

## 19<sup>TH</sup> CENTURY CHOLERA EPIDEMICS IN THE BISTRIȚA REGINO

Florea Elena TRIȘCAȘ<sup>1</sup>

---

### ABSTRACT:

*THE NINETEENTH CENTURY BROUGHT TO THE POPULATION OF TRANYLAVANIA A NEW EPIDEMIC OF MEDIEVAL TYPE, COMING FROM THE EAST, CALLED CHOLERA THAT FLAGELLATED PEOPLE AND CREATED PANIC IN ALL SOCIAL ENVIRONMENTS. THE BISTRIȚA REGION WAS AFFECTED BY ALL FOUR EPISODES OF CHOLERA AND HAD A HIGH MORTALITY RATE. THIS PAPER TRIES TO PRESENT SOME OF THE MEASURES IMPOSED LOCALLY TO STOP THE SPREAD OF THE DISEASE AND THE POPULATION'S ATTITUDE TOWARD DEATH. ARCHIVAL DOCUMENTS AND REPORTS OF A LOCAL DOCTOR SHOW THE PICTURE OF OVERWHELMED AUTHORITIES. ALTHOUGH CHOLERA COULD NOT BE CONTROLLED BY THE AUTHORITIES IN THE TRANSYLVANIAN SPACE, FOLLOWING THE STRUGGLE MORE MEDICAL PERSONNEL WAS FORMED AND SEVERAL WORKS ABOUT HYGIENE AND MEDICINE WERE WRITTEN.*

---

**KEY WORDS:** CHOLERA, LAUS, QUARANTINE, PRIESTS, HYGIENE

“All the people of the Earth concerned themselves with alarming writings, when this terrible scourge of humanity occurred.”(Simeon Stoica)

### INTRODUCTION

Over time one of man's most significant enemy was the infectious transmitted disease, which overtook the population, becoming the main cause of general mortality. The

---

<sup>1</sup> PhD Student, „Babeș-Bolyai” University, History and Philosophy Department, Doctorate school: History, Civilization, Culture. E-mail: [elena\\_tricas@yahoo.com](mailto:elena_tricas@yahoo.com)

This work was possible with the financial support of the Sectoral Operational Programme for Human Resources Development 2007-2013, co-financed by the European Social Fund, under the project number POSDRU/107/1.5/S/76841 with the title „Modern Doctoral Studies: Internationalization and Interdisciplinarity”.

epidemics created world-wide panic, stopped the economical growth of society, decimated entire populations and could crucially influence the faith of a war. Until the 18<sup>th</sup> century the plague was Europe's main character, but with the birth of the militarized border cordon and permanent quarantines of the Habsburg Empire, the black death vanished from the West and center of the continent, and haunted the East just for a little while longer. Smallpox was another noteworthy epidemic for the Europeans but medicine's scientific debut tried to stop it in its tracks with the help of the discovery of the vaccine and the mass vaccination campaigns started in the last years of the 18<sup>th</sup> century. Thus, the 19<sup>th</sup> century should have brought peace and serenity in the collective health plan, together with a much desired economical expansion, except a new rapidly spreading illness reared its head, also coming from the East, called cholera.

Cholera shortly received the title of the most threatening epidemic of the 19<sup>th</sup> century, "due to the disease's unforeseeable diffusion, the dramatic course of the afflictions, the weak prevention and eradication methods and the sheer horror spread amongst the entire planet's population." In the collective outlook cholera replaced the plague, once the terror of the *Old World*.<sup>2</sup>

*Cholera asiatica*, so-named by specialists because of its debut place, is an acutely infectious disease caused by the *choleric virion*, characterized through a brutal debut of diarrhea, followed by cramps, a decrease in the temperature of the body, the voice dies down, anuria, that finally leads to severe dehydration when the person enters a state of collapse and more often than not dies due to asphyxia<sup>3</sup>. The infected individual is the source of the disease, which is transmitted orally through water, food, dirty hands, objects, human contact<sup>4</sup>. Poor hygiene, undeveloped sanitation, unsatisfactory nutrition, high density of people, population movements and high humidity were the facilitating factors for the expansion of the epidemic.

