Documentary sources for the history of the Maltese general practitioner

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Abstract

Background: The history of the Maltese General Practitioner (GP) remains to be written. Such history will enhance the identity of the family doctor and prove indispensable to characterise the Maltese context of practice.

Objectives: To list some of the resources available for the study of the history of the Maltese GP and use it to provide an overview of relevant material for the pre-seventeenth-century period.

Methods: Over the past ten years, note was made of the material and literature encountered that could be of relevance to Maltese medical history in general and that of the Maltese GP in particular. Further information was obtained by consulting the references and other information provided by these works. These sources were categorized. As a case study, information on community medical services preceding 1600 AD was collected to come up with an account that goes beyond a strictly chronological overview, giving particular attention to other details such as training, remuneration, political involvement as well as gender and social issues.

Results: Evidence has been presented for fifteenth century community health services in Gozo and Mdina. In the following century, such service spread to a number of villages in Malta, financed by institutions or private individuals.

Introduction

In recent years significant milestones have been registered in the practice of Family Medicine in Malta. After the foundation of the Malta College of Family Doctors in 1989, general practice has been recognised as a speciality since 2004 with a functioning training programme, the latter initially directed by the document ‘Specialist Training Programme in Family Medicine – Malta’ (Sammut et al, 2006) and later by a purposely made curriculum (Falzon Camilleri and Sammut, 2009). There is no doubt that many of these achievements were inspired by foreign institutions particularly the Royal College of General Practitioners in the UK and other European organisations (such as the European Academy of Teachers in General Practice/Family Medicine).

Nonetheless, Family Medicine in Malta has a centennial history which not only imparts its effect on the organisation of practice but also fashions its particular identity. Putting this history in writing can become the lifetime project of a committed individual but this may also be adequately gathered by contributions from a dedicated group of persons, namely historians as well as general practitioners and other interested individuals. The purpose of the present paper is to outline the sources of information from which such history may be reconstructed. A review of the documents concerning the early history, particularly from prehistory to the end of the sixteenth century, will be attempted as a case study in such exercise.

Determining the core characteristics of the speciality remains central to this research. Time and progress often change the profession radically and what is assumed as central to practice today might have been unthought-of a few decades back. Indeed, in a survey of medical practitioners of medieval England, Getz (1998, pp.3-19) has revealed how those who ‘practiced medicine’ were a heterogeneous group that can hardly be considered to have belonged to a profession. Furthermore, modern core competencies of the profession, such as holistic approach and person-centred care (WONCA Europe, 2005) appear to have a more recent origin making them of little use as criteria for reconstructing the earlier history. In the

Key Words

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present study, practice in the community and outside hospital was found to be a more constant feature and was used as a criterion to identify the precursor of the Maltese General Practitioner.

A chapter on the Maltese District Medical service in the well-known Medical History of Malta by Paul Cassar (1965) and the relevant pages in a series of books on Maltese Medical history authored by Charles Savona-Ventura (2004, pp.99-106; 2005, pp.157-164) reveal that this approach has been used with success. In the absence of a dedicated book on the Maltese General Practitioner, various authors have felt the need to provide their own historical summaries as an introduction to their works (e.g. Azzopardi Muscat and Dixon 1999, p.4-5; Falzon Camilleri and Sammut 2009, pp.2-9). Together they provide an overview of key moments in the history of the Maltese GP. Nonetheless beyond acquiring information on the Maltese GP. Nonetheless beyond acquiring information on the subject, what is also desirable is a holistic understanding of the persona of the general practitioner. It is hoped that a critical appraisal of the available documents will allow us to better comprehend the role of the GP in society, his/her training, the role played in politics, as well as the nature of the relationship with patients. Gender issues, the role of women in the profession, relationship between Maltese and foreign doctors as well as affordability and use of the doctor’s service in relation to social status and wealth are additional themes that need to be explored.

The sources of information

The potential range of documentary sources for reconstructing the history of Maltese General Practice is considerable. Without attempting to provide a complete inventory, a number are highlighted here.

