

**‘A sense of time: experiencing plague and quarantine in  
early modern Italy’**

Jane Stevens Crawshaw

Oxford Brookes University

A relief panel of St Sebastian, produced in early sixteenth-century Deruta, is well known amongst historians of material culture as the earliest known example of Italian lusterware.<sup>1</sup> This claim is made possible by the unusually prominent date inscription on the lower section of the piece: 14 July 1501. The precision of the date on the panel is striking, given that premodern conceptions of time have often been characterised as organic and imprecise when compared with modern eras.<sup>2</sup> The role played by St Sebastian as one of the principal intercessors against the plague makes this object particularly intriguing.<sup>3</sup> It is not known whether the inscription marked the end of an outbreak of plague, or perhaps a personal experience of healing in the course of an epidemic. Either way, the enduring nature of the saint's role for intercession is intensified through reference to a specific moment in time, shown here by a precise date rather than a visual representation of an event akin to those illustrated on votive panels.<sup>4</sup> To look back on episodes of early modern Italian plague is to see how a desire to record with precision the chronological progression of epidemics intersected with the vital and restorative framework of spiritual (or cyclical) time, which structured each year through liturgical seasons and annual feast days and interpreted events in the light of their end point in judgement and Catholic eternity. The panel of St Sebastian illustrates that these two frameworks for conceptualising and organising time could be complementary and often mutually reinforcing. Both were a focus for regulation in times of plague.

Plague epidemics devastated premodern communities and the staggering pace and scale of infection and mortality, seemingly changing by the hour, were frequently

identified as one of the defining features of the disease: a sixteenth-century Venetian notary wrote, “as the plague developed, every hour saw worse disasters unfold”.<sup>5</sup> The health of households might change overnight. In Padua, during the worst of the 1575-77 epidemic, residents were found dead in their homes, having been seen alive and seemingly well only a day earlier.<sup>6</sup> The lives of premodern communities were also disrupted by the public health measures introduced to try to limit the effects of the plague.<sup>7</sup> Across the Italian states, and much of the rest of early modern Europe, quarantine emerged as central to these efforts.<sup>8</sup> The widespread restrictions on movement, work and sociability carried with them a cultural and social, as well as devastating economic, impact and made experiences of the plague distinct from those of other diseases of the period, such as the Pox.<sup>9</sup>

In this article, I will explore one facet of the changes wrought by epidemics, quarantine, and their attendant immobility in Northern Italy (drawing particularly on sources from Venice and Padua) - those which altered perceptions and structures of time. Historians have rightly recognised the multiplicity of “time communities” within early modern urban centres, which constituted key aspects of identity, as well as frameworks of time which included both the chronological and the cyclical.<sup>10</sup> Yet, the disruption caused by epidemics and quarantine removed individuals from many of these time communities and activities which structured their days, weeks and years. This article utilises the approach of historians who have considered distinct seasons of time – periods defined by characteristic circumstances of which there was an expectation of reoccurrence. This article suggests that epidemics are one such

season and one which, as yet, has not been explored from the perspective of the history of time.<sup>11</sup>

Plague epidemics could last for many months, with undulating intensity. In sixteenth-century Venice for example, outbreaks occurred in 1510, 1523, 1527-8, 1555-8 and 1575-7. The changing nature of plague in Northern Italy meant that epidemics that struck perhaps every 7-10 years in urban centres during the fifteenth century became less frequent during the following century.<sup>12</sup> In Verona in 1575, residents were intensely fearful of the plague because they 'had never seen a similar disease similar, with the exception of a few of the oldest' members of the community.<sup>13</sup> Fear, despair and grief were often recorded in accounts of epidemics when anguished cries echoed in the streets, providing a stark and painful contrast with the noises and activities of urban life beyond times of plague. Katherine Craik has illustrated the manner in which the emotions (associated with the Latin term *emovere*, to move out) were conceptualised with reference to movement and motion(s).<sup>14</sup> What kinds of emotions were engendered by states of immobility in the context of plague and quarantine and how did authorities seek to regulate and interpret time in these contexts in order to address the collective emotions of communities?<sup>15</sup>

Surviving sources limit the ways in which the structures, perceptions and emotions of seasons of plague can be explored. They tend to focus on collective experiences – often those of public spaces like the streets. Ann Carmichael has reflected on how strikingly rare it is to find accounts of patient memories of plague and quarantine.<sup>16</sup> This analysis, therefore, rests on published accounts of plague

epidemics, alongside archival documentation, a letterbook which survives from a doctor who cared for the sick during a sixteenth-century outbreak in Venice and material culture sources from plague hospital sites. Many of these sources were created in response to the outbreak of 1575-7 although I have sought to contextualise these with reference to other epidemics where possible. The motivations for the creation of these sources varied. In the case of a published account of the 1576 outbreak of plague in Padua, the author recorded his miraculous survival in the city from the start to the end of the epidemic and described his account as a way of giving thanks for this safe-keeping, perhaps akin to the panel of St Sebastian with which we began.<sup>17</sup>

## Defining quarantine

Premodern quarantine has been a focus for study by historians, not least because it was formalised as a principal public health policy during this period, albeit with considerable variation in its form across Europe.<sup>18</sup> In existing studies, it has often been explored through the lens of space. Quarantine could be organised at household or institutional levels; indeed the two systems were often run in parallel. In the Republic of Venice, the foundation in 1423 of a permanent hospital for the plague (known as the *lazaretto vecchio*) enabled the city's *Provveditori alla Sanità* (Health Office) to use quarantine as a permanent, preventative public health strategy.<sup>19</sup> Elsewhere in Northern Italy (including Milan, Padua and Verona) designated quarantine institutions were utilised only during severe epidemics within these cities.<sup>20</sup> In addition, however, individual social groups or religious

communities might be instructed to carry out quarantine in separate buildings or urban zones.<sup>21</sup> During the sixteenth and seventeenth centuries, significant proportions of urban populations experienced quarantine directly and observed the quarantine of others within their household, familial, parochial, and occupational units.

Nevertheless, time was central to the purpose and success of all forms of quarantine. Quarantine was experienced by patients as a time-bounded policy, even in cities like Venice in which the *lazaretto* system was in permanent use. Elsewhere, the decision to open the plague hospital was a notable stage in the progression of an epidemic; in his account of Padua, Alessandro Canobbio recorded the precise date of this moment in 1576 (27 June).<sup>22</sup> It was not uncommon for patients to spend lengthy periods in quarantine. In Venice, for example, individuals could undergo forty days of treatment on the *lazaretto Vecchio* and a further forty days of convalescence on the city's second island-hospital, the *lazaretto nuovo*. On return from the hospitals individuals were expected to remain in household quarantine for a further eight days before being licensed, as illustrated in the short list of six individuals contained at the back of the register of baptisms for the parish of San Fantin 1560-1629.<sup>23</sup> Those undergoing household quarantine could be isolated for periods of eight, fourteen, twenty-two or forty days depending on their perceived level of exposure to the disease.<sup>24</sup> At other times, entire districts within cities were quarantined. In these instances, people were not allowed to enter into the houses of others and women and children were not permitted to leave their district. Often a curfew was imposed at night.<sup>25</sup>

These periods of quarantine necessitated a specific bureaucracy of time-keeping, such as the daily visiting of quarantined households at parish level. Records of quarantine and disinfection within households and institutions were developed at parish and civic levels with the purpose of ensuring strict adherence to the necessary timescales for cleansing and healing. Reams of paperwork were produced during outbreaks as letters, wills, inventories, lists and collated statistics were sent between parishes, plague hospitals and the government. In Venice, an episode of plague prompted a salary increase for one of the scribes in 1523 as a result of the intolerable workload he had faced.<sup>26</sup> One particular challenge for governments was that, beyond periods of general quarantine within cities, the timing of quarantine varied depending on the neighborhood or household. Quarantine's time structures could not be easily coordinated through audible signs for the community, such as the ringing of bells. Instead, government officials had to develop administrative structures to determine, regulate and communicate periods of quarantine which would work in parallel with collective signs of time, thereby accommodating both the individual and community experiences of quarantine.