Cholera was present in Asia since the dawn of time; researchers believe the disease took its toll in Western India since Alexander the Great, but not until the 19<sup>th</sup> century could it migrate in nearby regions. The significant raise in individual and collective peregrination

---

<sup>2</sup> Gherghe Brătescu and Paul Cernovodeanu, *Biciul holerei pe pământ românesc. O calamitate a vremurilor moderne* (București: Academiei Române, 2002), 5.

<sup>3</sup> Vasile Tudor and Ioan Istrati, *Variola. Holera* (București: Militară, 1970), 13.

<sup>4</sup> Constantin Berca, Vincent Babeș and Cornel Soare, *Fața nevăzută a lui Marte* (București: Militară, 1991), 174.

on large distances in shorter periods of time and the transformation of the virus thanks to a mutation that made it worse caused the first cholera pandemic, which started in 1817<sup>5</sup>.

The first cholera pandemic in Transylvania was recorded in 1831; spread out in the Romanian areas from Russia, over the Prut, returning in 1848/49, 1866 and 1872/73<sup>6</sup>. Austrian and Hungarian officials tried to take measures in order to control the spread of the illness, even since the first rumors of its existence occurred near the Empire's border, but cholera was still an unknown and it was a hard opponent. The *choleric virion*, responsible for the development of the disease, was discovered by Koch only in 1881, when the anti-cholera vaccine was created; until this date the measures taken against the spread of the disease were the same as those against the plague. With the help of this paper I wish to emphasize the measures taken in the Bistrița region, located in the eastern part of the border with Moldavia, a much sought after barrier confronting oriental diseases. The analysis is based on a series of archive documents and the written testimonies of a local physician, published near the turn of the century being discussed. The pages that follow do not claim to exhaust the topic but to highlight some of the local particularities and the impact this disease had on every layer of society.

The Bistrița region was represented by the *Saxon district of Bistrița* and the *Militarized district of Rodna* based in Năsăud. The two administrative organizations had their own sanitation services, in accordance with the laws of the *Sanitation reform*. The 2<sup>nd</sup> Romanian border regiment, based in Năsăud and formed in 1762, was in charge with the protection not only of the region but of Transylvania as a whole, against the epidemics found outside the border. The permanent quarantine cordon situated on the border was initially designed to stop plague epidemics, where *quarantine points* were doubled by a chain of surveillance pickets occupied with Romanian border guards<sup>7</sup>. People passing the frontier were required to proceed through the quarantine points, otherwise facing harsh punishments or even death. When there were reported cases of the highly infectious disease in Moldavia, near the border, the *phisyc* of Bistrița had to collaborate with the cordon's quarantine supervisor and also with the regiment's chief-physician in order to

---

<sup>5</sup> Brătescu and Cernovodeanu, *Biciul holerei*, 14-16.

<sup>6</sup> Simion Retegan, "Un flagel de tip medieval în Transilvania: epidemia de holeră din 1866", în *Sabin Manuilă- Istorie și demografie*, ed. Sorina Bolovan și Ioan Bolovan (Cluj-Napoca: Fundația culturală română, 1995), 200.

<sup>7</sup> Mircea Gelu Buta and Magda Pupeză, "Aspecte ale asistenței medico-sanitare, din ținutul Năsăudului în timpul regimentului de graniță (1762-1851)", *File de Istorie* 3 (1974): 147-151.

correctly prevent the local contamination<sup>8</sup>. Yet, the region's sanitation personnel was significantly lower than the population it was supposed to survey, there were no medics in rural areas and cholera was a "paradoxical disease"<sup>9</sup>, causing all preventive methods to stop short.

## MAIN TEXT

### *The 1831 cholera episode and the 1836 comeback*

In 1830, the spread of cholera from Russia towards west with the possibility of rearing its ugly head in the Romanian principalities and in Galicia alerted the Viennese government and sanitation departments, as well as the provincial medical boards. Several sanitary formal letters and injunctions were issued in order to draw the attention of the Transylvanian medical, civil and military departments upon the immediate danger<sup>10</sup>. The printings presented the illness together with its symptoms and prevention methods, which were supposed to be imposed if there would be any chance of success.