1. Published sources and dissertations

The relevant pages in the works by Cassar and Savona-Ventura quoted above are useful introductions to the subject. Although applicable to medicine in general and in need of an update, an article by Cassar (1974) provides a very useful bibliography. More detailed accounts require more specialised sources. For the medieval and early modern Malta articles by Stanley Fiorini (2008, pp.193-206) and Roger Ellul-Micallef (1999, pp.103-120) reveal what can be achieved by dedicated research. A book on the 1676 plague provides insight on the contribution of community-based physicians during the calamity (Micallef, 1985). For the British period, the Malta Blue Books are a useful reference for the administration and for a list of doctors working as Police Physicians or in later times as District Medical Officers. For more recent times, Mario Sammut (2003) outlines the early history of the Malta College of Family Doctors while Lino German’s (1991) book on medical unionism remains indispensable in providing information on how politics has shaped twentieth century and modern GP practice.

Newspapers and the Malta Government Gazette are useful as sources of information. Equally scattered is the information on GPs that can be obtained from the two volumes of the Dictionary of Maltese Biographies by Michael Schiavone (2009). The lack of a distinguishable qualification for the GP (such as that now provided by the M.M.C.F.D.) emerges as problematic and requires a careful reading of all medical entries to identify all the relevant persons. Furthermore Schiavone’s publication mostly concerns individuals living in the twentieth century but reference to earlier individuals is also provided. A sizable number of books on the villages of the Maltese Islands are also likely to be helpful considering the community orientation of the specialty. Their individual value varies and it is only rarely that an overview of the subject can be reconstructed (as in Micallef, 1975). Nonetheless relevant pages in other works, such as in the books by Paul Aquilina (2004, p.32) as well as that by Emanuel Benjamin Vella and others (1972, pp.540-541), remain useful to capture attitudes towards health services and other details of local significance.

An M.A. dissertation submitted to the University of Malta on the Maltese nineteenth-century civil charitable institutions (Calleja, 2008) explores the role played by District Medical Officers as gatekeepers to institutions in secondary care. With further research being undertaken by the author at Warwick University Department of History (2012), one looks forward to the results of the doctorate thesis on the subject to place such phenomenon in a Mediterranean context.

2. Archival sources

A number of archival holdings emerge as potentially useful for our history, with primary sources found in state, ecclesiastical and private archives. Documentary sources of a legal nature are held at the Notarial Archives and are particularly useful for the earlier history. The volumes of the original acts are housed at M. A. Vassalli Street (Valletta) and date back to 1467 while registered copies are kept separately for safety at St Christopher Street (Valletta). Names of physicians, their wills and
payments by patients are examples of information that may be found in these holdings.

Administrative documents pertaining to the British Period are part of the National Archives, currently located at the former Santo Spirito Hospital in Rabat. The departmental files (CSG-01), particularly the section on health, and petitions to government (CSG-02) are the most useful documents here, the former probably containing more detailed information than that available at the Ministry of Health for the nineteenth century. Reports issued by the health department are conveniently stored in the GMR ‘Fond’ (or record group) while the HI ‘Fond’ is useful as it contains details on clinics in Żebbuġ, Nadur, Ghajnsielem, and Qala from 1841 onwards. The Banca Giuratale in Mdina houses the Court records for the period 1530 up to 1899, with the court cases and property lists (particularly the Magna Curia Castellaniæ) likely to prove useful to reconstruct the social life of the medical profession. Useful for consulting this archive is the inventory of documents related to the Maltese Tribunals published by Portelli-Carbone (1932).

Cassar (1974) had already highlighted the value of the archives of the Knights of St John preserved at the National Library of Malta, which consist of a diverse range of volumes. Although the information is scattered, it can be consulted with much benefit as has been revealed through an article by Giovanni Bonello (2006, pp.40-45).

The department of Special Collections at the University of Malta holds records that are useful to detail the educational development of the medical school. A CD-ROM of the manuscript registers of the Acta Academiae Melitensis covering the administration of the University for the period 1800-1945 exists through which the only extant source for a roll of 19th century graduates can be consulted. The Archives of the Roman Inquisition in Malta may be consulted at the Mdina Cathedral Museum, but authoritative publications such as Ciappara (2001) have already made readily available any useful information. The private diary of Dr Joe Bugeja (1940-1944) provides an indispensable insight on the work of a District Medical Officer during World War II.

