Drugs, Health, Bodies and Souls in the Tropics; Medical Experiments in Sixteenth-century Portuguese India

Gaspar Correa's vivid and frightening description of the cholera epidemic which swept the city of Goa during the monsoon period of 1543 is probably the first recorded, accurate and almost "clinical" observation of this illness with no other but a local name - *moryxy*. Domestic animals and men and women of all ages from toddlers to old men of eighty, died with horrible stomach pains, twisting their shivering limbs as their nails turned progressively black, only to die within twenty-four hours. The survival rate was barely ten out of a hundred sick and up to twenty people were buried daily in the city of Goa. Unprepared to deal with a public catastrophe of such dimensions, the Governor, Dom Martim Afonso de Sousa, banned the use of church bells for each and every burial in order to calm the panic among the distressed citizens.

"And since the illness was so terrifying when a man died of this illness of morexy in the hospital, the Governor ordered all doctors (*mestres*) to assemble and he ordered to open him [his body] and in all the body inside they did not find anything wrong, except for the shrunken stomach, as small as the hen's gizzard, and wrinkled as leather put on fire. What the doctors said about it was that the ill effects of this disease attacked the stomach and shrunk it with immediate mortal consequences."1

More than idle curiosity or "scientific" impulse, urgent public health concerns were at the heart the Governor's decision to order the *post mortem* dissection. Most of the doctors and officials present at this exemplary anatomical lesson must have felt excitement at the possibility of reading the human body from the inside. At least some of them must have also felt that what they saw with their own eyes were the clear signs of some fateful demonic action. At the back of every Christian mind, illness was associated with sin, and the Torrid Zone of India was reputed to abound in both. In Correa's own words, the duration of the illness was "an inferno" and the signature inscribed inside the body was that of fire.

The tropical climate which the Portuguese encountered in India was held responsible for these and similar epidemic outbreaks since, according to the unchallenged Galenic humoral theory, the disease was caused by an imbalance in the four humors (choler or bile, blood, phlegm and melancholer or black bile) which constituted the body in the same way the four elements (fire, water, air and earth) made up the physical world of things.2 According to the received wisdom repeated over and over in Portuguese documents, under the excess of heat and/or water at the

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peaks of the two seasons identified in India, health risks for the unadapted Portuguese newcomers were high. Just as the individual corporal balance was to be restored by drawing off an excess of one of the humors under the expert eye of a physician or a surgeon, the ailing public body of the Portuguese community in Goa, and elsewhere in India and Asia, required "extreme measures" under the authoritative guidance of a Governor or a Viceroy. While recovering health used to and continued to be a private responsibility, epidemics came to be regarded as political issues equal in importance to military campaigns or defensive strategies.

The desire to protect the body, to survive and to be healthy, closely connected with the desire to enjoy other bodies (sexually or otherwise), became the subject of a hidden geometry of power relations in which medicine and criminality, religion and witchcraft, self-interest and public welfare played tricks on each other. The ideal of healthy individual and social bodies, as well as the desire of maximum longevity, was thus subjected to a variety of, at times contrary initiatives. By looking into two different, yet compatible, "health schemes" proposed to the Portuguese colonial authorities in Goa, one by a New Christians physician, Garcia de Orta, and the other by the members of the Society of Jesus, I will argue that the former celebrates medical diversity, pharmaceutical and botanical ("scientific") rigor and the endless adaptability of European bodies to various ecological environments, while the latter conceived of medical cure as social and psychological uniformization, ordering and disciplining. In other words, Orta proposed tools for harnessing and putting to use the products of the local, tropical nature, while the Jesuit medical impulse charted the way for a new "hygienic sensibility" enabling secular and ecclesiastical authorities to efficiently manage multitudes of human bodies and souls.

Choleric Times: A Scientist in the Shadow of the Inquisition

Even before the establishment of the Inquisition in Goa, in 1560, at least two New Christians were burnt at the stake on two separate occasions, the first in 1539 and the second in 1543, the year in which cholera decimated the population of Goa. The Governor, Martim Afonso de Sousa, who supervised the mutilation of a choleric corpse, presided over the trial against the bacharel de medicina, Jerónimo Dias, who was condemned to have his "body burnt alive and made into dust, because of the heresy against our holy Catholic faith." Garcia de Orta, another New Christian physician was most certainly present on these two solemn occasions. Nevertheless, twenty years latter, by then himself a famous local sábio and médico, whose body but

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3 "Desperate cases need the most desperate remedies" is an aphorism from the Hippocratic collection of Aphorisms. See, Henry, John, "Doctors and healers: popular culture and the medical profession", in Stephen Pumfrey, Paolo L. Rossi and Maurice Slawinski, Science, Culture and Popular Belief in Renaissance Europe, Manchester University Press, Manchester and New York, 1991, p.201
7 Correa, Lendas, IV, p. 292-293.
not his bones were to be spared the Inquisitorial fire, he dedicated a book to his early patron and protector, Dom Martim Afonso de Sousa, who was at the time a close adviser of the Dowager Queen Dona Catarina, the regent and grandmother of the future tragic King Dom Sebastião.  