As a first preventive method, the border control was hardened: in 1827, the border with Moldavia was guarded by 193 people and in 1830 the cordon service was firstly increased to 307 people, then to 512 people.<sup>11</sup> Count *Ignaz von Hardegg*, the Transylvanian imperial commander, established 20 days quarantine for travelers and goods and subsequently the border with Bucovina, Moldavia and Wallachia was closed.<sup>12</sup> In June 1831 there was an outbreak of cholera in Transylvania; in July, the Sanitation committee gathered in Cluj and issued formal letters containing anti-cholera instructions towards all military personnel stationed on the border. The letters were supposed to raise awareness upon the severity of the situation and requested, among other things, the amplification of the border control (3<sup>rd</sup> grade cordon) and the death penalty for those who refused to pass through quarantine.<sup>13</sup> The sanitation personnel of the militarized district of Rodna received a German document (11 pages) divided in four chapters, containing all relevant aspects about *cholera morbus*: how it should be prevented, how to isolate the illness stricken

---

<sup>8</sup> Arhivele Naționale – filiala Cluj-Napoca, Fond: *Primăria orașul Bistrița*, Subgrupa II a, f. 71.

<sup>9</sup> Félix d'Herelle, *L' étude d' une maladie- Le choléra* (Lausanne: F. Rouge & Cie, S.A, 1946) , 7.

<sup>10</sup> Samuil Izsák, "Îndreptarul românesc pentru paza împotriva holerei destinat personalului carantinelor din Transilvania și *Planum Institutii Contumacialis* (1831), în *Din istoria luptei antiepidemice în România*. Studii și note, ed. Gheorghe Brătescu (București: Medicală, 1972), 281.

<sup>11</sup> Gustav Ritter Amon von Treuenfest, *Geschichte des K. K. Infanteries-Regimentes nr. 50...1762 bis 1850 Zweites Siebenbürger Romanen-Grenz-Infanterie-Regiment nr.17* ( Wien: Das Regiment, 1882), 180-182.

<sup>12</sup> Brătescu și Cernovodeanu, *Biciul holerei*, 84.

<sup>13</sup> Arhivele Naționale - filiala Bistrița, fond: *Regimentul II românesc de la graniță nr. 17*, Pachet II, Dosar 30, fila 1-9. (se va nota: ABN, Dosar- D., Registru- R., Fila- f.)

population from the healthy one and remedies for the first signs of the disease.<sup>14</sup> Local priests also participated in the fight against cholera by dispersing all general injunctions and information about the disease to the general population. At the beginning of 1831, printings were given to bishops by the Transylvanian Government, which had to be read during mass and on holidays. The population was banned from entering contaminated areas (Moldavia) until the epidemic was eradicated or if they did, to pass through quarantine points.<sup>15</sup> On the 6<sup>th</sup> of August 1831 a decree regulating the arrival and distribution (in case there were no physicians) of necessary medicines in Transylvania was issued.<sup>16</sup> The Sanitation committee also offered clear instructions as to how the dead should be buried during epidemics. The deceased had to be buried in maximum 24 hours, without a procession, to be put in a closed coffin, in cemeteries moved outside of towns. People were encouraged by priests to renounce the so-called kiss of the deceased custom and to no longer go to alms. Crowds had to be avoided, thus fairs ceased to exist and all schools were closed.<sup>17</sup> Lucid indications were offered regarding the right alimentation needed in the battle against the disease, balanced diets (religious fasting was absolved). The custom of digging up the dead, born out of superstition, was reproved by medics and authorities. If a group of people decided to take part in such a custom, they would change the position of the deceased to face down, believing they will succeed in saving the community from the epidemic; if they were accompanied by a priest, the latter would no longer be a cleric.<sup>18</sup> The symptoms of cholera, such as “headaches, bellows aches, body strains”<sup>19</sup>, were uttered in church and everyone presenting these symptoms had to visit a physician because “this cholera disease” was considered to be “more harmful than the plague”. If there were no medics, local authorities would have to announce nearby sanitation workers and the patient had to be isolated from the community.

In spite of all the measures taken, the Saxon district of Bistrița was affected by the epidemic.<sup>20</sup> The sick were isolated in the hospital-asylum and in the *lazar house* which was opened especially during epidemics, located outside of town, more precisely “over

---

<sup>14</sup> ANB, fond: *Regimentul II românesc de la graniță nr. 17*, Pachet II, D. 30, f. 2-6.

<sup>15</sup> ANB, fond: *Oficiul parohial ortodox român Susenii Bârgăului*, R.11, f. 51 verso.