Distinct daily routines were not only developed in the context of quarantine within parishes. The timing of activities for patients within quarantine institutions was a further focus for direct oversight. Along with the examples Peter Burke provides of "total institutions" which might have their own organisation of time, one could certainly add the plague hospitals which were so often the setting for early modern quarantine.<sup>27</sup> The daily routine within these sites started with inspections of the sick and if appropriate, individuals were transferred to other sections of the hospitals or,

in Venice, to another island depending on their condition. When supplies arrived, food could be distributed at the designated rate per person. Sansovino's sanitised account described Venice's *lazaretto nuovo* as a 'land of plenty', in which supplies were bountiful, being delivered daily in ample quantity. Food was said to have been distributed with 'order and calm' because everyone knew that they were well provided for. Certainly, meal times were determined by the *Provveditori alla Sanità* in Venice. In 1503, the Prior of the *lazaretto nuovo* was instructed to ensure that by one hour after *terce* the lunch had been prepared and that by two hours after *terce* everyone had eaten.<sup>28</sup> Dinner was to have been prepared by 10pm and everyone should have received it by 11pm.<sup>29</sup> These institutional routines were carefully regulated and intended to ensure a coordinated, collective experience for patients.

The specific timing of public health measures was recognised to be vital to their success. This applied to administrative routines as well as the introduction of new measures. One observer of the 1575-77 epidemic wrote of the experiences in Padua, 'it is also true that at the beginning they did not introduce those provisions that they should have done, and later these things were done but with limited advantage (*con poco profitto*).<sup>30</sup> Later in the same account he recorded a delay in the systematic record-keeping of the accommodation or lodging of individuals coming into the city.<sup>31</sup> Following regulations in a timely manner was vital but problematic during epidemics, particularly given the lack of public health personnel. Many accounts note that the number of body clearers was insufficient to the scale of their task, meaning that corpses would remain within homes for days and begin to putrefy in the hot weather. Successful public health strategies for the plague, therefore, not only required the right



responses but their application at the correct moment in order to have the greatest effect: general principals had to be interpreted correctly within specific and changing circumstances.

In other instances, it was considered sensible to delay the introduction of measures until practical challenges could be overcome, including a proposed fifteen-day, city-wide quarantine in Venice in 1576. This recommendation was made to the Venetian government on the basis that the disease was being spread by interactions and contact (*practica e conversatione*) between people rather than being the result of poor quality air (which was said to be better than it had ever been).<sup>32</sup> A period of reduced mobility was recommended in order to allow the government to identify where the disease was and to expurgate the city. The writer Benedetti compared this approach to the assessment of hunters who know the difficulty of capturing a wild animal in open ground and so corner it instead – again emphasising the strategy and skills needed for the management of public health.<sup>33</sup> The complexities inherent to successful public health work were addressed through measures that coordinated the administration and experiences of plague and quarantine, many of which coalesced around the regulation of both chronological and cyclical time.

## Chronological time

Between 1575 and 1577, Venice – like a number of cities in Northern Italy – suffered one of the worst outbreaks of plague in its history. The declaration of both the beginning and end of an epidemic was a process fraught with difficulty. As the infection developed and officials grappled with diagnosis of the plague, Venetian

residents were informed that conjoined twins had been born within the Jewish Ghetto. Indeed, the moment of their birth was recorded as 16:53 on 26 March 1575 with the exact minute of their conception being calculated as 14:48 on 7 September 1574.<sup>34</sup> For a society with a vital symbolic and social understanding of cosmological time, an interpretation of events with reference to the alignment of the planets required such a precise recording of time and was a process fraught with significance and meaning. This event was just one of a series of warning signs for the plague, which also included conjoined animals, astrological events and earthquake tremors. The timing of these events took on new meaning when interpreted in relation to the development of the plague in the months that followed.

No one declared the exact moment at which they believed the outbreak of 1575 to have begun in Venice but there is evidence of an increasingly precise recording of time during this epidemic. Samuel Cohn's *Cultures of plague* notes that,

The plague of 1575-8 sparked the creation of a new form of plague writing: works often with 'progresso' or 'successo' in their titles. These tracked plague within regions, cities and neighbourhoods with unprecedented chronological rigour by employing statistics gathered from health boards and government magistracies on mortality, morbidity and financial expenditures.<sup>35</sup>

These texts were a particular feature of Northern Italy and raise questions about the context that sparked the development of this new genre. These texts were published in response to the larger-scale outbreaks of the late sixteenth and seventeenth centuries, the first to affect such a significant proportion of the population since the development of printing.

Alessandro Canobbio, writing of Padua, claimed that the outbreak originated in Trento at the end of March 1574, brought to the city by a foreigner selling infected goods. He described the plague spreading first to Verona and then to Venice. In his account of early cases in the city, the quick nature of infection or death ('subito' or 'poco appresso') was taken as a confirmation that the disease was plague.<sup>36</sup> In both Canobbio's account of Padua and Benedetti's of Venice, the subsequent development of the disease was expressed principally in relation to levels of mortality (the season of the disease) rather than by date (the season of the year). In Venice, the disease was described in autumn 1575 as progressing 'poco a poco' as deaths occurred at a rate of four, six or eight a day. The next stage took place between December 1575 and May 1576, when the number of deaths increased to 18, 20, and then up to 30 a day. A dramatic change developed in July 1576 when deaths began to reach 100 a day.

