This brief letter in the preface of Bradley’s larger work sheds light on what kind of information the English (and the rest of Europe) were trying to obtain. They wanted to know how this strain of the plague was manifesting itself. Although they would not have understood there could be different strains of the disease, they knew it could manifest itself in different ways. If there were no telltale buboes (as there were in Aix, but not at first in Marseilles) then there needed to be other ways of swiftly identifying the disease. Even within the subtitle of his work Bradley wrote it was “Published for the preservation of the people of Great Britain.” There was an international crisis to keep the plague from spreading and to prepare for the worst in case it did. Another interesting note within this letter is that the doctor alluded to dissecting corpses, in which he discovered gangrenous inflammations in all lower parts of the belly, breast and neck. This information was added at the end of the letter, almost casually. It is this sort of curiosity and the belief in science and medicine which allowed for post-mortem dissection of plague victims. This letter is very telling of how doctors viewed the disease in the twilight of the early-modern era. There was no mention of God in this letter, only medical facts and observations. Not

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⁷⁷ “Reachings to vomit” could be taken to mean the need to vomit or “retching.”
only does this reflect the desire of French doctors to understand the plague but that this was then published in an English document of the same era, reflects the idea that the understanding of disease was shifting.

The second letter in the preface was written on September 15, 1720.\textsuperscript{78} The author described the scene he encountered when entering the city on September 8. The plague had escalated in August and this source supports what other secondary sources claim, as the author shared in detail the death and destruction within the city. He wrote, “…carts were continually employed in going and returning to carry away the Dead Carcasses of which there were that Day above four Thousand.”\textsuperscript{79} The streets were filled not only with bodies but with clothes and household goods as well. Although this may seem barbaric, it would indicate that the residents of the city understood that anything which may have been touched by the infected could then go on to infect others. The author cites that the city was low on food supplies and medicines as well. Nevertheless, this was the state of the city upon his \textit{arrival}, he was writing on the 15\textsuperscript{th} of September. At this time the city was in a better place. Certain officials had arrived to aid the state of the devastated city. One such person was the Marquis de Langeron, who the author claimed, aided the city tremendously by ordered the dead to be buried and the sick taken to hospitals. But who performed this labor? It is noted in various sources that beggars and other impoverished groups were forced to do this.\textsuperscript{80} Although this doctor who wrote this letter said Langeron “does Wonders,” these wonders were performed at a high cost. Sacrifice of the lower

\textsuperscript{78} There is no way to tell if this physician is French or English and there is no proof in this source to indicate there were any English doctors sent to France as early as 1720.
\textsuperscript{79} Bradley, “The Plague at Marseilles Consider’d & c.” vi. This death toll is probably slightly over-estimated.
\textsuperscript{80} This source claims this was done by slave labor, where as other more modern sources (Biraben, McCloy) cite the workers as impoverished peoples.
classes in order to control the contagion does not seem to be a rational way of dealing with and responding to disease.

This second letter certainly sends a very different message than that of the first one. It appears as though Bradley was attempting to appeal to both sides of the spectrum; one side which sought after rational and medical knowledge; and another which focused on God’s providence. This is addressed in the latter half of the second letter. The physician writes, “It is the assistance of heaven we ought to implore and to wait for a blessing from thence upon our labours.” 81 Although the author of this second letter was a doctor as well, this gives a very different sense than we get from the first letter. This doctor gave no account of any physical or medical symptoms nor did he cut open any cadavers as did the physician in Aix. These two opposing messages give us insight into how different doctors, during a time of socio-medical transition, understood and approached disease. Was it fear which led the second doctor to ultimately call on the divine grace of God and give up all hope of a medical cure? It would certainly seem so. The doctor from the first letter, although he did not reference any sort of cure, was actively trying to understand the plague.