<sup>16</sup> ANB, fond: *Oficiul parohial ortodox român Susenii Bârgăului*, R. 11, f. 55.

<sup>17</sup> ANB, fond: *Oficiul parohial ortodox român Susenii Bârgăului*, R. 11, f. 55.

<sup>18</sup> ANB, fond: *Oficiul parohial ortodox român Susenii Bârgăului*, R. 11, f. 55.

<sup>19</sup> ANB, fond: *Oficiul parohial ortodox român Susenii Bârgăului*, R. 11, f. 53 verso.

<sup>20</sup> Teodor Ghițan, “Istoricul spitalelor bistrițene în perioada burgheză (1848/49-1918)”, *Clujul Medical* 2 (1972): 604.

Budacului hill” and “under Codrișorului forest.”<sup>21</sup> The lack of proper hygiene and most of the population’s rather modest existence are probably the main causes for the epidemic’s outbreak, but the fact that it was a total unknown is important as well. The difference between cholera and the plague is that the first, besides direct transmission (contact with a carrier), can also be transmitted through water (consumption of contaminated water) because the cholera virus retains its vitality for longer periods of time in a liquid environment.<sup>22</sup>

The Bistrița fortress was supplied with water from the Bistrița River and the Mill Channel through a system of ditches, dug on the main streets and lined with rock or wooden poles starting with the 15<sup>th</sup> century. The water from the ditches could only be used for washing, watering, animals, extinguishing fires and for craft purposes. Despite all the restrictions, the ditches that carried the river water were also used for the evacuation of domestic water (coming from stables). Fresh water wells were scarce because the terrain was swampy and the water accumulation in a new well was of a poor quality. In the 16<sup>th</sup> century, the town’s physician together with local officials collected a spring from Roses(Rozelor) hill and brought it into the city through wooden pipes made out of oak (the holes had 50 mm in diameter). The pipes were brought all the way to the Central Square where a “torrent with two or three discharge vents for the filling of buckets” was built. These pipes deteriorated with time and were abandoned; their rehabilitation was started only in 1850.<sup>23</sup> Cholera had the greatest environment to spread its tentacles because drinking water was practically inexistent and the town’s running water was infested. Rural areas did not have a silver lining either: any and every running water source was filled with refuse, the locals washed their dirty clothes, and sheets stained with the faces of the sick, animal skins and eve the bodies of the deceased. It couldn’t be clearer why prevention methods failed. Cholera broke the normal epidemic mold and set off in a 50%<sup>24</sup> death toll. Hence the first cholera epidemic in Transylvania lasted from the 21<sup>st</sup> of July 1831 until the 13<sup>th</sup> of January 1832 and affected the lives of 3629 souls, of which 1436 died.<sup>25</sup> The

---

<sup>21</sup> Teodor Ghițan, “Istoricul spitalelor din Bistrița. Spitale, azile de bătrâni și lazarete în Bistrița medievală (1291-1848/49)” Clujul Medical 1 (1972): 204.

<sup>22</sup> Ofelia Mora, “Considerații asupra epidemiei de holeră din 1873 în Transilvania” , Buletinul cercurilor științifice studențești, arheologie-istorie, 3 (1997): 109.

<sup>23</sup> Adrian Tivadar, Contribuții la istoria alimentării cu apă a orașului Bistrița (Târgu Mureș: Tipomur, 1995), 17-23.

<sup>24</sup> Tudor and Istrati, Variola. Holera, 88.

<sup>25</sup> Iosif Pervain, Ana Ciurdariu and Aurel Sasu, Români în periodicele germane din Transilvania. 1778-1840. Bibliografie (București: Științifică și Enciclopedică,1977), 138.

imperial officials wanted to stop the spread of cholera from Transylvania towards west, but they were unlucky and shortly after all of Western Europe, Iberian and Italic Peninsulas were confronted with the disastrous infection. The Transylvanian population, frightened by the first wave of epidemic, was not prepared for the second one that came back (via Austria and Hungary) in 1835.<sup>26</sup>