One of the features observed by Canobbio is the way in which the seasons of the disease might diverge from what would be expected given the climatic conditions of annual seasons. In June 1576, for example, he noted the pure and dry nature of the air (given that they were approaching the hot season and the solstice), which meant that some hoped that the situation would naturally abate, but in fact the reverse occurred.<sup>37</sup> In late autumn, he recorded that the obvious disconnect between the nature of the season and that of the disease was the surest indication that the plague had been sent by God. He observed that the plague began to abate at a time when the air was damp, warm, misty (*nebulosa*) and dim (*oscura*). It was also a period of incessant rain. These conditions, according to all earthly reason (*ragion*

*del mondo*), should have precipitated a worsening of the epidemic rather than an improvement.<sup>38</sup> The feast day of Sant' Andrea (30 November) saw no deaths recorded in the city (a '*carta bianca*'), all the more miraculous because it took place in the context of inclement, malignant weather, characterised by rain and warm, damp air.<sup>39</sup>

As Cohn mentioned, the 'Successo' genre of plague writings often incorporated another form of chronological representation of the disease: the lists of statistics compiled by urban governments. These focused attention on the precise changes of the day-to-day. Official *polizze* (bills) issued by the Venetian *Provveditori alla Sanità* were posted at two sites central to communication structures in the city: Rialto and at St Marks. These were issued weekly on Sundays and provided varying amounts of information. They gave daily mortality figures and occasionally stated the gender or age of the deceased. Important systems were utilised at the parish level to facilitate the collation of these statistics.<sup>40</sup> The control of information had long been recognised as vital for public health and during this period the collation of data became increasingly minute and systematic.<sup>41</sup> The statistics became a source which could be used to interpret and structure experiences of epidemics but the up-to-date information might also have a significant effect on the emotions. Rocco Benedetti reflected on the posting of the *polizze* in Venice and noted that the high figures shown at one point had the effect of "terrifying everyone" (*che spaventò ciascheduno*). Fear, of course, was one potential impact of the focus on chronological time and it was one with significant medical resonance in the early modern period as a potential cause of disease.<sup>42</sup>

During outbreaks, families were also expected to keep a precise record of the circumstances surrounding illness, death or the return to health and to ensure that the details were not obscured or blurred by their experiences of grief. The elapsed time between the onset of symptoms and death was used in conjunction with visible signs by doctors who undertook retrospective diagnosis or autopsy.<sup>43</sup> This can be seen in the letterbook of the doctor Ludovico Cucino who worked for the *Provveditori alla Sanità* during the outbreak of 1555-58 in Venice, for example. In an interview following a suspicious death, the significance placed on establishing precise timings is apparent. Lorenzo, a boatman living in San Canziano (Cannaregio) with his wife and five children, described the illness of his nine-year-old daughter Catherina. The first question he was asked about this illness was how long she had been feeling sick. She had started to feel unwell on Wednesday. She seemed to recover, sleeping well and eating a little that night. She felt better on Friday before suddenly deteriorating at six o'clock that night. She died between six and seven o'clock. The dramatic and unexpected nature of her death was noted as the reason that a doctor had not been called. The family's account was confirmed by neighbors. The doctor's letter book further refers to the records of the parish priest, which had registered that Catherina's older sister (thirteen years old) had been feeling unwell the previous Tuesday but now seemed to have recovered a week or so later. The family was taken to the *lazaretto nuovo* the following day and Cucino was instructed to keep them separate from the others on the basis of the information on the timing of illness, as assembled through the family's recollections, interviews and parish records.<sup>44</sup>

Just as the speed of onset was characteristic of the disease, so too was speed looked for as a sign of success in the treatments developed for the disease. Medical 'secrets' were advertised and promoted in shops and on the street as 'certain' cures for the plague.<sup>45</sup> The owners of the treatments frequently made claims for rapid recovery or purgation – described by some observers as ridiculous and a source of false hope.<sup>46</sup> Rocco Benedetti, for example, records the offer made by Antonio Valtemo, a Flemish merchant, to cure the city of Venice in the space of eight days. Felice Brunello developed a method for cleaning goods by submerging large chests in water for five days.<sup>47</sup> In compiling proof of efficacy, ideally details were provided about both the brief duration of treatment and protracted period of impact. In October 1576, officials in Murano wrote to the *Provveditori alla Sanità* in order to make them aware of a new method for disinfecting goods using channels of salt water that had been developed on the island. In a letter of 24 October, they wrote that the method had been tested in 400 or more households in Murano which had been suffering from plague. None had any signs of the disease following the return of their goods: by then people had worn clothing and used their objects for 40 days or more.

Monitoring the passage of time in such circumstances was challenging but vital. For patients within plague hospitals, some sense of the passing days and weeks may have been derived from movement through or between institutions. In the case of the Venetian *lazaretto nuovo*, the duration of quarantine was intended to be rendered in the physical structure of the institution. The Prior at the *lazaretto nuovo* was reminded by the *Provveditori alla Sanità* in June 1502 that the hospital there

notionally separated into four parts, with ten days spent in each section so that groups of patients could be kept apart whilst undergoing quarantine.<sup>48</sup> It is unlikely that such a system could have been maintained during the most severe epidemics, and when the islands were used to quarantine incoming vessels, groups were simply split among these spaces.<sup>49</sup>

For those who underwent quarantine within their households, many of the aspects of everyday life which generally structured time (hours of work, religious rites and the awareness of the rhythms of agricultural work through travel into suburban and rural areas) were transformed. For those who stayed in their homes, any time-keeping devices (whether mechanical or printed) they owned would, of course, have continued to be accessible. It is difficult to know whether patients would have access to objects of time-keeping while in plague hospitals. We know of at least one clock in the *lazaretto nuovo* because an inventory was made in 1540 of the house in which the head administrator (the Prior) was permanently resident.<sup>50</sup> Located in one corner of the island, the internal spaces would not have been visible or accessible to patients, however. It is not clear whether there would have been a clock on the other hospital island. In 1527, Joannis de Segna made his will on 7 December in the *lazaretto Vecchio*, leaving one gold ducat to the Prior of the hospital to erect a clock (*per far uno oriole in questo loco*).<sup>51</sup> Whether this was carried out is not clear from the surviving records, but the fact that a patient made such a request does suggest that the ability to trace the passage of time on the islands was believed to be of significance for patients.

Both plague hospital islands in Venice have surviving inscriptions and graffiti attesting to the experiences of those who stayed and worked on the islands during periods of quarantine.<sup>52</sup> There are no tallies from patients counting down the days of quarantine because the patients' wards and rooms no longer survive. The columns of numbers on one of the walls of a warehouse may correspond to a tally of merchandise or the scores from a game played between workers.<sup>53</sup> Many of the examples of graffiti consist simply of merchants' symbols, which would originally have had the practical function of distinguishing sections of goods from one another.<sup>54</sup> In terms of textual inscriptions, basic examples give information regarding places of origin, dates of arrival and names of travellers. More detailed examples describe the journeys of individual merchants, their places of origin and their lengths of stay.

An unusual example of the graffiti, and one of the most elaborate, was composed by Antonio di Trivisani who worked for the *Provveditori alla Sanità* as a guardian. He specified that he was in the *lazaretto nuovo* for two months between 6 July and the end of August 1585. During this time, he recorded the death of Doge Nicolo da Ponte and the election of his successor Pasquale Cicogna. It is interesting to note that the dates listed for these events (28 July and 18 August) may have been slightly inaccurate since they are generally believed to have taken place on 30 July and 15 August respectively.<sup>55</sup> This inscription is fascinating for its sense of the movement of news and information between the island and the city. Disinfection workers were required to have an acute sense of the passage of time, prompting this visual record of news and alongside reports with specific information regarding dates and duration of quarantine.