Although much of the relevant information is preserved in Maltese archives, one should not lose sight of foreign archives and the potential these reserve for further information. The National Archives in Kew (London) hold information on medical officers. Evidence of an outbreak of measles in 1934 and its effect in restricting the pastimes of a private GP has been found in the Natural History Archives in London (Bugeja 2006, p.26).

3. Beyond written or published documents

A holistic appreciation of the practice of Family medicine necessitates consideration of evidence that goes beyond that allowed by the available written or published material. Words cannot completely describe the GP’s clinic, or the various details of the environment to the patient-doctor consultation. To this objective, the preservation of a GP clinics or their documentation through photography goes a long way to record the setting where the profession has been practiced in the past. Medical instruments were a necessary tool to the physician not working in hospital and inventorization or presentation as a museum display can provide an insight into the scope of past medical practice. Older colleagues in the specialty remain indispensable to reconstruct through oral history the evolution of the profession in recent decades. Undoubtedly a few monuments in the corners or squares of Maltese villages remain a tangible record to the villages’ esteem for the dedication and contribution provided by the GP to the community (Plate 1).

Furthermore, one must not overlook a number of medical ex-votos which provide an indispensable visual record of the practicing GP during the nineteenth through the nineteenth centuries. Canopied beds in these paintings betray a domestic environment and their relevance to the subject-matter of the present study. Other details provide clues as to the social status of the patients, personal wealth, as well as illustrating the inseparable appeal of the religious and medical fields in the search for a personal cure (Buhagiar 1983, pp.71-77) (Plate 2).

The early history of the Maltese General Practitioner

Very little information can be obtained on Maltese community health practices for the period preceding the High Middle Ages. A group of six tombs, predominantly in use during the Ġgantija phase (3600-3000 BC), and a trefoil temple at ix-Xagħra ta’ Żminka (Vella 2002, pp.29-31) testify to the activities of a small prehistoric community on one of the hills at Xemxija. A well-healed oblique tibial fracture, which must have necessitated immobilisation for at least two months (Pike 1971, p.236), reveals that at least medical interventions reached this community at such an early period, if not practised within the community itself.
Turning to the Roman period, St Luke was a well-known doctor (Bible, Colossians. 4:14) who visited Malta but he is not recorded as having practiced in Malta. Indeed the healing of the sick particularly that of the protos of the island, was done by St Paul (Bible, Acts. 28,7-10). The fact that many of the islanders flocked to St Paul to be cured says much on the medical service then provided. It also hints that such medical service, if it existed, was not always considered effective. More evidence comes through a later well-known tombstone from Rabat engraved with surgical instruments, datable to the 4th/5th centuries, which has been taken to suggest the existence of a doctor’s guild. Nonetheless, while the practice of medicine in extra-urban contexts is known for contemporary Sicily (Cassia, 2008), with Rabat being the main burial site to the main city in Malta it is practically impossible to conclude whether the local doctors practised from centralised buildings or offered their services directly in the community.

Evidence becomes more copious for the late Middle Ages. In the Kingdom of Sicily, the Constitutiones of Meli (1231) and later legislation regulated the practice of medicine according to skill or creed. As part of this kingdom, these regulations were followed in the Maltese Islands but in view of lack of supervision and local conditions they were adapted to the local circumstances, as evidenced by the Capituli of 1427. The latter regulated the years needed for training, the need for approval to practice, fee structure and distinguished the barbitonsores from the fisici by the drugs they could prescribe (Fiorini 2002, pp.70-74). These rules were timely as a number of doctors were already practicing in Gozo (Fiorini 2008, pp.193-194) with the lands Di Lu Berbri (Gozo) used to provide a salary for the barbitonsore of Gozo. This employment, which is known to have been passed from father to son, seems to have been attractive as evident from litigations arising through attempts in gaining such post (Fiorini 2004, pp.560-568). Even though ‘hospitals’ are known in Gozo during the century (Fiorini 2005, p.214), the cirurgici were very much like family-doctors who supported indigent members of the community, mostly paupers and pilgrims, rather than catered for the curing of patients as in the modern concept of ‘hospital’ (personal communication S. Fiorini).

