Medicine, Public Health and the Qājār State

Patterns of Medical Modernization in Nineteenth-Century Iran

By Hormoz Ebrahiminejad
MEDICINE, PUBLIC HEALTH
AND THE QĀJĀR STATE
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ACKNOWLEDGEMENTS

My first research into the history of epidemics and medicine was undertaken in Tehran during the Summer and Autumn of 1996 with the support of the Institut Français de Recherche en Iran. I gratefully recall the friendly and stimulating atmosphere in that Institute, mainly due to the endeavours of Rémy Boucharlat, its former Director, to whom are due my sincere thanks. Since then, I have been able to continue my research thanks to the funding of the Wellcome Trust, without which this book could not have been written. Its Travel Grant in the summer of 1997 allowed me to carry out an initial survey in the Persian manuscript collection preserved in the Wellcome Library. Encouraged by Lawrence I. Conrad, the late Roy Porter and Vivian Nutton, then the Head of the Academic Unit in the Wellcome Institute for the History of Medicine, I submitted a research project on the “Transition from Traditional to Modern Medicine in nineteenth-century Iran” and was awarded a three-year Wellcome Fellowship. The extent of my research and the new findings during these three years necessitated further investigation. I am indebted to Harold J. Cook, the Director of the Wellcome Trust Centre for the History of Medicine at UCL (previously the Academic Unit of the Wellcome Institute) for his encouragement in submitting a new project for Wellcome funding that was generously granted.

Throughout my work within the Wellcome family, my colleagues have provided wonderful support in turn intellectual, professional and personal and I would like to warmly thank all of them. I have benefited not only from the rich collections of the Wellcome Library but also from the friendly collaboration of its Librarians and staff, especially Nigel Allan, the Curator of the Oriental collection in the Wellcome Library, who has always been ready to help.

I must also warmly thank the staff of various libraries where I found invaluable manuscripts: in Iran (Tehran University, Ketābkhāneh-ye markazi, the National Library, Ketābkhāneh-ye mellī, the Malek Library, the Majles (Parliament) Library and the Library of Qods in Mashhad); in Russia (the National Library and the Oriental Institute Library in St Petersburg); and in North America (the Medical Library of UCLA). I thank particularly ‘Abdol-Hoseyn-e Há’eri, Senior Curator of the Majles Library in Tehran, who permitted me to reproduce the manu-
script 505, which appears for the first time translated into English and edited in this volume. Emilie Savage-Smith and Lawrence Conrad have read an early version of my English translation and gave very helpful advice. Additionally, Emilie Savage-Smith and Willem Floor read the final drafts of my study (Part One) and provided further criticism and suggestions. I would like to extend to all of them my heartfelt thanks. I am grateful to the anonymous referee, whose thorough remarks and criticism on the first draft of Part One of this book were most useful. My gratitude goes particularly to Charles Burnett, who carefully read the whole text and suggested improvements. I would like to thank Lois Reynold who read the draft of Part One and Fiona Macdonald who read the entire draft of the book. I am also grateful to Alex McKay, Roger Cooter and Anne-Marie Moulin who read drafts and chapters. I thank them all for having saved me from a host of errors and for sharing their insights and information. It goes without saying that I am responsible for any shortcomings in this volume. I am also obliged to Chris Carter, Senior Photographer at the Wellcome Trust, who helped me to prepare the illustrations for the book.

Last, but not least, my special thanks are owing to Sylwia Wekwert Ebrahimnejad for helping me to prepare the index of the book. I would like also to extend my gratitude to Parviz (ʿAbbās) Rafīʿī, as well as Bozorgmehr and Behzād Ebrahimnejad whose assistance greatly facilitated my access to some rare sources and manuscripts in Iran.
Many terms or names used in Persian are of Arabic origin and this has led some institutions, such as the Library of Congress (L.C.) or the Encyclopaedia of Islam, to choose similar transliteration systems for Arabic and Persian. However, since pronunciation is an integral part of a language and the Arabic names or terms that have been incorporated into Persian are pronounced by the Iranians differently from their Arab neighbours, the system used here is to render the Persian pronunciation, as described below, except when the names or terms are cited from other sources or are used in an Arabic context. For example an Iranian would not pronounce Ibn Sinā as such but as Ebn-e Sinā, Mushir al-Dawlah as Moshir od-Dowleh or izāfah as ezāfēh. Nevertheless, for the “al” in names such as Moshir al-Dowleh, we use the Arabic form of spelling. Thus, for the Persian transliteration of ناصرالدین شاه in which ال is dropped and they are usually pronounced as E’temād os-Saltaneh and Nāser od-Din-Shāh, we write E’temād al-Saltaneh and Nāser al-Din-Shāh.