The surviving sources make it difficult to access the way in which information about patients would have been passed on to individuals and families. A loose slip of paper in the notarial papers of the Venetian State archive, dated 14 December 1576, records that Anzolla Burnacina from San Luca had been taken to the city's *lazaretto vecchio* on 5 August of that year and died the following day. The notification was written by Zuanne Stella, one of the city's 'deputato alli morti', and drawn from the *polizza* of the hospital. It is unclear why this was being reported four months after Anzolla's death. Surviving archive records provide detail about how information flowed to *Provveditori alla Sanità* rather than the other way around. It was possible to visit patients in the hospitals with permission and this may have been one way in which information was passed back to the city about the health of patients, albeit sporadically.<sup>56</sup> Waiting for these updates likely exacerbated the perception of slow-moving time.

Daily routines for those in quarantine whether in hospitals or at home were intended to help structure the passage of time and individuals may have had some access to time-keeping devices. Neither of these, however, helped to deal fully with the boredom and anxiety of patients deprived of the activities and occasions that generally structured their days and nights. Although a time-bounded period, quarantine was experienced as seemingly interminable, as suggested by the description of the two plague hospital sites in Venice as resembling the states of 'Hell' and 'Purgatory' in the surviving account by Rocco Benedetti. The painfully slow progress of time during quarantine was one of the reasons that civic and

religious authorities sought to interpret the events of plague in the context of cyclical time.

## Cyclical time

Quarantine itself had a religious basis: the term developed from the Italian for forty (*quaranta*) and referred to a policy based around the unit of forty days. This symbolic and significant period regularly features in the Bible.<sup>57</sup> It was the period set out for embalming in Genesis, as well as for mourning, repentance and purification after childbirth and of course is the liturgically-sanctioned period for Lent.<sup>58</sup> The religious significance of the period of quarantine was not coincidental – it was intended to bring comfort to those in need and to encourage those undergoing quarantine to consider themselves as undergoing a period of purification, to be spent in devotion.

Although traditional studies tended to focus on the potential tension between public health regulations and religious devotions during plague-time, a balance was sought in communities across Europe to enable the continuation of processions, prayer and worship during epidemics.<sup>59</sup> For those in quarantine, regular religious services were held in places intended to be as visible as possible. Attention was also paid to the unit of the ‘sacred household’ across the peninsula and articulated most explicitly by Carlo Borromeo in sixteenth-century Milan.<sup>60</sup> He advised that,

To better pass this time to good effect, take into consideration every day that this quarantine is like another holy time of Lent: and just as Our Lord fasted for forty days in the desert – far from any conversation of men, interacting only with God through prayer – each father of a family should ensure that in this

public time of sadness and solitude, not only do members of his family retreat from conversation outside their house but even more that they retreat inside themselves in prayer, in holy meditations, in examining their consciences, in consideration of judgments of God, their own death, universal and individual judgment, the sufferings of hell, the glory of paradise and other similar things...<sup>61</sup>

The effects of this conceptualization of a public health strategy as a liturgical season were manifold. As a period of purification, Lent had a number of relevant resonances for Catholic communities suffering during an epidemic. The comparison was intended to draw a parallel with a construction of time which was not only established and cyclical but also familiar. One of the administrators of the Genoese plague hospital, during a severe epidemic in the seventeenth century, reflected on the difficulties of keeping patients in designated spaces and dealing with boredom. He recommended trying to fill these patients' days with praiseworthy practices (*lodevoli esercitii*) on the example of San Carlo.<sup>62</sup>

These spiritual activities would have been quiet but were intended, perhaps, to counteract the unnatural silence which fell upon the city during epidemics. In other contexts, silence might be viewed favourably with regard to health.<sup>63</sup> In times of plague, the days were intended to be filled with spiritual devotions that enabled auditory connections with others. As the Venetian writer Francesco Sansovino emphasised in his idealised description of the Venetian plague hospitals, quarantine offered an uninterrupted opportunity for piety, humility and goodness. Patients were said to spend their time in worship and prayer with 'the harmony of voices

praising God; some singing litanies, others psalms'. Rather than being 'overwhelmed and occupied by compassion and grief' in the midst of such a horrendous outbreak of disease, the people within the *lazaretti* were instead overwhelmed by 'applause and joy' at the goodness of the Republic. These forms of collective devotion were intended to connect patients across the spatial divisions necessitated by quarantine.

One way in which these audible signs of devotion were developed during epidemics was through bell-ringing. Borromeo further instructed that,

Bells across the parish were to be rung seven times a day, approximately every two hours, to call the households to prayer. Once begun, the bell would be rung again every quarter hour, until the fourth bell signals an end to the hour of prayer.<sup>64</sup>

Early modern communities would have been familiar with the intersection of civic and religious bell ringing, as well as being highly attuned to the different meanings of the bells across their city.<sup>65</sup> During epidemics, the significance of bell-ringing was more spiritual than practical. In times of high mortality, such as during the Black Death, communities had stopped tolling bells to mark death. Benedetti records the instructions of the Patriarch that the daily bells in Venice should be restarted as a call to prayer in order to support the private devotions of individuals and households. These were to be rung after 'Nova and the Ave Maria' and the people were asked to kneel and say three Our Fathers, three Hail Marys and ask for God's mercy.<sup>66</sup> In Cividale del Friuli, one contemporary recorded that, although many church services stopped in times of plague, the bell of the *chiesa maggiore* continued to be rung. On

hearing the bell, those in the *lazzaretti*, in household quarantine and those who served were said to kneel down and pray until the end of the Mass.<sup>67</sup> In Padua, the Catholic leaders instructed that prayers should be said across the city at midday and at midnight (*nel mezzo giorno et nella mezzo hora di note*). The call to these collective acts of prayer was the ringing of bells which enabled all families, indeed the whole city, to pray in the same moment for the liberation of Padua and Venice. In addition, the monasteries were requested to undertake the devotion of the Forty Hours.<sup>68</sup>

Sounds were used for a similar purpose within institutions. According to Pamela Jones, a story associated with dying a good death in a *lazzaretto* centres upon a man who had been abandoned for dead on a pile of corpses. The man heard a bell ringing, which indicated that a priest was offering the viaticum. The man stood up and approached the priest, knelt at his feet, and asked to receive Communion; after receiving it, he died.<sup>69</sup> The sound of the bell was the sign that prompted and enabled this moment of spiritual devotion before death.