Orta's dedicatory address in Colóquios dos simples e drogas da Índia, is no more original than a typical captatio benevolentiae intended to ingratiate the author to his protectors or to his readers. Armed with classical references, the author succeeds both in praising the aristocratic virtues of a Portuguese fidalgo, his "heroic deeds" that earned him "an immortal fame", while blaming those of laziness who allow "their forces of the body and the soul to sleep", only to carve for himself an almost divine role as one who "assists the mortals with some scriptures (writings)". Although it would be too speculative to venture an interpretation of this statement as a hidden sign of "Judaizing", as the inquisitors may have done during his trial in 1580, Orta's self-righteous, authorial invectives do resemble a voice of somebody who bestowed the law, rather than composed a description. However, his law is not about people, it is about plants and things or at least, this is what on the surface the text he wants us to believe. The pun on his name, Orta or Horta (=Garden), was all too obvious and rhetorically useful. Luís de Camões calls his work "O fruto daquella Orta onde florecem/ Prantas novas, que os doutos não conhecem", while for another doctor, Dimas Bosque, Orta's friend and contemporary, he was a "garden of simples and fruits of India". It is no wonder that Orta, also nicknamed o Ervas (Herbs), likened his book to a plant. Thus he pleaded with the former Governor of Goa: 

"wanting to plant some delicate plants, they [agriculturists] shore them up against some mighty trees in order to defend them against tempestuous wind and strong rains and harsh frost, in the same way I wanted to plant this fragile plant under protection of your lordship, with which it will be defended against most of the world."

As long as his powerful and noble friend and his influential relatives such as Tomaz de Orta (a royal physician) were alive and politically strong, according to the historian Augusto da Silva Carvalho, Orta's biographer, he and his family in Portugal and Goa were left in relative peace by the Inquisition. Hence, it rings true when, beyond the mandatory literary topos and courtesy, Orta's first desire in the Colóquios concerns the health, prosperity and longevity of his protector. "Let God make prosperous the illustrious status of your lordship, and let it grow with honorable titles through long years, as I desire". Moreover, Orta construes his fidalgo protector not merely as his social and political patron, but also as his teacher "in [Sousa's] military and courtly school". In fact, more than a garden, Orta's book resembles a classroom.

The first Colóquio - staged as a dialogue between his two principal protagonists and each other's double, Orta himself and a Spanish physician Ruano,

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10 Orta, vol. 1, p. 4.
12 Orta, vol. 1, p. 5.
13 Carvalho, Augusto da Silva, Garcia d'Orta, Comemoração do quarto centenário da sua partida para a India em 12 março de 1534, Coimbra, 1934, p. 39.
who like Sancho Pansa and Dom Quijote at times exchange roles - serves partly as an *exordium*. From the mouth of Ruano, the program of the book is given with remarkable precision:

"I have a great desire to learn about medical drugs (those which in Portugal are called of the pharmacy) and other simple [or herbal] remedies (*mêzinhas simples*), that exist here, and all the fruits, and pepper. About all these things I would like to know the names in all the languages, as well as all the countries in which they grow and about the trees and plants that produce them, and also would like to know how they were used by the Indian physicians (*físicos indianos*), and also I would like to know some other plants and fruits of this land, although they are not medical, and about some customs of the country [...] all these things should be true, seen by you or by persons worthy of faith".14

Orta the ethno-botanist and pharmacologist followed a consistently inductive method and therewith roughly delineated sequences throughout the book.15 In discussing particular medications and plants, he would add his own clinical observations regarding curative properties, or culinary virtues, or any other "curious" information. As a good "gardener" he grew most of the plants himself, either in the backyard of his house in *rua dos Namorados* in the middle of the bustling and dirty city of Goa, or on lands leased to him on the island of Bombaim, at the exact location of today's Mumbai.16

His was, therefore, a world of perishable consumables, to be grown, bought, exchanged, to be sold, cooked, eaten, tasted or rubbed on the body. By confining and confining these objects to his *Colóquios*, Orta tried to preserve them, to paraphrase Francis Zimmermann, both as *objets à manger* and *objets à penser*.17 Stringed in alphabetic order, at least until the twenty-fourth chapter18, the things and their multiple names are manipulated from one role to another, from one state to another. They are turned into juices, boiled, distilled, changed to stones. Aloes, the first plant in his herbarium is defined first by its Latin and Greek name "aloes, or aloe" and then by as many names as his research permitted him to collect. "The Arabs call it *cebar*, and the Gujeratis and Decanis *area*, the Canarins (who inhabit this strip of sea shore) call it *catecomer*, and the Castillians *acibar*, and the Portuguese *azevre*."19 As much as names are undoubtedly useful, even indispensable, for his classificatory tasks, that is, transforming "real" things into "learnt" objects of science, an annoying problem of proper "identification" submerged much of his analytical efforts. Cutting through linguistic misappropriations, Orta was both dismayed and excited about his discovery that one and the same word might mean different things for different peoples and at

