

References, Influences, and Views on Inoculation Debates on David Schultz's *An Account of Inoculation* A Preliminary Study¹

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In this article, I focus on David Schultz's *An Account of Inoculation* and aim to analyse it within its context, by mapping the authors and texts referenced in it and concentrating particularly on British influences. I also analyse how Schultz makes use of these references in his arguments for smallpox inoculation, how he sees their importance, credibility and persuasiveness, and how he comments on them.

Since the number of references that Schultz makes both to existing literature and personal encounters is very high, I have chosen to limit my scope in this article to preliminary findings. Schultz's text, its background and its scientific framework as well as its effects on Swedish medical literature, medical education and smallpox prevention require further study.

Introduction

In 1754, a young Swedish physician ventured to London. David Schultz (1732–1823) had been sent to England to learn about smallpox inoculation, and the journey was backed by significant medical and governmental authorities. The costs were covered by the Swedish Health Commission (*Sundhetskommisionen*) and Schultz was provided with recommendation letters by professor Nils Rosén (1706–1773, later Rosén von Rosenstein) and archiater Abraham Bäck (1713–1795).²

David Schultz was the son of Jakob Schultz, a regiment surgeon of German origin practising in Sweden. Relying on his father's relatives for accommodation, Schultz had been able to relocate to Königsberg for education when he was thirteen years old. Two years later, in 1747, he had started to

¹ This work was written as part of the project *Agents of Enlightenment: Changing the Minds in Eighteenth-Century Northern Europe*, funded by the Academy of Finland, 2017-2021, under grants number 307668 and 326253.

² Sjögren, Iréne, *Nils Rosén von Rosenstein. Mannen som förlängde människolivet*. Carlssons Bokförlag, Stockholm, 2006. p. 46–47. Åman, Anders, "David Schulzenheim, von" in *Svenskt biografisk lexikon*. Available on the website of the Swedish National Archive, <https://sok.riksarkivet.se/Sbl/Mobil/Artikel/6411>.

study medicine at the local university and defended a medical dissertation in 1750, after which he returned to Sweden and continued his studies in Uppsala. As a brilliant pupil of Rosén and Carl Linnaeus (1707–1778), Schultz received his doctorate in 1754. During his studies in Königsberg, Schultz was noted as having special interest in anatomy; in Uppsala on the other hand, he started to focus more on paediatrics, likely due to Rosén's influence. Immediately after finishing his studies he was sent to England for a year, apparently on Rosén's and Bäck's initiative.³ Bäck himself had spent three months in England a decade earlier, in 1742, meeting several British colleagues in London and Oxford.⁴ The contacts that he had made during this visit are likely to have helped him to arrange Schultz's journey.

Smallpox, *Tabellverket*, and the motives behind Schultz's journey

Sending a 22-year-old physician to England for a year was a costly and, likely, somewhat risky investment. It was far from unique, as several young Swedish scholars of the time were sent to other countries to study specific areas of interest or to participate in long, hazardous expeditions. Schultz's journey was thus part of a larger *modus operandi* of Swedish scientific circles and should be analysed not as an individual incident, but in relation both to the old tradition of study trips and the adventurous, ambitious explorations of the so-called Linnaeus' disciples.⁵ It is, however, important to note the specific interests and aspirations behind Schultz's journey and the subsequent publication of *An Account of Inoculation*.

During the 1750s, smallpox was becoming a topic of increasing importance in scientific and public discussions in Sweden. The disease was a significant cause of death among the population. It had become endemic in most parts of the kingdom, causing recurring outbreaks with intervals of around five years and taking a heavy toll on small children. This was an ongoing affliction, to the extent that, according to Peter Sköld, not a year passed between 1750 and 1800 without smallpox

³ Sjögren, Iréne, *Nils Rosén von Rosenstein. Mannen som förlängde människolivet*. Carlssons Bokförlag, Stockholm, 2006. p. 46–47. Åman, Anders, "David Schulzenheim, von" in *Svenskt biografisk lexikon*. Available on the website of the Swedish National Archive, <https://sok.riksarkivet.se/Sbl/Mobil/Artikel/6411>.