The return of cholera in the Militarized district of Rodna was detected in June 1936. Local officials issued for Năsăud new instructions and “requirements in 8 points” for the prevention and treatment of the disease.<sup>27</sup> Priests now had to specify that the illness was “neither sticky, nor dangerous for those who took good care of themselves”<sup>28</sup> and had to teach the population how to prevent the affliction and how to treat themselves until the physician’s visit. The medicine was seen as a gift from God, and man had to take it even if it lacked good flavor (“they shouldn’t reject remedies”), otherwise those who refused to treat themselves, and as a result died, “were killers of the self and lost Heaven.” The new approach was not meant to scare people and create panic. Scared communities more often than not ran to isolated areas, where the danger of contamination was higher. Good hygiene and a balanced diet without “reckless eating and drinking” were the new specifications. People had to keep away from colds, not drink cold water whilst having a high bodily temperature, to change their clothes if they were wet, to not eat unripe fruit and to let go of fear, because fear supposedly was a catalyst.<sup>29</sup>

After the 1831 episode many physicians believed that cholera wasn’t contagious, basing their theory on the fact that no one from the sanitation personnel who closely worked with patients contracted the disease during the first epidemic, and there were few cases of infected surgeons. Later, it was proved that the possibility for infected individuals with the cholera bacteria to develop atypical forms of the disease existed; just because it manifested itself by a simple indigestion for some lucky carriers did not mean it couldn’t wreak havoc. Furthermore, healthy carriers played a role in spreading the cholera.<sup>30</sup> In these conditions, perhaps many sanitation workers, apparently unaffected by the illness, were the hotbed of infection in a community.

<sup>26</sup> Brătescu and Cernovodeanu, *Biciul holerei*, 105.

<sup>27</sup> Ștefan Buzilă, “Documente bisericesti”, *Arhiva Someșană*, 17 (1933): 245.

<sup>28</sup> ANB, fond: *Oficiul parohial ortodox român Susenii Bârgăului*, Reg. 11, f. 67 verso.

<sup>29</sup> ANB, fond: *Oficiul parohial ortodox român Susenii Bârgăului*, Reg. 11, f. 66 verso- 67.

<sup>30</sup> Tudor and Istrati, *Variola. Holera*, 198.

In the Bistrița region, many localities that formed the border regiment were affected by the epidemic, even if isolation measures were taken at the first signs of related cases. At a closer inspection of the civil registries, I observed a high mortality rate due to cholera (in 1836) in places as Năsăud, Rebra, Gledin, Șieut, Mijloceni Bârgăului, Bistrița Bârgăului and others.<sup>31</sup> The fear of death is what sometimes drove people to pagan rituals, notwithstanding the authority's wishes. Customs such as the "plague's shirt" were used by the locals during the plague epidemics, and after its eradication they were transformed in the "cholera shirt." In September 1836 in the Năsăud area, people moved along the locality, carrying a special woven shirt, which was left behind between the boundaries as an anti-cholera totem. The shirt was woven on a certain day or night out of hemp by nine elderly women and it was stuffed with hay. The representation of the cholera in the collective mentality was at times as an ugly "old woman", who according to some who have claimed to see her, after being offered drinking water saved the community from extinction. During the epidemic women held certain days sacred, like Friday, believing that a precise day "is holier and stronger than another" and could protect against disease. The passing of animals through different holes in the ground and of men through fire (made out of two dried sticks) were also performed.<sup>32</sup> Priests tried to convince people to give up these superstitious practices and to listen to medical advice: to stay in a warmed bed (with the help of heated bricks) and drink hot "spearmint and azima" tea, to warm up their body with thick clothing, having their "bellows and limbs" rubbed and wait for the doctor's arrival.<sup>33</sup> However old habits and superstitions were hard to get rid of to say the least and a frightened man would call upon all "solutions at the same time"; he would pray whilst at the same time vociferate spells, he went to the medic but also ingested empirical remedies.

The return of cholera in 1836 proved it was stronger and atypical according to the physicians that lived through the event, considering that high altitude areas, without swampy terrain similar to the Militarized district of Rodna, were also affected. After the last case of death due to cholera until the next episode, the population was given a small interlude.

---

<sup>31</sup> ANB, fond: *Colecția registrelor de stare civilă 1682-1967*, nr: 780, 1204, 686.

<sup>32</sup> Buzilă, *Documente bisericești*, 245-246.

<sup>33</sup> ANB, fond: *Oficiul parohial ortodox român Susenii Bârgăului*, Reg. 11, f. 67.