Persian names are usually composed of several parts joined by a letter called ezāfēh that usually has the same significance and function as “de” in French. In the Library of Congress system this is shown by ‘i’, but in Persian this annexing letter sounds like ‘e’ as in English “ethnic” or “empire”. Even though the Library of Congress system distinguishes the “long ī” from ‘i’, for native Iranian speakers this distinction leads to confusion between, for example, Nasir and Nāser [L.C. Nāsir] (proper names) or between nazīr (similar) and nāżer [L.C. Nāzir] (supervisor).

In the transliteration used here, the ezāfēh is represented by ‘e’ when it is annexed to a consonant (such as in Mirzā Mohammad-e tabib), and by “ye” when it is added to a vowel (such as in Mirzā Mohammad-Vali-ye tabib). There is, however, an exception for the Arabic letter (ʼ) ع that is annexed to other words by ‘e’ because of the hard articulation of ع.

For the short vowel zamma (ʼ) we have chosen ‘o’ and for the long vowel (ا) we use ‘u’. Thus Moshir al-Dowleh or Mohammad, but Mahmud or Moluk. For “long ā” ā pronounced as in English “far” or “bar”, we use ‘ā’. Thus we write Atebbā (plural of tabīb, physician).
As in Arabic, several letters such as س, ث, ص, or ذ, or ز, ظ, or ط, ها, and ح are pronounced differently, but in Persian they have the unique sounds of S for the first, Z for the second, T for the third and H for the fourth group, they are simply transliterated respectively by S, Z, T and H.

Another typical example is the hard and guttural letter ع that does not exist in Persian. In Persian, ع sounds like ألف in الله or “A” in English. However, we make an exception for the letter ع because when it is placed at the end of a word, such as in جامع jāme‘, or when it comes, for instance, after ألف such as in أعلم A’lam, we need to distinguish ألف from ع. Therefore, in order to be consistent, we will show ع by a single inverted comma (‘) even when it is placed at the beginning of a word such as in ʿAbbās.

Other diacritic letters for Persian are as follows: q = ق, gh = غ, sh = ش, ch = چ, kh = خ, j = ج. In rare cases, however, when each of these combined letters, is written together but pronounced separately such as ‘s’ and ‘h’ in اصحاب, we separate them by an apostrophe. We will therefore write as’hāb and Is’hāq. Finally, when a letter is moshaddad (pronounced hard), it will be written twice, such as in sehhat (health), or tebb-e sonnati (traditional medicine).
PREFACE

This work is part of the project on “The Transition from Traditional to Modern Medicine in Nineteenth-Century Iran” that received Wellcome Trust funding in 1998. The initial plan has been modified due to new findings. Exchange of ideas with colleagues has revealed a lack of knowledge of what nineteenth-century Persian medical literature consisted. To contribute to closing this gap required the translation of one of the texts that not only represented traditional Persian medicine but also the nature of development and change in medical knowledge in nineteenth-century Iran. The manuscript included in this volume is a booklet written in ca. 1865 by an anonymous author on the establishment of hospitals in Qajar Iran (1797–1925). It contains not only a theoretical discussion of medicine as seen in classical traditional literature, but also historical data and provides a lively description of the public health system of the time, which is rare for nineteenth-century medical texts in Iran.

Initially a short introduction to the text and its English translation was envisaged. Later it seemed necessary to provide an extended essay, one that went beyond the mere presentation of the translated text. Nevertheless, this essay is not a comprehensive history of medical modernization in nineteenth-century Iran; it is rather a study of its institutional aspects, the point of connection between medicine and power. This change of plan seemed appropriate after finding the manuscript in question, which illustrated the crucial importance of the institutional dimension in the process of medical modernization.

This book is divided in two Parts. The focus of the first Part is on the institutional and theoretical aspects of medical modernization while touching on other issues such as hospital institutions, the military, medical education, and so on. But these questions are mentioned for their instrumental or analytical role and therefore are not examined here in depth. Although the first Part, especially its first and third Chapters, frequently refers to manuscript 505, it is not an introduction to this manuscript but rather an independent account of modernization of

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1 Anonymous manuscript, Tehran, Majles Library, no. 505 (undated).
medicine in nineteenth-century Iran. The second part of this book is
devoted to the edition of the Persian text and its English translation,
extensively commented in the footnotes.
PART ONE

The Institutional and Theoretical Change in Traditional Medicine
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INTRODUCTION

The historiography of medicine in Iran has usually focused on what is termed the Golden Age of Persian medicine (c.a. ninth to fourteenth centuries) and upon such renowned physicians as Rāzi (850–932) and Avicenna (980–1037).¹ The nineteenth century, however, has only been studied scantily.² This lack of interest reflects the general weakness
