

Historical and Cultural Background of Health Care on Croatian Islands

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The earliest painting of a sailing boat found in Europe is that on a fragment of pottery from the neolithic settlement in the Grapèeva Cave on the island of Hvar, dating from 2500 BC. This discovery attests to the intensity of the transport of passengers and goods, as well as of traffic in ideas across the Adriatic (1).

In the dawn of civilization, this area was populated by Celtic and Illyrian tribes; a number of large cairns dating from those times have been discovered on the Eastern Adriatic coast and Dalmatian islands. In the 4th century BC, ancient Greeks founded colonies on Dalmatian coast and islands. Many contemporary towns have grown on the sites of Greek settlements. The towns of Starigrad, on the island of Hvar, and Vis, on the island by the same name, are located on the sites of the ancient Pharos and Issa, respectively. With the Roman conquest of the Illyrian population in the 1st century BC, the area became a Roman province. A large number of remains dating from this period are a valuable contribution of this region to the world's cultural heritage – notably the remains of the large episcopal complex and several other Early Christian basilicas in Salona (later Solin), once the main city of the Roman province of Dalmatia, dating from the 5th century; the Amphitheater in Pula, dating from the 2nd century AD; and Emperor Diocletian's Palace in Spalatum (later Split), dating from the late 3rd and early 4th centuries AD – to name but the most prominent ones. At the time of Croat settlement on the Eastern Adriatic coast in the 7th century, the area was a Byzantine province. While Croats populated rural areas, the cities were inhabited by Latin-speaking descendants of Roman settlers. Later on, the control of Croatian kings spread to urban areas as well. Greek and Roman traditions provided a basis for the highly-developed Dalmatian civilization, which gradually transformed Dalmatia into the center of the medieval Croatian state. Croats gained the unique right of having their sermons conducted in the vernacular, and of using missals written in the Glagolitic alphabet (2). This fact has served as a fortification of the national identity throughout Croatian history (3). Parochial records written in the Glagolitic alphabet may provide a valuable source of information for a demographic study of the coast (4). Some medieval pharmacopeias were also written in glagolica (5).

The death in 1097 of the last king of the national dynasty was followed by a thousand-year period of Croatian dependence. Various foreign dynasties ruled the country; parts of the territory were annexed by neighboring states at different times. During the rise of the Ottoman Empire, Turks conquered large parts of Croatia, forming a wedge which cut off mainland Croatia from the coastal region. In the following 250 years, Croatia was defined by its geographic position as Europe's *antemurale christianitatis* – its fortification against the further invasion of the Turkish army. The coast and islands were placed under the jurisdiction of the Venetian Republic.

Communal system, as well as a high local autonomy of Dalmatian cities and islands, allowed their economic and cultural development. The communal councils and dukes, who were elected annually and acted under the supreme control of Venice, observed the statutes and advanced the welfare of the community (2). The originally Roman urban populations began steadily to acquire the elements of Croatian culture. Dubrovnik and other Dalmatian cities and islands became cultural centers of Croatia in the Middle Ages and during the Renaissance. Marko Maruliæ (1450-1524; Split), Hanibal Lucić (1485-1553; Hvar), Petar Hektorović (1487-1570; Starigrad) and Petar Zoranić (1508 – before 1569; Zadar) belong among the most prominent authors writing in the Croatian language (3).

Plays written by local or other authors were performed in front of churches, in patrician palaces (notably at ducal courts), or in town halls. The first Croatian theatrical building, erected in the town of Hvar in 1612, still serves its purpose as one of the oldest communal theaters in Europe (6).

The earliest Croatian health care institutions were also established in the coastal region. A well-organized system of lazarets, leprosarias, hospitals and orphanages was controlled by communal statutes, which regulated the duties and privileges of local physicians as well (7).

On several occasions, the area was struck by the plague brought by merchant ships or caravans

coming from the Orient. Since July 3, 1377, persons coming from plague-contaminated countries were allowed to enter the territory of the Dubrovnik Republic only after a month of cleansing in Cavtat or on the island of Mrkljan (8). This proclamation of the Grand Council of the Dubrovnik Republic laid the foundations for subsequent quarantine regulations (9). After a plague epidemic in Hvar, a lazaret was built on the islet of Galižnik within the harbor of Hvar in 1529. One of the largest and best organized lazarets was the one outside Split, built in 1592 in order to prevent the spread of plague, whose appearance was a result of the city's location on the route of intensive traffic between the Turkish territories and Western Europe (9,11).

Malaria was the second major disease on the Eastern Adriatic, particularly in the Neretva valley and in Ston (10). The 1420 annex to the statute of Korčula (1265), one of the earliest communal statutes in Europe, prohibited visits to the Neretva valley between mid-May and mid-September to prevent the spread of malaria. In 1774, Alberto Fortis recorded that the population of the Neretva valley used to sleep under light tents to avoid the bites of mosquitoes, which they believed transmitted malaria (12).

The hospitals in coastal Croatia were mostly conceived as shelters for the old and destitute.

Communal physicians and surgeons were engaged by town councils to provide care for the poor free of charge (Statute of the Split commune, 1312; ref. 11). Similarly, in 1468 a physician was employed by the council of Hvar to treat all citizens free of charge (13).

During the brief period of Napoleon's rule in Dalmatia, two high medical schools were opened in Zadar and Trogir – and closed as soon as the French lost the authority over the region. During their government, however, vaccination was introduced in the coastal cities of Croatia (14).

The Croatian Adriatic experienced its golden age in the 1870s and 1880s. As French vineyards were devastated by phylloxera in this period, the prices of Dalmatian wines rose sharply. Production and export of Dalmatian wine was stimulated; vast portions of land were converted into vineyards on the terraces sloping down island and mainland hills. A respectable fleet of large sailing ships were built in local shipyards. The economic boom was paralleled by cultural and demographic development of the region (4). In approximately the same period – or a decade later – some Croatian islands recorded the largest number of inhabitants in their history (15). By the end of the century, Dalmatia was struck with three disasters: the invasion of phylloxera on Dalmatian vineyards; the Wine Clause signed in 1891, which limited the export of wine; and the substitution of sailing ships by steamers.

Poverty, birth rate decline, emigration to overseas countries, and migration to mainland caused a decline in island populations (4). The typical island landscape – remains of vineyard terraces scattered in the countryside; urban settings with large residences erected for merchants and naval officers, beautiful but neglected and forlorn; crude votive paintings in little coastal churches depicting sailing ships in distress; empty stone basins for olive oil – serves as a reminder of a prosperous past. The great political changes that have occurred in our century have resulted in further depopulation and isolation of Croatian islands (15). During the 1991/92 war, some islands were completely isolated from the mainland as well as from neighboring islands, which required a rapid adaptation of their health services to the demands of war medicine (16).

The future of Croatian islands lies in their revitalization, both demographic and economic. Barbari (15) gives directions for future development of health care on the islands, for both the native population and various categories of tourists. The promotion of tourist economy should be accompanied by the development of related services and solutions to relevant ecological issues.

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