### *The known cholera disease*

The second period in which cholera was the main character was during the 1848/49 time frame. The sickness debuted alongside social upheavals born out of the Viennese and Pesta revolutions started on the 13<sup>th</sup> – 15<sup>th</sup> of March; the Hungarian provincial population wanted the annexation of Transylvania to Hungary and also to separate themselves from the Empire, and the Romanian population (the majority of the population) desired their assertion as a free nation, refusing to be embedded in an independent Hungarian state. Amidst all these problems, rumors concerning another outbreak of cholera in the Romanian Principalities started to surface, causing further unrest. On the 20<sup>th</sup> of May, the Pesta *Agricultural, Industry and Commerce Department* addressed the Transylvanian counties a series of circulars which drew attention upon the necessary measures needed against the malady.<sup>34</sup> After the first cases of cholera in southern Transylvania, orthodox priests from Bistrița received a notice issued as a result of a consistorial meeting, informing them of the *Gubernial Decree* (July) and their duties<sup>35</sup> towards the faithful. Among others, the decree requested that the ringing of bells be normal in the case of deaths due to cholera, if they weren't numerous. If their number rose significantly they had to ring the bells only once a day, at an hour convenient for everybody, to avoid scaring the population.<sup>36</sup> The number of deaths was lower than that registered in 1836, to the extent of tens. The most frequent victims were mature adults and the least affected were children, who died anyway due to measles and convulsive cough.<sup>37</sup> The explanation given by doctors for the high mortality rate in this category stated that the different stomach and intestine afflictions created a fertile ground for cholera. Places like Ilva Mare registered over 50 deaths related to the illness plus those who did not withstand the effects of chills and prolonged suffering.<sup>38</sup> Next summer, cholera took over Transylvania again<sup>39</sup>, helped by drought and high temperatures. Typhoid and hectic fever, tuberculosis, measles and chickenpox (in kids) completed the epidemic menu.<sup>40</sup> This epidemic probably covered more track because of the troops involved in the revolutionary events and civil war. Troops

<sup>34</sup> Brătescu and Cernovodeanu, *Biciul holerei*, 172-1174.

<sup>35</sup> Priests had to explain the prophylactic pieces of advice, issued by the Sanitation committee, to the population and to guide them towards a balanced lifestyle and a methodical sick care.

<sup>36</sup> ANB, fond: *Protopopiatul ortodox român al Bistriței (1789-1953)*, D. 235, f. 1, an 1848.

<sup>37</sup> ANB, fond: *Colecția registrelor de stare civilă 1682-1967*, nr: 489-494, 686-687.

<sup>38</sup> ANB, fond: *Colecția registrelor de stare civilă 1682-1967*, nr. 533.

<sup>39</sup> ANB, fond: *Colecția registrelor de stare civilă 1682-1967*, nr.1053.

<sup>40</sup> ANB, fond: *Colecția registrelor de stare civilă 1682-1967*, nr:1053, 685, 1204.

from the 2<sup>nd</sup> Romanian border regiment participated in fights all over northern Transylvania, causing turbulence and facilitating the spread of contagious diseases; local contaminated communities could no longer be isolated and properly supervised by the sanitation personnel because of this fact. Despite grim prognostics, the second wave of cholera was less troublesome than that of 1831.

In 1851, precipitated by revolutionary actions, the 2<sup>nd</sup> border regiment was dissolved and with it the military sanitation department, but ten years further down the line the first Romanian sanitation service was born in the *Romanian district of Năsăud*. Ștefan Pop Păcurariu, a Viennese taught physician, was put in charge of the sanitation service alongside four other chief surgeons<sup>41</sup>, who controlled one or two sectors.<sup>42</sup> The new sanitation service was involved in the fight against cholera, together with the Saxon district service, two more times but also faced venereal diseases disseminated after the 1848 events.

In 1866 the cholera epidemic only affected the Năsăud district. The microbe made its way via Bucovina, through the Câmpulung commercial route, even though contemporaries maintained that all preventive measures were taken, and spread to the Solnocul Interior county. During the three months of cholera, 10 localities were hit hard, 152 died (73 in Năsăud) out of 654 persons who fell ill.<sup>43</sup> The new sanitation service had to face the epidemic despite having few personnel and the superstitious ruled population did not help matters. The case of Nușfălău County corroborated cholera's randomness: in just two days, 22 cases of infection arose resulting in 7 deaths, after which the source died out. After this wave, cholera overwhelmed the region only once more in the 19<sup>th</sup> century.