⁴ Rydberg, Sven, *Svenska studieresor till England under Frihetstiden*. Lychnos-bibliotek, Studier och källskrifter utgivna av Lärdoms-historiska Samfundet 12. Almqvist & Wiksells Boktryckeri, Uppsala, 1951. p. 233.

⁵ For comprehensive information on such journeys, see *Ibidem* as well as Hodacs, Hanna & Nyberg, Kenneth, *Naturalhistoria på resande fot. Om att forska, undervisa och göra karriär i 1700-talets Sverige*. Nordic Academic Press, Lund, 2007.

epidemics in Sweden.⁶ The disease caused severe fear amongst the people and worried the authorities; these concerns were accelerated by the first population statistics collected by *Tabellverket*, the national population statistical office that was established in 1749. From then onwards, the government required all parishes to keep annual records on baptisms, marriages and burials, and to report these figures to *Tabellverket* in Stockholm. While such records had been kept with varying precision at least since the mid-seventeenth century, they now had to be made much more rigorously. Causes of death, for instance, had to be determined and included in burial records. The first records collected in this manner highlighted the high infant and child mortality and the significant role of smallpox in it. In result of the increasing scientific and political interest in population statistics, smallpox and inoculation became matters of great importance.⁷

Against this background, it is not surprising that the Health Commission was willing to use its resources to support Schultz's journey to England financially. Measures to combat smallpox mortality were direly needed, yet the knowledge on inoculation, which was gaining increasing recognition as an essential innovation, was severely lacking in Sweden. The first scientific text on the topic in Swedish had been published by Herman Dietrich Spöring (1701–1747) as early as in 1737,⁸ but back then, its publication received little attention. Rosén, who was primarily interested in paediatrics, wrote on inoculation in short informational pieces that he published as series in popular almanacs from 1753 onwards.⁹ However, no inoculations were carried out in Sweden until 1754, when Johan Haartman (1725–1787) performed one in Åbo and Samuel Aurivillius (1721–1767) another one in Uppsala.¹⁰ In his book, Schultz mentions an inoculation performed in Uppsala "under the inspection of Mr. Aurivillii the Body Surgeon".¹¹

David Schultz's *Berättelse om Koppors Ympande* was published in 1756, soon after the author had returned to Sweden. The book is a comprehensive and ambitious work, containing practical descriptions on how to perform an inoculation properly as well as a compilation of rhetorical, moral, religious and pragmatic arguments that could be used in debates with those who opposed the

⁶ Sköld, Peter, *The Two Faces of Smallpox. A Disease and its Prevention in Eighteenth- and Nineteenth-Century Sweden*. Umeå University, Umeå, 1996. p. 52.

⁷ On *Tabellverket*, Lindroth, Sten, *Svensk Lärdomshistoria III. Frihetstiden*. Norstedts, Stockholm, 1978. p. 453.

⁸ Spöring, Herman Dietrich, *Inoculatio Variolarum Eller Kort Beskrifning om sättet att Ympa Koppor på Menniskior. I anseende til des nytta*, Joh. Kiämpe, Kongl. Acad. Boktr. Åbo, 1737.

⁹ Örneholm, Urban, *Four Eighteenth-century Medical Dissertations under the Presidency of Nils Rosén*. Uppsala Universitet, Uppsala, 2003. p. 15.

¹⁰ *Ibidem*, p. 139.

¹¹ Schultz, David, *An Account of Inoculation*. London, 1758. p. 81.

practice. The English version, *An Account of Inoculation*, was published in 1758, translated by Schultz himself.