So why did Richard Bradley write this text? It is nearly 60 pages long. He claimed it was for the preservation of the people of Great Britain, as we have already noted, but it also has an international appeal. He was writing for other nations who expressed similar concerns about another mass epidemic of the plague. As far as they were concerned, no one was safe. It was to inform others about how to handle the plague and keep it from

81 Bradley, The Plague at Marseilles Consider’d & c, viii.
spreading. He was especially concerned about international trade. He wrote about England’s strict quarantine protocols for goods and sailors before being allowed to come ashore. At this point in the text we are given a glimpse into how other nations, aside from England, have been responding to the epidemic in France. Bradley wrote:

“The neighboring nations of trade have followed our example, the Hollanders in an extraordinary manner have even ordered the burning of the very ships and goods coming from Marseilles, and have been so cautious, as to suffer none of the passengers to come on shoar, without being first dis-robed of all their apparel and even to be well washed with the sea water, and then likewise to perform Quarantine in a little island remote from the inhabitants.”

These were noted as extreme measures, but we must remember the Ordinance of 1713, which ordered the burning of goods, merchandise and animals from areas in the north which suffered from some sort of contagion. What Holland did was not necessarily as extreme as Bradley indicated. It is why he thinks this, which indicates a shift in thought about disease. These sorts of measures were no longer seen as effective or necessary. This bit of information about Holland allows for international contextualization as our focus remains on Britain and their responses to the epidemic.

In another form of contextualization, Bradley gave us some insight into the lives of those who fled Marseilles whom he regarded with a sense of both fear and pity. He wrote “…the very aspect of our Neighbors strike such horror…in us, as if they brought our death and destruction with them…” and yet he called for others to help end the

82 “De Par le Roy,”1.
83 Bradley, The Plague at Marseilles Consider’d & c, 2.
pestilence in every way possible to avoid a continent wide epidemic. On a more dismal note, he cited what happened to many inhabitants of Marseilles, those who tried to escape by fleeing the city out to the country were murdered or starved to death by the inhabitants there.\textsuperscript{84} Desperation was rampant among the inhabitants of Marseilles, but this part of the Bradley source allows us to understand how other localities responded to their neighbor’s crisis. The most obvious overarching theme here is fear. People were willing to murder their own countrymen, who were trying to escape death. In this sense the people of Marseilles were doomed, trapped to live out their days until finally the pestilence wore itself out. England and other countries were witnessing this symbolic death of an entire city and possibly an entire region.

At this point in the analysis of the Bradley source, we come across the “public execution” theory. England, as well as other outsiders, were convinced Marseilles was dead. This great city was bound to fall. In a sense, Bradley even wrote a eulogy for Marseilles. He gave a history of the city as well as a detailed physical description, as though he were attempting to preserve Marseilles in the pages of history, since surely she would burn.\textsuperscript{85} This was a common notion, there was no way the city could recover from the devastation of the plague outbreak, and for some reason an Englishman took it upon himself to preserve the tradition of this great port city. This reveals the fascination and blind acceptance that even once the disease wore itself out, the damage had been done and Marseilles would fall. \textsuperscript{86}

\textsuperscript{84} It is not clear what he meant by “Country people” or where geographically he is referencing; whether he means further into Provence or other regions within France, or even across international boundaries.

\textsuperscript{85} Bradley,\textit{The Plague at Marseilles Consider’d & c.}, 4-8
Daniel Gordon argues that the way in which the people of the 18th century responded to this outbreak of the plague through so much literature as opposed to the Black Death in the 14th century, reveals how people understood disease in the wake of the Enlightenment.\textsuperscript{87} Plague literature, such as the account we have been examining, was popular not only within France, but stretched across borders into the psyches of those who heard tales of the contagion. One of the most unique images of popular plague culture is a song written in English about the outbreak in Marseilles. Published in 1721 it was distributed throughout England (most likely London) as an image of the plague which was ravaging their neighbors:\textsuperscript{88}