The last choleric episode was recorded in 1873 when the scourge covered the entire Bistrița region in just three months, time. The marital status registry held by the Roman-Catholic parish (from the Bistrița region) chronicled 28 deaths due to cholera from July to October and 4 deaths due to typhoid fever.<sup>44</sup> Cholera caused the death of 80 more lives in the town and surrounding areas and, moreover, exhausted the land allocated to the different

---

<sup>41</sup> Nicolae Tenereanu, at Năsăudului și a Zagrei sector; Liviu Mureșan, chief-surgeon at Sângeorz și Bârgău; Simeon Stoica at Rodna; Petre Neagoe chief at the Șieu sector (headquarters in Monor).

<sup>42</sup> Teodor Ghițan and Onisim Filipoiu, "Organizarea sanitară a districtului autonom românesc al Năsăudului între anii 1861-1876", în *Momente din trecutul medicinei. Studii note și documente*, ed. Gheorghe Brătescu, (București: Medicală, 1982) p.411.

<sup>43</sup> Retegan, *Un flagel de tip medieval*, 205.

<sup>44</sup> ANB, fond: *Colecția registrelor de stare civilă 1682-1967*, nr. 114.

confessional cemeteries (Greek-Catholic, Evangelical-Lutheran and Roman-Catholic).<sup>45</sup> Although during an epidemic cemeteries were moved outside of towns, the rich refused to bury their dead alongside the poor so they received special pardons to bury them in the church's cemeteries, which could increase the spread of the disease. In the Năsăud district cholera hit throughout the warm season, leaving the sanitation service to battle it out for three months (during which time the Năsăud gymnasium was closed). The surgeon Simeon Stoica ascribed the proliferation of the illness to the “extravagant, decomposed food, the weak and hard consuming; poor quality water, bad alcoholic drinks, as well as exposure to cold.” In the *Acute and infectious diseases dissertation*, he complains about the bad habits of poor people, who wouldn't renounce the kissing of the dead custom, the large burial and wake gatherings, and the sleeping on a cold and damp ground. He also describes the inappropriate lodgings of the locals as being: low, damp, tight, unventilated, dirty and “filled with people so much so that every time I wanted to reach those in agony, I had to request for ventilation.”<sup>46</sup> The physician observed that women presented a higher mortality rate, probably because they had weaker organisms and more stomach afflictions; additionally, the poor were the perfect victims due to their precarious hygiene and nutrition, governed by superstition and empirical practices.

At the end of this epidemic which ended the lives of over 400 people in the whole region, local physicians were praised for their effort in the press and Alexandru Bohățiel, the supreme captain of the Năsăud Romanian district, and Ștefan Pop Păcurariu, the district's physician, were awarded the “golden medal for outstanding medical and humanitarian merits.”<sup>47</sup>

## CONCLUSION

Cholera took the plague's place in the collective mentality. The first epidemic lasted “from 1817 until 1883 when man was subdued by cholera” and the second from “1884 when man overpowered” the illness.<sup>48</sup> The 19<sup>th</sup> century epidemic revealed the role of effective sanitation methods and of good medical care. After the losses caused by the four

---

<sup>45</sup> Iosif Uilăcan, “Cimitirele românești din Bistrița la sfârșitul secolului al XIX-lea” *Revista Bistriței*, XXIV(2010): 367.

<sup>46</sup> Simeon Stoica, *Tratat al bolilor acute și infectătoare* (Sibiu: tiparul lui W. Krafft, 1891), 81.

<sup>47</sup> Iosif Vulcan, *Familia*, 11 din 12/24 martie (1867): 131.

<sup>48</sup> A. Dodin, “Ces dernière quinze années de choléra”, *Médecine et maladies infectieuses*, XVIII (1998): 611.

choleric episodes, the Transylvanian authorities recognized the importance of water networks in large cities, proved by the fact that the infested drinking water directly contributed to the dissemination of the disease in some regions. Likewise, the ignorance of the rural population was a constant battle. In spite of all the measures taken towards a healthier society did not manage to save the people of Bistrița from infectious contaminations like measles, scarlet fever, typhoid fever and tuberculosis; together, all these diseases claimed more victims than cholera, mainly because they were viewed as common afflictions.