The British context

In England, inoculations had been practised already since the early 1720s. This interest was largely sparked by Lady Mary Wortley Montagu, who came into contact with the procedure in Constantinople and afterwards helped to make it more popular among the British nobility. However, inoculations were not widespread in England until the 1750s and 1760s, and even then the practice encountered fierce opposition, particularly among clergymen. Its popularity also varied considerably by region, as inoculation was generally more widely practised in rural villages and small towns than in large cities.¹²

Schultz arrived in the middle of these controversies. Judging by his text, he quickly orientated himself according to the ideas and opinions of his British colleagues, showing great respect to their works, as well as to the personal guidance and mentorship some of them had offered him. In *An Account of Inoculation* he also carefully dissects the arguments of "the Enemies of Inoculation" following both the views and the choices of words that can be found in British texts in defence of inoculation.

On the title page of the English translation of his book Schultz announces that he "attended the Small-Pox Hospital in London near a Twelvemonth". It seems that he spent most of his time in London observing physicians and patients both in the hospital and the Inoculation House. The Smallpox Hospital had been established a decade earlier, in 1746, as a charitable institution to provide inoculations, free of charge, as well as to offer treatment for those who had contracted smallpox. The Inoculation House, while being part of the same institution, was located far from the hospital, to prevent the natural spread of smallpox among those who wished to be inoculated. All patients with smallpox symptoms, whether they had contracted the disease naturally or via inoculation, were, however, treated in the Smallpox Hospital. It was not a small institution; between 1746 and 1752, a total of 1,352 patients received care for natural smallpox, and between 1751 and

¹² Davenport, Romola J., Boulton, Jeremy, Schwarz, Leonard, "Urban inoculation and the decline of smallpox mortality in eighteenth-century cities – a reply to Razzell". In *The Economic History Review*, 69, 1 (2016), John Wiley & Sons Ltd., p. 188–214. p. 189–190.

1755, nearly 600 inoculations were performed at the Inoculation House.¹³ Such an environment provided Schultz with a multitude of case histories and numerous possibilities for interesting observations.

General characteristics of *An Account of Inoculation*

An Account of Inoculation is, in a very clear sense, a commissioned work. The Swedish original functioned as a written proof to the Health Commission, in order to show them that Schultz had not let down the expectations of his commissioners and patrons. Furthermore, and more importantly, it would serve as a comprehensive and versatile manual for inoculators in Sweden, providing not only practical guidance, but also advice and resources on how to act when encountering opponents of inoculation. The English translation, on the other hand, likely served as a report of Schultz's learning to his hosts, teachers and colleagues in London, whilst also gaining recognition for Swedish physicians and writers, such as Rosén, outside Sweden's borders.

The dedication of the text sheds light on Schultz's aspirations and the background of the journey. The author dedicated *An Account of Inoculation* eloquently to the Health Commission, emphasising his efforts to gather all possible knowledge on the matter during his journey, theoretical as well as practical, and to advance the adoption of inoculations in Sweden:

May it please your Lordship, and you Honourable Gentlemen appointed by his Majesty's Royal Commission to superintend the Health of his Subjects.

I have the Honour to present an Account of the present State of Inoculation, as it is practised in England, as my Duty requires, to this Honourable Commission; if it is composed in a manner worthy of your Approbation, I shall have the Satisfaction of knowing that I have not attempted only, but performed, what my Situation and Obligations required. As it is, I have the Comfort of reflecting that I have omitted nothing in my Power, to make myself Master of this Point, have read whatever has been published either for or against Inoculation, attended diligently such Gentlemen as were most eminent for Practice in London, and the Patients in the Hospital, for this Disease, by Inoculation, and in the Natural Way, observed the Progress of the Distemper, and the Method of treating it throughout, with all possible Attention and Application.

Such is the Treatise I have the Honour to lay before you, and if from its Contents it shall appear, that my Endeavours have a Tendency to promote the Views of this Royal Commission for the public Safety and Service, then I hope to have the Honour of your Protection, and to have it thereby in my Power to promote a Practice that may preserve the Lives of many.¹⁴

¹³ Rusnock, Andrea A., *Vital Accounts. Quantifying Health and Population in Eighteenth-Century England and France*. Cambridge University Press, Cambridge, 2002. p. 94.

¹⁴ Schultz, 1758. Dedication.