\textsuperscript{87} Gordon, Daniel, “The City and the Plague in the Age of Enlightenment”, \textit{Yale French Studies}, 68-69.
\textsuperscript{88} Ghent, Thomas, \textit{God’s Judgments Shewn unto Mankind. A True and Sorrowful Relation of the Sufferings of the Inhabitants of the City of Marseilles in France, Now under the Dreadful Calamity of the Plague, Pestilence and Fevers, with the Manner of Its Infecting Them by Vomiting, Pains in the Head, or Purple Boils under Their Arm Pits, the Number of the Dead Being above Fifty Thousand. And Lastly the Cause of It, and from Whence It Came, by a Strict Order from the Regent to the College of Physicians at Capentras. Tune Of, Aim Not Too High}. London: s.n., 1721.
The instructions at the top suggest singing the rhymed versus to the tune of “Aim not too High.” The author claims the poem offers a “true and sorrowful account” of the plague at Marseilles, where according to his numbers, over 50,000 had died. The image above is the text in its entirety and although it is difficult to read it is important to include here to show the imagery that was associated with plague literature. The images at the top of the page are macabre and rudimentary in nature. They appear to be woodcut engravings. This is similar to the sort of plague imagery one comes across when looking at images from the Black Death in the 14th century. There is an interesting dichotomy here between Gordon’s assessment of plague literature in the age of enlightenment and how it is represented in this English source. The archaic imagery, written for a popular audience contrasts markedly with the Bradley account. This appeals more to how the masses responded to the plague in the early-modern era.

Although this is not a French representation of the plague, this document reveals how people across the channel would have understood the disease. England was still reminded of the plague outbreak in 1665, and they were consumed with understanding how and why the plague would hit again, albeit elsewhere, less than 60 years later. The people wanted reports, such as Bradley’s, recounting how the plague was moving across Marseilles, how the disease was identified and what measures were being taken to keep it contained. But this image was produced organically from within the boundaries of England. They were not suffering and yet there is popular imagery and literature from the plague outbreak in Marseilles. What does this say about how people understood and responded to the plague overseas? They understandably wanted to keep abreast of the

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progression and treatment of the disease out of fear for their own safety. Daniel Gordon claims that “the assumption that every age produced whole works of literature that describes the effects of its worst disasters is true for the last three centuries, but false for the periods that came before.” Therefore, he indicates that the 1720 plague outbreak occurred as this trend began to take form. He does not claim that this event incited this trend, but he includes it as the plague visitation which was represented literarily and artistically to an extent which far outdoes that of the Black Death or other outbreaks.

On the other hand, Gordon does acknowledge that there are disasters (disease epidemics specifically) which are not pertinent in recent memory. He cites the Spanish influenza outbreak of 1918-1919 which killed more than 20 million people. His explanation for this is that the human condition can only bear to remember or memorialize so much suffering. The outbreak of 1720 occurred at a time of relative peace and prosperity on the European continent. The population of Europe was growing and more people were educated. They were approaching the Enlightenment. Therefore, one could argue that the plague was so focused on in this instance because other than the terror of an epidemic, the world was otherwise becoming a prosperous, healthy place.

There is no way to tell if this is the case, however England’s response to the plague outbreak indicates that the British were occupied at every level of society with monitoring the epidemic. Gordon furthers his argument by claiming the rise of plague literature as “a counterpoint to enlightenment discourse rather than as a direct response.” Therefore, the more popular forms of literature produced during the

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91 Gordon, “The City and the Plague in the Age of Enlightenment”, 69.
epidemic might be considered a counter to growing Enlightenment ideals. It is unlikely that this was one of the primary motives for producing this work, however it is important to keep in mind as we begin to assess the text. Below are a few excerpts of the stanzas of the song:

“In France there is a City, I declare
Call’d Marseilles, beautiful and fair
From whom this sad Account, alas! We have
The Plague has thousands sent unto their Grave

Some Say it by a treacherous Merchant came
Whom God did cause to suffer by the same
Who as some Silks he were opening, he dy’d
And other struck with Death were then beside

But wise men say it is Unwholesome Air
Driven from Land to Land by Winds, that were
So violent as thro’ that place it past
Until at length it laid the city waste.”