Catholic Reformation teaching had provided precise instructions for daily worship in a domestic setting, which would often be in response to the sound of a church bell. Borromeo's teachings and instructions for the inhabitants of Milan, published after the outbreak of plague, recommended a continuous state of prayer while emphasising the value of praying at prescribed times. This was recognised to have implications for physical and spiritual health. During the second half of the sixteenth century, as historians of Italian domestic devotions have illustrated, a number of texts sought to 'control not only the soul but also the body'.<sup>70</sup> Julia Rombough has shown that sounds and behaviours were believed to cause physical

as well as spiritual illness, as in a 1577 treatise printed in Florence which described ‘madrigals, and vile songs, lascivious dances and inappropriately intimate conversations.’<sup>71</sup> Plague regulations often banned activities such as dancing within cities and hospitals.<sup>72</sup> One memorable account from the *lazaretto* in Brescia records how a member of the religious order in charge of the institution discovered a party in one of the rooms of the hospital, something which had been explicitly forbidden. The brother in question decided to break up the party. He collected the corpse of an old woman who had died the previous day. He carried the corpse to the room in question and knocked on the door. To the question, ‘Who is it?’ he replied, ‘People who want to dance’. The door was opened and the brother threw the corpse onto the ground in the middle of the dancers and said ‘She wants to dance too’, reminding them that to avoid death one had to avoid offending God. Earthly behaviour would be interpreted in the context of impending judgement.<sup>73</sup>

It was believed that individuals were more likely to transgress regulations under the cover of darkness, and legislation was passed to address movement through the city at night. In March 1490, for example, the *Provveditori alla Sanità* received a denunciation which accused Alessio Barbiri and his wife of burying their nine-year-old daughter illicitly under cover of night. As if to reinforce the official stance on the dangers of such behaviour, Alessio was noted a week later to be ill of the plague at the city’s plague hospital.<sup>74</sup> In the nearby city of Padua it was written that

The plague could not be stopped because by night, body clearers and disinfectors smeared the door knockers of healthy houses with blood from

infected buboes or carbuncles of dead plague victims and they threw infected clothing into the houses of the poor and this in order to prolong the benefits derived by them from stealing and committing dishonest acts with the dead bodies of young people whom they loaded onto the carts.<sup>75</sup>

Margaret Pelling notes that within vernacular plague literature in early modern England there was a popular stereotype of “the predatory nurse or night-crow who robbed her patients while they were on their deathbeds and spread infection by selling their clothes and bedding.”<sup>76</sup> Canobbio recorded that a bombardier from Trento entered Verona furtively by swimming across the Adige at night.<sup>77</sup>

In Venice, *pizzigamorti* (body clearers) were accused of thefts and misdeeds and became associated with the hidden, the furtive and the dark. Instructions were issued that *pizzigamorti* should carry out their work by day and not by night so that the light “should bear witness to any wickedness or cunning tricks”.<sup>78</sup> Venice was distinct amongst Italian cities, as noted by Marin Sanudo because “in [Venice] there are no walls around the city, no gates to be closed up at night and no need for guards on the look out for fear of enemies”.<sup>79</sup> Spaces for particular religious or economic communities, such as the Jewish Ghetto and German *fondaco* were locked at night, but the movement of inhabitants was not otherwise limited.<sup>80</sup> Nighttime was believed to be a safer time for rubbish and bodies to be transported because the cooler air was less likely to transmit rotten particles and there were fewer people in the streets. This had the benefit of reducing the risk of transmission of miasmatic air while shielding individuals from distressing sights, but it also limited the capacity for neighbors to operate as witnesses within communities. Restricted mobility meant that fewer

witnesses were present.<sup>81</sup> Managing morality and behaviour formed a vital part of public health work to limit the causes and chains of contagion.

There are many examples of the ways in which chronological time was shaped by the cyclical. In Milan, the city was declared to be free of infection on 20 January 1578, the feast day of St Sebastian.<sup>82</sup> In Venice, an eight-day quarantine of three of the city's main administrative districts (Castello, San Marco and Cannaregio) was ordered to start on 7 October, the feast day of Santa Giustina. The church in Castello was the site of an annual procession by the Doge and Senate to commemorate the famous naval victory at Lepanto. The military associations may have resonated strongly since the imposition of the districts' quarantine necessitated posting guards on the Rialto bridge, which linked the two sides of the city. Indeed, a number of surviving accounts of epidemics are punctuated with references to feast days as opposed to calendar dates. Not only does this overlay the experiences of plague with the events of cyclical time, it also suggests that events were more memorable when they coincided with a feast day. The health of cities on particularly significant days was also imbued with additional meaning. Benedetti emphasised that there were no deaths recorded in Venice on the last day of the year in 1576, meaning that the statistics of 1 January were shown as a 'carta bianca' and hence a sign of hope and the enduring goodness of God in the year to come.

The use of liturgical seasons to conceptualise time in quarantine had both symbolic and practical purposes. It was intended to make the extraordinary and frightening experiences of epidemics comprehensible and to provide structure to the days that households and families spent in quarantine. It also addressed the spiritual



basis of natural disasters and the collective need to atone. The recognition of this collective culpability was articulated most strongly in the vows which culminated in the construction of votive churches, including the Redentore and Santa Maria della Salute in Venice. Benedetti records that the first stone of the Redentore church was laid on 25 March – the day of the Incarnation of the Virgin and the date of the foundation of the city.<sup>83</sup> The emphasis on these annual feast days was intended to impart a sense of meaning and purpose to the timing of events which otherwise seemed to occur outside the frameworks of time, whether the seasonal or the horological.<sup>84</sup> Instead, the authorities sought to impart meaning to the disruptive season of plague and to diffuse some of the highly-charged emotions which epidemics generated.

With the loss or suspension of many livelihoods, the emotions recorded in accounts of plague were predominantly those of despair, grief and fear. In the face of this, religious leaders sought to encourage individuals to set their experiences of the epidemic within a longer history. In Venice, a preacher implored the government to impose a fifteen-day '*sequestratione*' or lockdown. Before doing so, he reminded his elite male listeners that God had miraculously founded the city of Venice in the middle of the water as a bulwark (*antemurale*) for the whole of Christianity. For centuries, God had defended the city and saved it from storms. They should not lose heart or be dismayed (*'sbigotirsi'*).<sup>85</sup> Later in the epidemic, a preacher at the Basilica of San Marco reminded listeners of the examples from the Bible of the Hebrew's miraculous release from the cruelty of the Pharaoh, as well as starvation and thirst in the desert.<sup>86</sup>

Each of these stories was designed to reduce a sense of abandonment and isolation in the course of an epidemic.

Despite these efforts, loneliness is a theme in a number of plague writings. In reflecting on his experiences of walking through Venice during the plague of 1575-77, Benedetti described locations which had become solitary and wildly overgrown (*lochi ermi e salvaggi*). It did not take long for the natural world to begin to reclaim spaces, squares and streets that ordinarily bustled with the movement of people, animals and merchandise.<sup>87</sup> In Padua in 1576, Canobbio describes the ways in which the streets became overgrown so that at night horses would graze on them.<sup>88</sup> The sight of overgrown streets provided a striking reminder of plague as a season of disruption of both movement and time, but Benedetti's language of solitude is telling. Of course, loneliness does not work in a way which is inversely proportional to the number of people someone is surrounded by, as modern experiences of urban centres often attests.<sup>89</sup> However, immobility and quarantine could create a sense of solitude in the midst of some of the most populous cities in Europe when a proportion of residents left urban settings for the countryside.