The book, counting 119 pages in Swedish and 139 in English, is a lengthy treatise that showcases both Schultz's extensive reading and his interest in practical observations in the Smallpox Hospital and the Inoculation House. He had been allowed to observe his British colleagues, such as Edward Archer (1718–1789), when dealing with their patients, and throughout the book he describes their work and the discussions he had with them. It appears that Archer, who served at the Smallpox Hospital for over 40 years since 1747¹⁵, was of particular importance to Schultz. Schultz notes, for example, that "Doctor Archer ventured to continue inoculating all Seasons last Year, in the Hospital, and I was an ocular Witnes to it". He refers to several discussions which they had together and mentions that he received a letter from him recently.¹⁶

Indirectly, Schultz reveals the trust placed in a colleague's name and word. Throughout the text, he references case histories, writings and letters simply by mentioning the name of the physician or surgeon who has told him about a patient or published a treatise. Sometimes a chain of several people is identified; a medical practitioner has described a case to a colleague, who then has communicated it directly to Schultz, told it to someone Schultz knows, or published it. Such accounts are not challenged or put in doubt. A similar kind of respect is also expressed explicitly, as was customary in scientific texts of the time. Characterisations such as "the learned doctor Jurin" or "the experienced Doctor Sydenham" are included frequently.

Similarly, Schultz informs his readers of the views and opinions of others, especially when it comes to the moral aspects of inoculation and the controversies around it. The "friends" and "enemies" of inoculation are a central categorisation in the book. Schultz describes and comments on the arguments of both sides at length, devoting an entire separate section of the book to this debate. Calling someone an enemy of inoculation is a clear rhetorical tactic and an example of how Schultz presents to the reader the persons he refers to. More or less implicitly, he points to the views of the opponents of inoculation as being outdated and diminishing in importance, e.g. when he characterises La Faye as being "the last Enemy to inoculation in England".¹⁷ In reality, the opposition remained staunch for decades to come. In the nineteenth century, the Jennerian

¹⁵ Payne, Joseph Frank, "Archer, Edward". In *Dictionary of National Biography, 1885–1900, Volume 2*. Available on [https://en.wikisource.org/wiki/Archer,_Edward_\(DNB00\)](https://en.wikisource.org/wiki/Archer,_Edward_(DNB00)).

¹⁶ Schultz, 1758. p. 25 and further.

¹⁷ Schultz, 1758. p. 129.

vaccinations inherited, to a large extent, the same enmity and accusations that had first been directed against inoculation.

Schultz's views on the opponents of inoculation

When recounting the views of those who opposed inoculation, Schultz makes a clear difference between two kinds of opposition: the first one, often religiously motivated, he considers simply ignorant; the second one consisted of more subtle critique that focused on possible risks. The latter was usually expressed by medical professionals and was thus more worrisome. In the beginning of his book, Schultz recognises inoculation as a procedure that was not without problems:

Inoculation has been by some praised to that Degree, that they have found themselves not able to make good or maintain, in the Course of Practice, all they had asserted in its Favour. By others again it has been too much condemned from manifest Obstinacy or Ignorance.

The Enemies to Inoculation ground their Objections in the few Accidents which have happened, and the Friends thereto by that Means have learnt to be more cautious. By nice and careful Observations on the Small Pox, both in the Natural Way and by Inoculation, we are now better able to judge, whether a Person is likely to have it favourable or not.¹⁸

This is a thought-out way to address the opposition and doubts expressed by those who argued that the risks of inoculation were greater than its advantages. In several cases throughout the book, Schultz presents the arguments of such opponents in detail. In reply to "the enemies of inoculation" basing their arguments on fatalities that had occurred due to inoculation, Schultz points out that the inoculations in question had not been carried out properly or that these particular patients had not been sufficiently cared for after the inoculation. He uses a lot of statistical materials in this respect, noting that since the 1720s inoculation techniques had improved and that more knowledge and experience had been obtained on how to prepare the patients in the best way and to carry out the procedure. Statistics are also used as a simple argument: according to his sources, the number of deaths caused by inoculation had always been much lower than what was caused by natural smallpox, and moreover, thanks to the aforementioned improvements the number of fatalities had