These verses are ordered the way they appear in the text. The author provides a detailed factual account. The text doubles as a means of inciting fear among the population as well as informing the masses about how the plague has spread. The plague had been identified as coming in through the port of a merchant ship and specifically via the silks the ship carried. On the other hand the text cites a different cause from the plague, which is the idea that it could have been brought into Marseilles through “Winds” carrying “Unwholesome Air.” This is a theory which Richard Bradley touches on in his work about the plague. 93 He postulates that the disease could be carried through these winds carrying insects which could spread the contagion. The script says some “wise men believe” that plague is carried in by winds. This author very well could have had access

93 Bradley, The Plague at Marseilles Consider’d & c., 33-34.
to Bradley’s work and the wind theory had been mentioned by other scholars before. This author in particular seems to adhere to the theory that the plague was brought in through the air as opposed to one merchant ship. To those who did not understand disease as we do now, it would have certainly been difficult to understand how an illness could spread so far from such a small source. In is interesting to note that Jean-Baptiste Bertrand rules this possibility out entirely when he discusses the origin of the plague in the 1720 outbreak.94 This text reflects that discrepancy among the scientific community but it is important that the author did present both sides.

Throughout the rest of the text, Ghent focuses on the human suffering, social unrest and medical traumas of the plague. He touches on every facet of life as the poem describes the state of Marseilles as well as the rest of Provence. At one point in the song/poem he illuminated some of the social issues which were ravaging the city. Many robbers and vagabonds were pillaging through the city, stealing what they could from the homes of the dead. This is something that is not focused on as much in the Bradley text. These were the harsh realities of economic and social upheaval. Ghent also includes description of the physical suffering of those who were afflicted as well as the animals who were affected as well. Throughout the majority of the text the people of Marseilles were presented as victims of the pestilence. It is only at the end of the work that the title of the text comes into play. Remember the title “God’s Judgment Shewn unto Mankind.” This indicates that the plague was a punitive measure from God, instead of an awful twist of fate. In fact within the last two stanzas of the text, the true meaning behind its creation is revealed. It is not a condemnation of the people of Marseilles, but in fact a warning to

94 Bertrand, A Historical Relation of the Plague at Marseilles 19-23.
the “Christians of England” who need to maintain their piety so that God’s wrath does not turn upon them again. It is interesting how the author focuses so much detail on the gore and suffering of the people in France in an attempt to admonish those within his readership.

The dichotomy between the medically focused introduction to the work and the religious closing highlights the shifting socio-medical perspectives of the late early-modern era. This source reveals how the plague outbreak in Marseilles could be used as scare tactic for certain religious leaders. Although God’s wrath and God’s mercy were taken into account, even by certain physicians, there was a much more direct focus on the medical aspect of the plague. Physicians and surgeons were beginning to have faith in the progress of science. These sources allow for us to see a shift through assessing response to disease across international borders. The Bradley source represents that tension as well. The letters from the two French doctors reveal two very different approaches to handling the disease head on. One was very scientific and medical, whereas the other appealed to the grace of God in order to save those who were ill.

England crystallized this event in many different works. The amount of plague literature from this era is remarkable. French authors played a primary role in recording this event, but that is to be expected. Nevertheless a French historian gives us his own reasoning as to why there was already so much being written about the event as early as 1721. Jean-Baptiste Bertrand, who composed A Historical Relation of the Plague in Marseilles during the plague years, noted in his work that there were many writers who were beginning to record the event within a plethora of genres. Bertrand writes:
“When so vast and fertile a field was opened for persons of all descriptions and talents to write, it will not appear surprising that, as the malady subsided, so many took up the pen. The troubles and disorders of the contagion, the terrible mortality it occasioned and the singular events to which it gave rise, furnished ample matter to the historian for the exercise of his genius; the physicians found a no less powerful stimulus to theirs in the symptoms and accidents of a malady so dreadful; while the poet could not fail to seize on an occasion which furnish him with such grand, such sublime, and at the same time such terrible ideas for the exercise of the imagination.”