Material culture aimed to provide a sense of comfort for those experiencing hardship during epidemics.<sup>90</sup> One beautiful example in the collection of Venice's Museo Correr was originally located within the *lazaretto vecchio* and shows the Virgin enthroned and surrounded by eight members of the Republic's government. Other carvings from the plague hospitals portray the patron saint of the city, St Mark, flanked by the plague saints Roch and Sebastian. Care was taken to try to provide objects of beauty for patients as a visible source of consolation. These connections

between the communities of the city and the Church – whether through permanent sculptures within institutions or portable altars or processions of images within the streets – were all intended to bring comfort through a heightened awareness of a Catholic eternity.<sup>91</sup>

## Conclusion

This article has suggested that seasons of plague and quarantine prompted distinct and significant regulation of time, alongside extensive administration of time-keeping, in early modern Venice and elsewhere in Northern Italy. Structures for the regulation and conceptualisation of time became highly centralised, although the bureaucracy for the administration of official policies relied upon local structures. Officials promoted a precise attention to chronological time in order to be able to trace the progression of the plague effectively. Alongside this however, they encouraged communities to conceptualise seasons of quarantine cyclically so as to assuage the powerful and dangerous emotion of fear.

This article has emphasised both the speed with which plague was seen to progress and the protracted and often painful experiences of quarantine. The heightened awareness of both chronological and cyclical time, as well as the loss of mobility and routines to structure these, likely made the experiences of these epidemics live long in the memory. In Venice in 1576, as the epidemic was seen to abate, Benedetti described the disease in anthropomorphological terms: the plague grew old ('inveterata'). Depictions of the plague in material culture also adopted this idea: the altarpiece designed for the votive Church of Santa Maria della Salute after the last epidemic in Venice in 1630-1, for example, showed the plague as an

elderly, haggard woman.<sup>92</sup> The passage of time during an epidemic and the impact of public health measures might have weakened the disease, but it had not caused its death. The threat may have been contained but it did not disappear.

Some plague writings, such as the “Successo” texts, not only nuance our understanding of chronological time in the context of plague but also illustrate how epidemics were intended to be remembered. A wide variety of plague writings came to be valued for the way in which they could capture the expertise and experience gained during seasons of the plague. These insights informed future public health measures. The reissuing of older plague tracts by publishers, or the readvertisement or reproduction of old medical treatments, or secrets, also brought the experience of the past to bear on the present, presumably with the implied hope that what had contributed to the abating of previous outbreaks of the plague might prove successful again.

These texts, along with votive churches, portrayed a clear end to outbreaks at the level of a polity. But for individuals, many of the physical and economic effects would linger. Brian Pullan has noted comparisons between plague and Carnival as a time when the world was turned upside down. Many observers wrote of the period as one of terrifying social transformation in which ‘everyone was made a pauper’. Nevertheless, the fact that many members of the social elite could escape the urban environment meant that they were better able to recover from such an economic shock – or, that the impact was more limited to the boundaries of the epidemic.

Benedetti’s account emphasised the speed with which shops were reopened, people returned to the city and the streets became busy once again at the end of an

epidemic. In many ways, textual accounts and material culture sources were attempts to counterbalance this swift return to normality. They insert themselves somewhere between the temporary, time-bounded experiences of the season of plague and quarantine and the perspective of eternity by demonstrating the value of memory and history.

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<sup>1</sup> <https://collections.vam.ac.uk/item/O118387/plaque-unknown/> accessed 25 March 2021.

<sup>2</sup> The panel has been associated in style with two pharmaceutical jars but on these it is just the year (1501 and 1502) which is recorded: Elisa P. Sani, 'Il primo lustro italiano datato: il *San Sebastiano* del Victoria and Albert Museum' in Giulio Busti and Franco Cocchi (eds), *Maiolica – Lustri oro e Rubino – catalogo della mostra* (Assisi, 2019) pp. 19-20.

<sup>3</sup> On St Sebastian as an intercessor against the plague see Sheila Barker, 'The making of a plague saint: Saint Sebastian's cult and imagery before the Counter Reformation' in Franco Mormando and Thomas Worcester (eds), *Piety and plague: from Byzantium to the Baroque* (Kirkville MI, 2007) pp. 90-131.

<sup>4</sup> See, for example, Fredrika H. Jacobs, *Votive panels and popular piety in early modern Italy* (Cambridge, 2018), Maya Corry, Deborah Howard and Mary Laven (eds), *Madonnas and miracles: the holy home in Renaissance Italy* (Cambridge, 2017) and Mary Laven, 'Recording miracles in Renaissance Italy', *Past and Present* 230:11 (2016), 191-212 in which Laven writes that votive panels often demonstrate 'scant regard for chronology... more often, the picture is left to speak for itself' although on occasion an inscription might feature as part of the ex-votos which include a precise date.

<sup>5</sup> "Seguiva la peste, facendo ogn'hora maggior strage" in Rocco Benedetti, *Relatione d'alcuni casi occurs in Venetia al tempo della peste l'anno 1576 e 1577* (Bologna, 1630) [hereafter 'Benedetti'].

<sup>6</sup> Alessandro Canobbio, *Il Successo della peste occorsa in Padova l'anno 1576* (Padua, 1577) [hereafter 'Canobbio'] 13r.

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<sup>7</sup> Recent studies of public health for the plague include Zlata Blažina Tomić and Vesna Blažina, *Expelling the Plague: the Health Office and the Implementation of Quarantine in Dubrovnik, 1377-1533* (Montreal QC and Kingston ON, 2015), Kirsty Wilson Bowers, *Plague and Public Health in Early Modern Seville* (Rochester, N.Y., 2013), John Henderson, *Florence Under Siege: Surviving Plague in an Early Modern City* (London, 2019) and Jane Stevens Crawshaw, *Plague Hospitals: Public Health for the City in Early Modern Venice* (Aldershot, 2012). The best study of the establishment of Health Offices in Northern Italy remains Richard J. Palmer, "The Control of Plague in Venice and Northern Italy 1348-1600" (PhD diss., University of Kent, 1978).

<sup>8</sup> On the development of quarantine see Blažina Tomić and Blažina, *Expelling the Plague* and Jane L. Stevens Crawshaw, "The Renaissance Invention of Quarantine", *The Fifteenth Century* 12 (2013): 161-74.

<sup>9</sup> On the pox see Jon Arrizabalaga, John Henderson and Roger French, *The Great Pox: The French Disease in Renaissance Europe* (New Haven and London, 1997) and Laura McGough, *Gender, sexuality and syphilis in early modern Venice: the disease that came to stay* (Basingstoke, 2011).

<sup>10</sup> Peter Burke, "Reflections on the Cultural History of Time", *Viator* 35 (2004): 617-26 and Matthew Champion, *The Fullness of Time: Temporalities of the fifteenth-century Low Countries* (Chicago I.L., 2017). See also R. J. Quinones, *The Renaissance discovery of time* (Cambridge M.A., 1972) for time in the literature of this period.

<sup>11</sup> Brian Pullan explored plague as a season through a comparison with Carnival but his purpose was to emphasise disruption and issues of behaviour rather than consider structures and senses of time. Brian Pullan, "Plague and Perceptions of the Poor" in Paul Slack and Terence Ranger, eds., *Epidemics and Ideas: Essays on the Historical Perception of Pestilence* (Cambridge, 1992), 101-25.