¹⁸ Schultz, 1758. p. 1–2.

considerably decreased further.¹⁹ As a result of such statistical proof being available, Schultz claims that amongst physicians inoculation "has not had any Opposers for some Years".²⁰

Despite these general reassurances, some more specific concerns voiced by medical professionals are answered in the text. These are usually countered by blaming malpractice as the culprit or simply by explaining that the risk is not scientifically credible, e.g. with regard to the risk of spreading other diseases along with smallpox via inoculation.²¹

Some arguments from the opponents are considered much less worthy to refute. Schultz does, however, include examples of these in his book, likely trying to prove his point that much of the opposition was grounded on ignorance. The clergyman Edmund Massey (1690–1765), for instance, attempted to show the viciousness and sinfulness of inoculation by claiming that the biblical Job had been inoculated with smallpox by his enemies.²²

The geographical and temporal distribution of Schultz's reference literature

In *An Account of Inoculation* Schultz references a wide range of texts and authors, out of which I have identified a total of 107 authors and 112 texts. In table 1 I have arranged them according to their geographical and temporal distribution and in the appendix they are listed alphabetically.

Table 1. The geographical and temporal distribution of texts and authors referenced in *An Account of Inoculation*.

	Before 500	501–1000	1001–1500	1501–1600	1601–1650	1651–1700	1701–1720	1721–1730	1731–1740	1741–1750	1751–1756	16th or 17th c.	17th c. unclear	17th or 18th c.	18th c. unclear	Total
British			2			2	2	12	3	7	14		1		7	50 44,6 %
French						1		1			4				3	9 8 %
German						3			2	1	1	1			1	9 8 %
Dutch					1	2	1							2	1	7 6,3 %
Genevan											4				2	6 5,4 %
Swedish											3				1	4 3,4 %

¹⁹ Comparisons between the fatalities associated with inoculation and natural smallpox mortality: *Ibidem*, 1758. p. 106.

²⁰ *Ibidem*. p. 102.

²¹ *Ibidem*. p. 54–55.

²² *Ibidem*. p. 104.

Greek	2							1								3 2,7 %
Italian				1			1							1		3 2,7 %
Swiss				1				1			1					3 2,7 %
Irish											1			1		2 1,8 %
North American								2								2 1,8 %
Persian		1	1													2 1,8 %
Arab			1													1 0,9 %
Danish													1			1 0,9 %
Roman	1															1 0,9 %
Unknown				1		1	1			1	5					9 8 %
Total	3 2,7 %	1 0,9 %	4 3,6 %	3 2,7 %	1 0,9 %	9 8 %	5 4,5 %	17 15,2 %	5 4,5 %	9 8 %	33 29,7 %	1 0,9 %	2 1,8 %	3 2,7 %	16 14,3 %	112 100 %

Note: Geographical distribution according to the author's country of origin. Temporal distribution according to the year of publication when a specific text is referenced; otherwise, according to the author's lifetime. If several specific texts of an author have been referenced, they have been included in the table individually.

Occasionally, Schultz references several texts from the same authors. Unfortunately I did not manage to identify all of them. In such situations, only the identified texts have been included in the table. Schultz tends to give very brief references, mostly including only the family name or pen name of the author, and an abbreviation of the title of the text in question or the title of a compilation in which a certain text has appeared. Sometimes no specific text is mentioned. However, also these cases are included in my analysis because Schultz clearly points out that he is referencing a written text, not a personal encounter.

In 14 cases I have not been able to find either the text or the author referenced, or there were several possible identities for the authors. These cases are not included in the table or the list of references since it appeared to be impossible to determine them with sufficient accuracy.

Of the texts and authors that have been identified, a significant majority of 44,6 % are British. This allows us rather convincingly to conclude that Schultz either read most of his referenced material in England and wrote *An Account of Inoculation* there, or that he acquired a considerable collection of texts from England and brought it to Sweden upon his return.