Bertrand invokes the idea that the plague was a force of inspiration among writers in all fields. He is certainly accurate is his assessment. This can transfer across the channel as we examine certain primary sources which emerged from England at the time. Bertrand almost presents the large amount of literature as a way in which people were taking advantage of the outbreak as something to write about, in order to practice their craft. As the early-modern era was drawing to a close, this could have been the case. As Gordon suggests, it is only within the past three centuries that certain disasters have figured in any sizeable amount of literature. This reflects a shifting response to and understanding of disease. It also points to an evolving understanding of the human condition. People wanting to chronicle events such as what occurred in Marseilles in 1720, especially authors doing so in a country other than France, would point to a new, more global

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understanding of humanity; or at the very least a Western one. It is striking that as early as 1721, Bertrand was noticing this trend.

At some level the British wanted to aid Provence, yet they were just as strict with quarantines as the port of Marseilles. An article which makes this claim was published in 1900 as an assessment of the last major outbreak of the plague in the west. The article notes that “…it [the outbreak in 1720] caused a panic throughout the rest of Europe but happily did not spread beyond the confines of Provence.” This article takes an interesting perspective on the plague years. The details about the outbreak given in the article are only cited by reference to a source called A Journal of the Great Plague of Marseilles, however the author is not mentioned. This journal gives excerpts from the document sometimes edited with the commentary. One such example being: “Cowardice of the Doctors; the doctors as a class do not seemed to have behaved well…” then a later section claiming “No Doctors and No Drugs; In the middle of September there were neither doctors nor drugs.” We know this to be false as other sources confirm the arrival of doctors as early as August. This excerpt does not reflect how the British immediately responded to the outbreak in Marseilles, however it is a good source to reflect how the impact of the event was still carried in recent memory.

As recently as the 20th century, England was still concerned with 1720, showing that the outbreak remained in collective memory for quite some time. Suffice it to say that the plague outbreak of 1720 has now been excluded from recent memory. Author Charles Carrière notes how among the streets of Marseilles in contemporary time there is

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almost no trace of the horror that gripped the region during 1720-22. The plague in Marseilles affected England within many levels of day to day life. The literature that emerged from the period and even a little later sheds an interesting light on the international response. Although it is difficult to understand why the British chose to document the plague the way they did, their efforts reflect a more modern understanding of disease.

Even today we react to international disease crises in a way that is similar to how England did over 300 years ago. The international news coverage of the Ebola outbreak in 2014 reflects just that. People are concerned with their own safety. Just as Americans were terrified at the idea of an Ebola crisis in the US, so too were the British during the plague of Marseilles. But there is another level to the international interest. Just as people are concerned with remaining safe, they are intrigued by tragedy. This has been true for at least the past 300 years as we have seen from the texts that have been analyzed in this work. Yet, it is interesting that now the plague of Marseilles has all but disappeared from popular memory. The Lisbon earthquake occurred merely thirty years after the plague at Marseilles and yet it is far more present in the collective conscious. It elicited many responses from international contemporaries and is the subject of many scholarly works today. One scholar argues this is the case because “in many ways Lisbon was a watershed event, separating modern from older ways of reacting to disasters and interpreting natural events from a scientific instead of theological view point.”

How is it that some tragedies remain so prominent in the collective conscious and others are forgotten in a

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relatively short amount of time? The Lisbon earthquake is labeled the first “modern”
disaster, but if we are defining “modern” by an involved government response and a
scientific approach, then the plague outbreak in Provence reflects a more rational
approach to disease.