## REFERENCES

**Sources:**

1. Arhivele Naționale - filiala Bistrița, fond: *Colecția registrelor de stare civilă 1682-1967*.
2. Arhivele Naționale - filiala Bistrița, fond: *Oficiul parohial ortodox român Susenii Bârgăului*.
3. Arhivele Naționale - filiala Bistrița, fond: *Protopopiatul ortodox român al Bistriței (1789-1953)*.
4. Arhivele Naționale - filiala Bistrița, fond: *Regimentul II românesc de la graniță nr.17*, Pachet II.
5. Arhivele Naționale – filiala Cluj-Napoca, fond: *Primăria orașul Bistrița*, Subgrupa II a.

**Publications:**

1. **Amon von Treuenfest, Gustav, Ritter**. Gheschihte des K. K. Infanteries-Regimentes nr. 50...1762 bis 1850 Zweites Siebenbürger Romanen-Grenz-Infanterie-Regiment nr.17 . Wien: Das Regiment, 1882.
2. **Berca, Constantin; Babeș Vincent; Soare, Cornel**. Fața nevăzută a lui Marte. București: Militară, 1991.
3. **Buta, Mircea, Gelu; Pupeză, Magda**. “Aspecte ale asistenței medico-sanitare, din ținutul Năsăudului în timpul regimentului de graniță (1762-1851).” *File de Istorie* 3 (1974): 147-153.
4. **Brătescu, Gheorghe; Cernovodeanu, Paul**. Biciul holerei pe pământ românesc. O calamitate a vremurilor moderne. București: Academiei Române, 2002.
5. **Buzilă, Ștefan**. “Documente bisericesti.” *Arhiva Someșană* 18 (1936): 398-446.
6. **Ghițan, Teodor**. “Istoricul spitalelor din Bistrița. Spitale, azile de bătrâni și lazarete în Bistrița medievală (1291-1848/49).” *Clujul Medical* 1 (1972): 198-210.
7. **Ghițan, Teodor**. “Istoricul spitalelor bistrițene în perioada burgheză (1848/49-1918).” *Clujul Medical* 2 (1972): 603-614.
8. **Ghițan Teodor; Filipoiu, Onisim**. “Organizarea sanitară a districtului autonom românesc al Năsăudului între anii 1861-1876”, în *Momente din trecutul medicinei. Studii note și documente*, edit by: Gheorghe Brătescu, 411-413. București: Medicală, 1982.
9. **d'Herelle, Félix**. *L` étude d` une maladie- Le choléra*. Lausanne: F. Rouge & Cie, S.A, 1946.
10. **Izsák, Samuil**. “Îndreptarul românesc pentru paza împotriva holerei destinat personalului carantinilor din Transilvania și *Planum Instituti Contumatialis* (1831)” în *Din istoria luptei antiepidemice în România. Studii și note*, edit by: Gheorghe Brătescu, 281-286. București: Medicală, 1972.
11. **Mora, Ofelia**. “Considerații asupra epidemiei de holeră din 1873 în Transilvania”, *Buletinul cercurilor științifice studențești, arheologie-istorie*, 3 (1997): 109-114.
12. **Retegan, Simion**. “Un flagel de tip medieval în Transilvania: epidemia de holeră din 1866”, în *Sabin Manuilă- Istorie și demografie*, edit by: Sorina Bolovan și Ioan Bolovan, 200-206. Cluj-Napoca: Fundația culturală română, 1995.

13. **Pervain, Iosif; Ciurdariu, Ana; Sasu, Aurel.** Români în periodicele germane din Transilvania. 1778-1840. Bibliografie. București: Științifică și Enciclopedică, 1977.
14. **Stoica, Simeon.** Tratat al bolilor acute și infectatoare. Sibiu: tiparul lui W. Krafft, 1891.
15. **Tivadar, Adrian.** Contribuții la istoria alimentării cu apă a orașului Bistrița. Târgu Mureș: Tipomur, 1995.
16. **Tudor Vasile; Istrati, Ioan.** Variola. Holera. București: Militară, 1970.
17. **Uilăcan, Iosif.** "Cimitirele românești din Bistrița la sfârșitul secolului al XIX-lea" Revista Bistriței, XXIV( 2010): 367-383.
18. **Vulcan, Iosif,** Familia. 11 din 12/24 martie (1867).