In the dedication of his book, Schultz states that he has "read whatever has been published either for or against Inoculation". He may have spent hours upon hours in libraries, probably also borrowing books and asking reading recommendations from his local colleagues. As *An Account of*

Inoculation would develop into a central book on the subject in Sweden, Schultz's journey and his reliance on mainly British sources may have had an enduring effect not only on Swedish scientific discussions on smallpox, but also on Swedish medical science in a broader sense.

The other references cover a wide range, both in terms of geography and language as well as temporally, although those other than British, French, or German are relatively low in number and several categories consist of only one author or one text. In nine cases it has not been possible to identify the country of origin reliably, although in the majority the names point to Britain.

Similarly, many referenced texts that have been written during the eighteenth century seem to have been parts of the discussions of either the 1720s or the 1750s, but for the purposes of this article it remained impossible to date them accurately. Therefore, the percentages of British references and of texts written during the 1720s or 1750s are most probably even higher than mentioned in the table.

Temporally, the distribution shows a heavy emphasis on the 1720s and 1750s, with 15,2 % and 29,7 % of the texts having been published during these decades, respectively. Thus, 44,9 % of the texts were published in either the 1720s or the first half of the 1750s, as Schultz's account itself was published no later than in 1756. This is to be explained rather easily since inoculation first entered the European, and particularly the English and French, scientific and public discourse in the early 1720s. The 1750s experienced another wave of passionate discussion and debates on the matter, since inoculations were practised more widely in several countries. It is worth mentioning that Schultz was able to include several very recent texts in his book, some of them even from 1756, the year of publication of the Swedish original *Berättelse om Koppors Ympande*.

The most frequently cited text in the book is *The Analysis of Inoculation*, written by James Kirkpatrick (circa 1690–1702, died 1770). Kirkpatrick, originally Kilpatrick, was a physician of Irish origin who came into contact with inoculation while he was living in South Carolina. He returned to Europe in 1742 and worked in London.²³ The writings of the English physician Richard Mead (1673–1754) are also referenced with great frequency, *De Variolis et Morbillis Liber* in particular, as well as those of James Jurin (1684–1750), e.g. *An Account of the Success of Inoculating the Small-Pox*, a series of meticulous records published between 1723 and 1727.

²³ McCandless, Peter, "Kilpatrick (Kirkpatrick), James". In *South Carolina Encyclopedia*, available on <http://www.scencyclopedia.org/sce/entries/kilpatrick-kirkpatrick-james/>.

Numerous references are also made to Thomas Sydenham (1624–1689), a famous English physician with an enduring fame as one of the country's most important medical scientists.²⁴

It is remarkable that the number of Swedish references is rather low. Of particular interest is the complete lack of Spöring's *Inoculatio Variolarum*. The text seems to have had no major influence when it was published; Schultz's omission of it, whether deliberate or not, suggests that *Inoculatio Variolarum* remained largely forgotten or ignored even when the interest in inoculation grew in Sweden.

The Swedish authors and texts that Schultz does reference are all very recent, being people and works that he was personally acquainted with. Rosén is mentioned frequently, usually in a pragmatic context rather than as an author. Schultz refers to his lectures, to case histories described by him and sometimes to his texts. Two of the other Swedish authors mentioned by Schultz are his fellow students under Rosén and the texts referred to are academic dissertations defended by them in Uppsala. *De variolis praecavendis* was defended by Roland Martin (1726–1788) in 1751, *De Variolis Curandis* by Peter Jonas Bergius (1730–1790) in 1754.²⁵ The fourth Swedish text included in Schultz's book is Linnaeus's *Species Plantarum* (1753). It must be noted that while the amount of Swedish literature in the references is low, Swedish medical professionals are very often mentioned in terms of personal encounters and discussions.