**Conclusion**

Marseilles represented a convergence of a modern commercial drive and
independent enterprise. The ability to understand the outbreak in such detail leads to
strong conclusions. Moments of crisis can often reveal the true nature of a society and by
examining the different responses to the plague outbreak in Marseilles in 1720 we have
seen how the responses from local, national and international populations reflect the end
of the early-modern era transitioning into modernity. The locals who experienced the
plague first hand responded to their situation with swiftness and exactitude. Although
there was mass panic initially, the way the masses were able to standardize treatment
methods and protocols reflects a transition away from an archaic understanding of disease
and disorder. Authors who chronicled the event from within allow for modern scholars
to walk through the event day by day. The official ordinances from the royal government
as well as medical journals give us the opportunity to understand how and to what extent
the national government was involved. Poems, imagery and personal accounts of the
plague which were produced from an international audience reflects how the rest of the
world viewed the outbreak and where they placed themselves within the context of the
crisis. This project has employed all of those approaches in an attempt to examine how
people responded to and understood disease during a transitional period.
Cultural, social, medical and political climates all factor in when examining events such as what occurred in Marseilles, and the rest of Provence, in the years 1720-1722. So what may we conclude from the different factors which have been examined in this project? Culturally people were becoming more aware of each other as the world was becoming more interconnected. There had been international trade going on for centuries yet Marseilles represented something new and different: autonomous commerce and prosperity. The wealth and success of the échevins represented a new form of prosperity which could be available to the world. These merchants were not the type of middle class we know today but they represent the idea that one can become wealthy and powerful without a title. These were the men who ran the city along with royal government officials when the sitting government in Marseilles abandoned its posts at the onset of the plague.

On another cultural level, the rise of the importance of the public sphere as well as intellectualism were developing within Marseilles at this time. As Daniel Gordon suggests, civil society was in its beginning stages and the importance of autonomous spaces was growing. Marseilles displayed this development until its growth was stunted during the plague years. Nevertheless the crisis reinforced the desire of the population to fight back against any force that would threaten the vibrancy of the modernizing city. Although this is applicable to Marseilles, this paper argues it is not applicable to the rest of Provence during the plague years. There is certainly something to be said though about the rise of intellectualism and the response to disease especially one with so much symbolic meaning. The plague represented the worst form of contagion. People associated the plague with almost certain death whereas the city represented thriving,
vibrant life. This dichotomy reveals itself as people responded to the plague in Marseilles. As we have seen, the plague struck fear in anyone who encountered it. Many people had little to no hope in making a recovery yet they still placed their faith in medicine.

Medically this outbreak of the plague reveals an enormous shift away from religion as a means of solving the problem. We see popular interest leaning away from the need for religious condolence toward medical expertise. The medicalization of the plague years in Marseilles is akin to how we see disease being approached today. There is more pressure placed on the doctors to be correct in diagnoses and treatment methods. Although there was some pressure put on the clergy to pray and administer to the dead and dying, the majority of those tasks were placed upon the doctors. This was certainly not a direct shift which occurred solely during the plague years at Marseilles, but through studying this outbreak specifically one may draw these conclusions with certitude. As we have seen in some of the primary literature about the plague, God plays a role but not an active one. He is presented more as a consoling bystander than an engaged player. People pray for his mercy but ultimately feel that it is up to them to solve the problem.

This is where antediluvian practices of previous plague outbreaks were no longer implemented. When people felt they needed to act in order to save themselves many did not turn to medicine. In the case of the outbreak in Provence there were not any persecuting movements. There is no indication of violence against Jews or any other minority group. Scapegoating reasons for disease was common in the outbreak in the 14th century and remained so up through the 17th century. The heyday of witch trials was primarily during the 1600’s yet there is no indication of that kind of persecution during
the plague years either. Nor were there any penitential movements. The most recent plague outbreak had been the 1665 London plague and there are marked differences between the two. According to A. Lloyd Moote and Dorothy C. Moote, authors of *The Great Plague: The Story of London’s most Deadly Year*, there was little, if any, bureaucratic organization. Charles II fled, leaving a couple of privy councilors and the Lord Mayor to maintain control. Local doctors and apothecaries also left.\textsuperscript{101} Londoners were encouraged to self-regulate (quarantine, burial, etc) whereas the Provincial residents were regulated by the local and national authorities. James Robertson, who wrote a review about the Mootes’ book, argues that the strict regulations of quarantine and construction of plague hospitals which were present on the continent (France specifically) played a major role in confining an outbreak’s severity.\textsuperscript{102} The differences between the 1720 and 1665 outbreaks reflect the increased organization in dealing with crises at a local and national level. We must take a moment to reflect on some of the crises this paper has looked at in addition to the plague in Marseilles. The London outbreak in 1665 and the Lisbon earthquake nearly one hundred years later in 1755 both occurred in each country’s capital city whereas Marseilles, although important, was not the first city of France. The ability of the national government as well as the local officials to effectively work together reflects this trend towards secularization.