<sup>12</sup> During the fourteenth and fifteenth centuries, Brian Pullan has recorded outbreaks in Venice in 1361, 1381-2, 1391, 1397, 1403, 1411, 1438, 1447, 1456, 1464, 1468, 1485, 1490 and 1498 in *Rich and poor in Renaissance Venice* p. 219.

<sup>13</sup> 'quanto che quivi non era piu stato veduto un simil male di peste, se non ad alcuni pochi vecchi' in Canobbio 2r.

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<sup>14</sup> Katherine A. Craik, 'Introduction' in Katherine A. Craik (ed.) *Shakespeare and Emotion* (Cambridge, 2020) p.1.

<sup>15</sup> Early modern emotions have been a focus for extensive study in recent years. See, for example, the scholarship and references in Susan Broomhall, *Early modern emotions: an introduction* (London, 2017).

<sup>16</sup> Ann G. Carmichael, "The Last Past Plague: the Uses of Memory in Renaissance Epidemics", *Journal of the History of Medicine and Allied Sciences*, 53 (1998): 132-60. The nature of the sources makes it difficult to analyse the ways in which perceptions of time during quarantine may have been gendered or affected by age, ethnicity or religion; most are produced by the urban elite males who continued to work through contexts of plague and recorded their observations of the impact of plague and quarantine on individual cities.

<sup>17</sup> Canobbio 1r.

<sup>18</sup> See references in notes 6 and 7.

<sup>19</sup> For details of the Venetian system see Stevens Crawshaw, *Plague Hospitals*.

<sup>20</sup> On Milan, Padua and Verona see L. Beltrami, 'Il lazaretto di Milano', *Archivio storico lombardo*, 9 (1882), 403-41. Camerlengo, L., 'Il lazaretto a San Pancrazio e l'ospedale della Misericordia in bra: le forme dell'architettura' in A. Pastore, G. M. Varanini, P. Marini and G. Marini (eds.), *L'ospedale e la città: cinquecento anni d'arte a Verona* (Verona, 1996), pp. 179-91.

<sup>21</sup> In Palermo, separate spaces were assigned for the quarantine of criminals in L. Ingaliso, ed., *Giovan Filippo Ingrassia: Informatione del pestifero et contagioso morbo* (Milan, 2005), 388-9. In Florence, separate spaces were provided for beggars and orphans. See Henderson, *Florence Under Siege*.

<sup>22</sup> Canobbio 8r.

<sup>23</sup> Archivio storico del Patriarcato di Venezia, San Fantino, libro de battizzati 1560-1629 (final page) 23 January 1576. This list survives from 1576 and details two women and a man returned from the *lazaretti* and three individuals licensed after household quarantine.

<sup>24</sup> Archivio di Stato, Venice [hereafter 'ASV'], Sanità 732 149r (13 June 1576) and 156v (1 July 1576).

<sup>25</sup> ASV, Secreta, Materia Miste Notabili [MMN], 95 36r (3 July 1576). For restrictions on women and children in Palermo see Ingaliso, ed., *Giovan Filippo Ingrassia*, 363-9.

<sup>26</sup> ASV, Sanità, 726, 65r (31 July 1523).

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<sup>27</sup> Burke, 'Reflections', 624.

<sup>28</sup> The period of *terce* roughly fell before midday.

<sup>29</sup> ASV, Sanità 725 78r (31 July 1503). These times are given as xxii hours and xxiii hours in the text.

<sup>30</sup> Canobbio 4v.

<sup>31</sup> Canobbio 6r.

<sup>32</sup> Benedetti 23.

<sup>33</sup> Benedetti 23.

<sup>34</sup> The pamphlet is published first as *Discorso sopra il significato del parto mostruoso nato di una Hebrea in Venetia nell'anno 1575 adi XXVI di Maggio* (Venice, 1575) and then twice in the following year as *Discorso sopra gli accidenti del parto mostruoso nato d'una hebrea nel ghetto di Venetia nell'anno 1575 a di XXVI di Maggio. Dove si ragiona altamente del future destino de gli hebrei. Di novo ristampato* (in Bologna and Venice). This case is discussed in David B. Ruderman, *Kabbalah, Magic and Science: the Cultural Universe of a sixteenth-century Jewish Physician* (Cambridge M.A., 1988), chapter five: "Out of the mouths of babes and sucklings" and is contextualized in relation to R. Abraham Yagel's [1553-1623] later exploration.

<sup>35</sup> Samuel K. Cohn Jr., *Cultures of Plague: Medical Thinking at the End of the Renaissance* (Oxford, 2009), Chapter Four: *The Successo della peste*.

<sup>36</sup> Canobbio 2r-3v.

<sup>37</sup> Canobbio 7r.

<sup>38</sup> Canobbio 18v.

<sup>39</sup> Canobbio 32v-33r.

<sup>40</sup> The structure is outlined in ASV, Secreta, MMN, 95 17r (13 June 1575) and 107v (2 November 1576).

<sup>41</sup> On structures for communication and information during plague see Palmer, 'The control of plague'.

<sup>42</sup> G. A. Bellicochi, *Avertimenti di tutto cio che in publico da Signori et in privato da ciascuno si debbe far nel tempo della peste* (Verona, 1577). See William G. Naphy and Penny Roberts, eds., *Fear in Early Modern Society* (Manchester, 1997) particularly the contribution by David Gentilcore, "The fear of disease and the disease of fear", 184-208. Andrew Wear, "Fear, Anxiety and the Plague in Early Modern



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England” in John R. Hinnells and Roy Porter (eds.), *Religion, Health and Suffering* (London, 1991), 339-363.

<sup>43</sup> On specific signs and time between symptoms and death see Cohn Jr., *Cultures of plague*, Chapter Two ‘Signs and Symptoms’.

<sup>44</sup> Wellcome Library for the History and Understanding of Medicine, ms. 223 [Cucino], 26v (4 May 1555).

<sup>45</sup> On medical secrets see Sabrina Minuzzi, *Sul filo dei segreti: Farmacopea, libri e pratiche terapeutiche a Venezia in età moderna* (Milan, 2016) and, for a consideration of these remedies amongst other printed materials in response to the plague *La peste e la stampa. Venezia nel XVI e XVII secolo* (Venice, 2021).

<sup>46</sup> Jane Stevens Crawshaw, ‘Families, medical secrets and public health in early modern Venice’, *Renaissance Studies* 28:4 (2014), 597-618.

<sup>47</sup> Benedetti, 28-9.

<sup>48</sup> ASV, Sanità, 725, 75r (3 June 1503).

<sup>49</sup> ASV, Sanità, 726, 40r (28 June 1522).

<sup>50</sup> ASV, Sanità, 728, 50v-51r (3 January 1540).

<sup>51</sup> ASV, Sanità, 726, 127v (7 December 1527).

<sup>52</sup> Francesca Malagnini, *Il lazzaretto nuovo di Venezia: le scritte parietali* (Florence, 2017).