Surgeons and clergymen in Schultz's references

Surgeons are frequently referred to, and no particular distinction is made between them and physicians. While the distinction, and often rivalry, between physicians and surgeons was commonplace in eighteenth-century Europe, Schultz seems to have considered surgeons and their writings no less important than those of physicians. As a surgeon's son, Schultz may have possessed a less confrontational perspective than some of his colleagues. More importantly, inoculation was by definition a practice in which surgeons had a vital role. They carried out inoculations alongside physicians, and, as is proven by Schultz's references, wrote on the matter extensively. The discussions referenced by Schultz also show that physicians and surgeons exchanged opinions, experiences and

²⁴ See for example Porter, Roy, *Disease, medicine and society in England, 1550–1860*. Second edition. Cambridge University Press, Cambridge 1995. p. 27.

²⁵ For more information on these dissertations, see Örneholm, 2003.

case histories similarly as physicians did amongst themselves. Thus, while inoculation seems to have been a field that provoked debates between the two groups, it also caused physicians and surgeons to see each other as co-operators, if not even colleagues, and to work together towards a shared aspiration. Of course, it may have been that physicians relied on surgeons reluctantly. The participation of surgeons may have been seen as not ideal but necessary, since the number of physicians was not sufficient to carry out extensive inoculations. The discussions and exchanges mirrored in *An Account of Inoculation*, however, suggest a much warmer form of co-operation, in which genuine collegial respect was present.

The role of the clergy in the discussions on inoculation is much more ambivalent. As mentioned before, much of the most passionate opposition to the practice was expressed on religious grounds, usually by clergymen. Schultz gives various examples of this, but at the same time he relies heavily on the authority of other clergymen in his attempt to present inoculation as religiously acceptable, even favourable.²⁶ This was crucial, as popular opposition against inoculation was often religiously motivated; physicians simply could not take the risk of appearing indifferent to religious sentiments. While Schultz usually simply sides with the views of inoculation-friendly clergymen when in his comments on religious opposition, he does also make three direct references to the Bible, viz. to the Book of Proverbs, the Gospel of Luke, and the Epistle to the Romans. He makes these references in order to show that the Bible can be interpreted as encouraging people to cure others actively and to prevent misfortune, instead of passively accepting anything, good or evil, that God might choose to send upon them.²⁷

Conclusions

An Account of Inoculation references a wide collection of British works on the same topic, which is hardly surprising considering that Schultz likely intended his book to be not only an informative manual, but also a testimony of what he had learned, observed and, indeed, read, during his time in London. The geographical and temporal distribution of the texts and authors that Schultz refers to points heavily to British texts, as well as to those written in either the 1720s or the 1750s, both of which were times of heated debates around smallpox inoculation. Nearly half of all identified

²⁶ Schultz, 1758. p. 103 and elsewhere.

²⁷ *Ibidem*. p. 105–106.

references are to British authors; similarly, nearly half of the texts referenced were published during the aforementioned two decades.

In his comments on these debates and on those who opposed the practice, Schultz follows the opinions of his British colleagues, often directly citing them. He uses different argumentative tactics against different "enemies of Inoculation", dedicating more space and effort to counter the claims that he considers to be more persuasive. These claims were typically expressed by other medical professionals and thus particularly disadvantageous to the practice of inoculation.

An Account of Inoculation likely served several purposes. The Swedish original acted both as a handbook for Swedish inoculators and as a report of the success of Schultz's journey. The English translation, on the other hand, served as a proof of Schultz's diligence and learning as an observant visitor and reader to his British hosts and colleagues. The translation may also have been intended to help to gain further recognition for other Swedish medical writings, especially those of Nils Rosén.

After the publication of Schultz's account, as well as Rosén's famous book on paediatrics,²⁸ inoculation was slowly adopted in Sweden.²⁹ However, the demographic results of inoculation efforts are generally considered to have been modest, due to a lack of personnel as well as popular opposition to inoculations.

Until his death in 1823, David Schultz divided his time between the medical profession, administrative and societal duties and scientific interests. He served as the head physician of the Inoculation House in Stockholm between 1765 and 1778, after which he occupied a number of positions, including that of the intendent of the General Maternity Hospital in Stockholm and that of an archiater.³⁰ During the early nineteenth century, he was able to witness the successes of Jennerian vaccination in Sweden.