The distinction between hospital and community-practice emerges clearly in Malta later in the fifteenth century. A hospital in Mdina existed before 1434 (Aquilina and Fiorini 1996, pp.12-13) while a Hospitale Sancti Francisci outside the walls of the city is already recorded by 1372 (Fiorini, 2008 p.193). The later transfer from Gozo to Malta, of a Jewish doctor medicus by the name of Abraham Safaradi (Fiorini, 2008 p.194) to be paid from the Mdina Universitas, has been considered to represent the initiation of a District Medical Service in Malta (Cassar, 1965 p.13). The suppression of the Mdina hospital in 1455 (Aquilina and Fiorini 1996,
pp.17-19) supports the notion that Safaradi worked in the community rather than exclusively from a hospital setting, a fact that is further supported by the documentation of another doctor, namely Gaspar de Monbron, being paid from the other known hospital in Malta (Wettinger 1985, p.109). Safaradi’s employment spanned for over thirty years and was not without troubles. Already in 1453 there were discussions about his pay and ten years later attempts were made to have him replaced by a Christian doctor (Wettinger 1985, pp.109-110). This was unsuccessful for in the 1470s he is documented as receiving his pay despite being on occasions away to attend to personal legal matters (Wettinger 1985, pp.110, 174). In the 1480s Safaradi’s post was challenged by other members of the Jewish community but he is still recorded in office in 1485 (Wettinger 1985, p.111.). Safaradi is known to have been the main spokesmen and head of the contemporary Jewish community in Malta (Wettinger 1985, pp.104, 108-109) but this was probably not exclusively secondary to being a physician but also through his role as Jurat and Rabbi.

Contemporary to Safaradi’s activities, the details documented for a case of litigation in 1476 between Gasparis de Monbron and friar Johannes Zurki reveals that private practice within the community was already being practiced at this time (Wettinger, 1985 pp.114 fn. 28).

The expulsion of the Jews in 1492 meant that Jews could no longer provide medical services in Malta, leading to problems in the recruitment of doctors early in the sixteenth century. Thus in the beginning of the sixteenth century, there was no community physician in Mdina, a situation temporarily solved by the Sicilian Johanni Beniveni and later by Bartolomeo de Assaldo. The latter two physicians did not hold their post for long probably because of the poor remuneration offered. From around 1521, Bernardo de Munda, who in 1529 became protomedico of the island (Fiorini 2003, p.49 fn. 46), was paid to give such service and this continued until his death in 1541 (Borg 1982, p.83; Ellul-Micallef 1999, p.104; Fiorini 2003, p.21). From November 1536, De Munda was helped by Joseph Callus who retained such post up to 1560 (Fiorini 2003, pp.20-21)(Plate 3). Like Safaradi, Callus negotiated property and involved himself in treasure hunting (Fiorini 2003, pp.21-22; Wettinger. 1985, pp.109, 147), activities undoubtedly ensuing from their well-paid salaries and their higher social status. As an entrusted doctor, Callus was held in high esteem and was frequently sought as godfather in baptisms and as curator to orphans (Fiorini 2003, p.21).

Already active in the Mdina council early on arrival in Malta and with Sicilian connections, Callus was entrusted with the mission of voicing the complaints of the broken privileges experienced by the Mdina Universitas under the Knights of St John. This is claimed to have landed Callus in trouble with grandmaster De Valette and Callus was subsequently punished by hanging. In 1561, the Rhodiot Ioannes Raymundus Calamia became the paid salary of Mdina instead of Callus, clearly revealing that provision of community medical service had by now become an indispensable service (Fiorini 2003, pp.27-32).