This shift reflects people’s belief in their own abilities rather than waiting on God’s mercy. The population of Marseilles as well as Provence displays how the waning early-modern era was morphing into modernity as we know it today. The people in

\textsuperscript{102} Roberston, James, “Review,” 900-901.
Marseilles turned to the church for moral support but other than that they were more focused on ensuring the safety of the inhabitants of the city; whether from the threat of disease or starvation. As we have seen it was the population who opted to place the countless number of dead within the church vaults against the will of the bishop. This secularization of holy spaces reflects the shifting mentality of the early modern era. These cultural and medical changes reveal how people perceived disease and death in an era of increasing rationalism.

The political climate has reflected that transition as well. We have looked at the bureaucratic infrastructure within Marseilles at the time of the crisis. The national government’s involvement displayed an effective and well-coordinated means of responding to the epidemic. Communication between the crown and the nation was swift and detailed. The royal government was kept well up to date on the development of the crisis as well as the local government’s response. Although one could argue the crown took advantage of the crisis to implement more control over the city, it is evident that the city and the crown relied on each other for support. Marseilles was an economic hub which was important for not only local, but national commerce. Nevertheless the city relied on the surrounding localities for foodstuffs and other daily living necessities since they did not produce their own. Marseilles also relied on the crown for protection and security. Although the French government was still absolute the centralization of the state coupled with the commercial prosperity of Marseilles ultimately resulted in tension. The role of the Marquis de Langeron and other commandants throughout the localities would prove to be very effective. Having royal government officials within every locality which had been exposed to the plague allowed for easy communication about the scope
of the epidemic and its progression. The Acte Declaratif from Toulon is one such example. Political involvement in the crisis is another way in which we have seen the more modern approaches and responses to the plague epidemic.

Although the scope of this project does not extend before or beyond this specific moment in French history, microhistories can prove to be quite enlightening when looking at a larger period. This project’s purpose was to examine a specific event and glean bits of evidence which point to a shift towards secularization and modernization. This method is both interesting and effective when attempting to understand and place an event in its larger context. My research and analysis were focused on careful reading of primary sources. The secondary works used were more contextual works for placing my argument within the ongoing conversation about the event. It was my intention to keep my analysis of the primary works objective from the interpretation of other scholars, and then to subsequently see if their conclusion were different, the same, or similar to my own. This allowed me to make my own uninfluenced assertions of the primary texts.

There are many avenues still open within this project. It would be a worthy pursuit to look at previous plague outbreaks within France as well as without in order to compare and contrast the Marseilles epidemic. So too would looking at other disease epidemics which took place after the event and if, at all, what occurred in Marseilles reset the protocol for responding to disease.

Overall the plague in Marseilles was the last outbreak of a scourge that had haunted Western Europe since the 14th century. This outbreak symbolizes a triumph over what was bad from the past and set a course for progress. Although this event is not commonly studied it is an important moment in the development of the modern era.
Catastrophes reveal the best and worst about societies. The plague years in Marseilles at the twilight of the early-modern era reveal to us how all facets of society responded to the crisis and changed from it as well. Mass hysteria did not result in mass killings. Doctors, not priests, were revered as saviors. As the port was reopened Marseilles was ready to reclaim her position as one of the leaders of the modern commercial world. The streets would be quiet and the quay would be lined with ships bringing goods and ideas from all over an interconnecting world.
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