Viitteet, vaikutteet ja näkemykset inokulaatiota käsittelevistä kiistoista David Schultzin teoksessa *An Account of Inoculation*

²⁸ Rosén, Nils, *Underrättelser om Barn-Sjukdomar Och deras Bote-Medel*. Lars Salvius, Stockholm, 1764.

²⁹ Örnehlm 2003, p. 139.

³⁰ Åman, Anders.

Tiivistelmä

Nuori ruotsalaislääkäri David Schultz (1732–1823, aateloituna Schultz von Schulzenheim) lähetettiin vuonna 1754 Lontooseen tutustumaan rokonistutukseen sekä käytännön työtä seuraamalla että aihetta käsittelevän kirjallisuuden kautta. Matkan taustalla olivat professorit Nils Rosén (1706–1773, aateloituna Rosén von Rosenstein) ja arkkiatri Abraham Bäck (1713–1795). Rahoitus matkalle saatiin Terveyskomissiolta (*Sundhetskommisionen*). Tarkoituksena oli hankkia Ruotsiin riittävästi osaamista, jotta rokonistutukset voitaisiin aloittaa; säännölliset isorokkoepidemioiden olivat merkittävä syy korkeaan lapsikuolleisuuteen. Taulustolaitoksen vuonna 1749 tapahtuneen perustamisen ja ensimmäisten kattavien väestötilastojen laatimisen myötä erityisesti lapsikuolleisuus oli noussut suureksi huolenaiheeksi, ja sen vähentämiseksi oltiin valmiita käyttämään taloudellisia resursseja.

Schultz vietti Lontoossa vuoden, jonka aikana hän seurasi paikallisten kollegoidensa työskentelyä isorokkotilaiden ja inokuloitavien parissa ja perehtyi inokulatiota käsitteleviin teksteihin ja keskusteluihin. Pian matkan jälkeen, vuonna 1756, ilmestyi teos *Berättelse om Koppors Ympande*, jossa Schultz pyrki sekä antamaan tarkkoja käytännön ohjeita rokonistutuksen suorittamiseen että neuvomaan, kuinka tulisi toimia inokulaation vastustajia kohdatessa. Teos on varustettu runsailla kirjallisuusviitteillä, joista valtaosa on brittiläisiä. Ajallisesti suurin osa teksteistä sijoittuu 1720-luvulle ja 1750-luvun alkuun, kahteen vuosikymmeneen, joina inokulatiota koskeva keskustelu oli Iso-Britanniassa erityisen voimakasta.

Schultzin teoksella ja sen vuonna 1758 ilmestyneellä käännöksellä *An Account of Inoculation* oli useita tehtäviä, jotka vaikuttivat siihen, miten teksti on rakennettu ja mitä siihen on sisällytetty. Näistä ilmeisin oli toimiminen käsikirjana ruotsalaisille lääkäreille ja muille inokulatioita suorittaville. Tämän lisäksi teoksen tehtävänä oli todennäköisesti myös osoittaa oppimatkan tukijoille ja rahoittajille, että Schultz oli onnistunut tavoitteessaan; teos toimi siis raporttina hänen työstään Englannissa. Lisäksi englanninkielinen käännös lienee toiminut vastaavanlaisena raporttina Schultzin brittiläisille kollegoille, jotka olivat antaneet hänelle mahdollisuuden seurata työtään. Käännöksellä on voitu myös tavoitella laajempaa yleisöä ja tunnettuutta siinä mainituille ruotsalaisille teksteille, erityisesti Rosénin töille.

Tämä artikkeli käsittelee Schultzin teoksen viitekirjallisuutta ja tämän maantieteellistä ja ajallista jakaantumista sekä brittiläisten vaikutteiden merkittävyyttä ja Schultzin suhtautumista inokulatiota

käsitlevään keskusteluun. Artikkeleihin on liitetty lista kaikista niistä teoksista ja kirjoittajista, jotka on tätä artikkelia kirjoitettaessa pystytty identifioimaan Schultzin tekstistä.

Key words: smallpox, inoculation, eighteenth century, David Schultz, England

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