<sup>53</sup> Malagnini, *Il lazzaretto nuovo*, 201-2.

<sup>54</sup> Images of the graffiti are reprinted in D. Petronio, “Le testimonianze pittoriche conservate lungo le pareti del Tezon Grando: aspetti artistici” in G. Fazzini (ed.), *Venezia: isola del lazzaretto nuovo* (Venice, 2004), 47-51.

<sup>55</sup> *Ibid.*, 168.

<sup>56</sup> ASV, Sanità 725 132r-134r (26 April 1486) [33].

<sup>57</sup> *The Bible*, Old Testament, Genesis 7; Exodus 24 and 34; NT Luke 4 v.1-13 and Acts 1 v.3.

<sup>58</sup> *The Bible*, Old Testament, Genesis 50 v.2-4; Deuteronomy 9 v.25. For the forty day period in relation to criminal cases see ASV, Senato Terra, reg 29, 123r (26 May 1537).

<sup>59</sup> See, for example, John Henderson, *Florence under siege: surviving plague in an early modern city* (New Haven and London, 2019).

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<sup>60</sup> On the 'sacred household' in Italy beyond the period of epidemics see Abigail Brundin, Deborah Howard and Mary Laven, *The Sacred Home in Renaissance Italy* (Oxford, 2018). On the Church and plague see Richard Palmer, 'The Church, leprosy and Plague in Medieval and Early Modern Europe', *Studies in Church History* 19 (1982): 79-99 and on the more general connection between religion and disease in early modern Venice, Alexandra Bamji, 'Religion and disease in Venice, c.1620-1700' (PhD Diss., University of Cambridge, 2007).

<sup>61</sup> *Acta Ecclesiae Mediolanensis*, II 1318 (1846).

<sup>62</sup> Father Antero Maria da San Bonaventura, *Li lazaretti della citta e riviere di Genova del MDCLVII* (Genoa, 1658), 506.

<sup>63</sup> Julia Rombough, 'Noisy soundscapes and women's institutions in early modern Florence', *The Sixteenth Century Journal* 50:2 (2019), 455.

<sup>64</sup> Remi Chiu, "Singing on the Street and in the Home in Times of Pestilence: Lessons from the 1576-78 Plague of Milan" in Maya Corry, Marco Faini and Alessia Meneghin, eds., *Domestic Devotions in Early Modern Italy* (Leiden, 2018), 27-45.

<sup>65</sup> Niall Atkinson, "The Republic of sound: listening to Florence at the threshold of the Renaissance", *Italian Studies in the Italian Renaissance* 16 (2013), 57-84.

<sup>66</sup> Benedetti, 20.

<sup>67</sup> M. Brozzi, *Peste, fede e sanità in una cronaca Cividalese del 1598* (Milan, 1982), 40.

<sup>68</sup> Canobbio 11r.

<sup>69</sup> Pamela Jones, "San Carlo Borromeo and Plague Imagery in Milan and Rome" in G.A. Bailey et al, *Hope and Healing: Painting in Italy in a Time of Plague* (Worcester M.A., 2005), 80.

<sup>70</sup> *Madonnas and Miracles* pp. 159-60.

<sup>71</sup> Julia Rombough, 'Noisy soundscapes' p. 462.

<sup>72</sup> ASV, Secreta MMN 95 4v (13 November 1575).

<sup>73</sup> F. Odorici, 'I due Bellintani da Salò ed il dialogo della peste di Fra Paolo' in G. Mueller (ed.), *Raccolta di cronisti e documenti storici lombardi inediti* (Milan, 1857) p. 288. On the broader issue of the relationship between physical and spiritual health see John Henderson, *The Renaissance hospital: healing the body and healing the soul* (New Haven and London, 2006).

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<sup>74</sup> ASV, Sanità, 725, 4r (15 March 1490).

<sup>75</sup> Biblioteca del museo civico di Padova, mss BP 1/149, F. Abriano *Annali di Padova 1568-1600* 16v. I am grateful to Tricia Allerston for drawing my attention to this reference.

<sup>76</sup> Margaret Pelling, *The Common Lot: Sickness, Medical Occupations and the Urban Poor in Early Modern England* (London, 1998), Chapter Eight “Nurses and Nursekeepers: Problems of Identification in the Early Modern Period”, 197.

<sup>77</sup> Canobbio 2r.

<sup>78</sup> Archivio di Stato Verona, Sanità, reg. 1, 223r-226v (5 May 1576). BMC, Donà dalle rose, 466, 34 “accio la luce fosse testimonianze de le sceleraggini e dei furbi”. On these workers see Jane Stevens Crawshaw, “The beasts of burial: *pizzigamorti* and public health for the plague in early modern Venice”, *Social History of Medicine* 24:3 (2011): 570-87.

<sup>79</sup> “In [Venezia] no ha muraglia niuna a torno la città, nè porte che le notte sie serrate, nè si fa custodia come le altre cittade per paura de nemici” cited in M. Tafuri, “Alvise Cornaro, Palladio e Leonardo Donà: un dibattito sul bacino Marciano” in L. Puppi, ed., *Palladio e Venezia* (Florence, 1982), 13.

<sup>80</sup> G. B. Milesio, *Beschreibung des deutschen Hauses in Venedig* (Munich, 1881), 29. On similarities between the Ghetto and the fondaco see Ennio Concina, Ugo Camerino and Donatella Calabi, *La città degli Ebrei. Il Ghetto di Venezia: architettura e urbanistica* (Venice, 1991), 211-16.

<sup>81</sup> Craig Koslofsky, *Evening's Empire: a History of the Night in Early Modern Europe* (Cambridge, 2011).

<sup>82</sup> Chiu, “Singing on the street and in the home’.

<sup>83</sup> Benedetti 30.

<sup>84</sup> Alisha Rankin, “Telling Time through Medicine: a Gendered Perspective” in Merry Wiesner Hanks, ed., *Gendered Temporalities in the Early Modern World* (Amsterdam, 2018), 95-114.

<sup>85</sup> Benedetti 23.

<sup>86</sup> Benedetti 25-26.

<sup>87</sup> On denaturalisation of time in the context of the French Revolution see ‘Time warps during the French Revolution’, *Past and Present* (2021).

<sup>88</sup> Canobbio 14r.

<sup>89</sup> On loneliness see Fay Bound Alberti, *A biography of loneliness: the history of an emotion* (Oxford, 2019).

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<sup>90</sup> ASV, Procuratia di San Marco di Citra, b. 361 D6, 15r 'Hospitale vetustate collapsum/ Divi Marci Procuratores de Citra/ Veri Pii, ac soli Gubernatores/ ut qui a languoribui cruciantur/ comodicii libernetur;/ summa cura instaurari iusserunt/ anno salutis nostre 1565/ mense maii'.

<sup>91</sup> Malagnini, *Il lazzaretto nuovo*, 106.

<sup>92</sup> S. Cohen, 'The early Renaissance personification of Time and changing concepts of temporality', *Renaissance Studies* 14:3 (2000).