Meanwhile, the arrival of the Knights of St John in 1530 had already shifted activity away from Mdina to Birgu, and Calamia was one of the Rhodiot physicians coming with the Order (Fiorini, 2008 p.196). With a centuries-old tradition of helping the sick, the Order soon embarked on building a hospital but already at the time, and continuing after the establishment of the Sacra Infermeria in Valletta forty years later, arrangements were in place to take care of the sick in their homes outside hospital premises (Ellul-Micallef 1999, pp.104-108). While this home care obviously concerned the sick knights, it is still unclear whether such service was also being provided to the general population. Nonetheless by the end of the sixteenth century, a doctor by the name of Giovanni Domenico Mangion is already known to have been working amongst the population in Birgu for a number of years (Ellul-Micallef, 1989 p.237). By claiming to be one of the salaried physicians (Leopardi 1963, p.42), it is evident that such medical service was being provided by a number of doctors, revealing the expansion of service and a larger doctor population.

Plate 2 Nineteenth century health-care provided in a domestic environment (courtesy Santa Maria tal-Ħerba sanctuary, B’Kara)
In 1596, Mangion applied for a similar post in Mdina and Rabat previously held by Dr Rosario Saura. Such post appears to have been contested by a number of applicants, Mangion attempting to gain advantage by specifically mentioning that he could communicate with patients because he knew how to speak Maltese (Leopardi 1963, p.42).

The sixteenth century saw an increase in the number of doctors in Malta. With formalised medical training in Malta only appearing in the late seventeenth century (Savona-Ventura 2004, p.140) those who received training in the previous century did so in foreign universities such as Salerno, Naples, Rome and Montpellier (Borg 1982, p.83; Ellul-Micallef, 1999 p.115). One of the benefits of this increase in medical practitioners was the appearance of doctors working in their village of residence (Ellul-Micallef 1999, p.114). It appears that this village-work was provided by ‘barber-surgeons’, known to have had less training than physicians (Cassar 2008, pp.44-45), a situation that may have resulted through competition for work in the main towns.

The names of these rural doctors have been published (Table 1) and it is evident (possibly with the exception of Gudja) that these doctors were working in the villages with relatively larger number of inhabitants (Fiorini, 1983 Table 2). Mention of two doctors working in Birkirkara reveals that this service was appreciated and needed, and that it soon became established as had occurred in Mdina and Birgu.

The biographical information known about Antonius Perurelio (d.1553) provides us with a unique window on how contemporary general practice developed from the activities of a surgeon (Fiorini, 2008 pp.193-206). Hailing from Chiaramonte in Sicliy (Fiorini, 2008, p.196), Perurelio is known to have settled with his wife at Birkirkara and after starting his practice there expanded to provide services in other parts of the island. The manner in which this occurred is interesting; while early clients from Birkirkara were to be expected, he soon was visiting patients from the nearby villages of Balzan, Lija and Attard (Fiorini, 2008 pp.198-200), villages that were then probably still without a medical service (see Table 1). Further widening of his clientele to more distant villages such as Ghadir il-Bordi, Qormi and Rabat occurred later, with the recurrence of surnames probably indicating such expansion benefitted from family connections (Fiorini, 2008, p.197). Being a surgeon, most visits concerned cases of wounding but management of a case of syphilis is also recorded. In view of the payments received by doctors at the time, the cost of a visit was considerable. This included compensation for medical treatment as well as travelling expenses. As many could not pay such fees, on many occasions Perurelio was paid in kind, and contracts where the surgeon received building material or fields from individuals in exchange of his service are recorded (Fiorini, 2008 pp.201-205). While the influence of this payment in kind on later practice remains to be established, it comes as no surprise that in view of the cost people often attempted home-remedies or consulted ‘healers’ involved in witchcraft (Cassar 2008, p.45).

**Conclusions**

A variety of written and non-written sources are available to study the historical development of community healthcare in the Maltese islands. Medical service provided in fifteenth century Gozo and Mdina remains the earliest secure evidence for health care akin to that given by a modern general practitioner. Once established, such service soon proved to be essential, and with the increasing number of doctors, practice in

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<tr>
<th>Medical personnel working in villages</th>
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<tr>
<td>Cassia Mattheo</td>
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<td>Mangion Mariano</td>
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<td>Mangion Valerio</td>
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<td>Schembri Andrea</td>
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<td>Vasco Dionisitus</td>
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References