18 The book has 58 colloquies.
19 Orta, vol. 1, p. 25.
different times. At the same time, botanical linguistic relativism allowed him to launch an attack on the Ancients, Greek and Roman naturalists and physicians, Dioscorides, Galen and Hippocrates among the most famous, and to rebel against textual authorities in general, from medieval Arabic and Jewish scholars such as Avicenna, Razi, Averroës, to his contemporaries Pietro Andrea Mattioli, Andrés de Laguna, Leonardus Fuchius and others.  

Direct observation of phenomena and personal experience led to Orta's highest ideal – the truth about the world. The exchanges between Ruano and Orta mimic and echo an inquisitorial scene obsessed in a similar way with truth about the self. To Ruano's probing questions phrased in way to solicit high-strung answers, Orta exclaims: "I have not tried it", "I have not seen it there", "I do not doubt because I've seen it with my eyes". In spite of his amicable relation to his invented "double", whose name, according to Carvalho, betrays a Spanish New Christian origin, Orta seems to respond in a series of defensive moves, as if it were a dress rehearsal for the ultimate nightmarish and real inquisitorial showdown. Multiplying invitations, from the first page onwards, to tell and disseminate the truth, Orta positions himself as aggressively self-righteous: "Do not frighten me with Dioscorides or Galen, for I will not say but the truth and what I know". These two ancient experts, Orta's "torturers", were downgraded even further in a much cited phrase, "I say that today one learns more in one day with the Portuguese than was known in one hundred years with the Romans". The chronological split between Moderns and Ancients, a routine invocation by any respectable academic degree holder of Orta's generation, is doubled by geographical distance. If he were in Spain, he told Ruano, "I would not dare to say anything against Galen or the Greeks." Presumably the control of thought was stronger in the metropolis than in the periphery.

India was for Orta the closest he could get to a frontier of freedom where the "truth is painted naked" and where a only long stay in the country, diligent inquiry and experience count. And, thus, he bitterly commented on the lack of curiosity of the Portuguese soldiers and merchants. They were driven only to acquire riches and carnal satisfaction. Early to the Portuguese colonial experience in India, these and similar accusations became a commonplace in official and private correspondence from India and in Portuguese literature. The desire for goods and for women seems to have gone awry overseas. The arrival of the Jesuit missionaries, a year before the cholera epidemic and the auto da fé of Jerónimo Dias, and the advent of post-Tridentine reforms a few decades later, marked an increased sense of urgency to remedy and control these unruly impulses. The Catholic frontier which the Jesuits or the "soldiers of Christ" came to advance, had to be purified from the inside out from sin and moral turpitude.

Carnal Excesses in the Tropics

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21 Orta,vol. 1, p. 105
23 Orta, vol. 1 p. 84.
24 Orta, vol. 1 p. 79.
Orta the physician and Francis Xavier (a future saint), a *médico da alma* in Jesuit vocabulary, might have possibly met each other at the table or by the death-bed of some of their patients. Although the Padre Santo penetrated *portas adentro*, in order to reform the Portuguese tropical household, where men lived in sin with concubines in order to cleanse them from sensuality, his principal goal was eternal salvation. In the last instance, Jesuit psychotherapy was geared to ensure a good Christian death, not necessarily a good life. Orta's goal was exactly opposite: it was to ensure healthy life, to bring his ailing patients back to their senses, to stimulate their vital desires and, why not, their sexual pleasure. If he pays lip service to the Christian "pessimist" tradition which kept the umbilical cord between sin and illness unbroken, he did so with little conviction.

The pages of the *Colóquios* abound in aphrodisiac stimulants to be extracted from tropical plants and substances, and they are laconically prescribed without moralizing. Amber, asafetida, bhang (hashish), benzoin, opium, and many others contribute to "conversation with women", "to lift the member", "to increase coitus", etc. Not only do they increase venereal pleasure, they also increase commercial profits. Besides, soap, opium and bhang represented a significant part of the state revenues from farmed taxes. An important tip for merchants in Europe (and metaphorically perhaps even tongue-in-cheek for missionaries) planning to trade in Asia was not to import useless items such as *raiz angelica* (angelic root) or *raiz do Espírito Santo* (root of the Holy Spirit), which was reputed to repress sexual desire, since no Indian would want to buy it. Substances that change the consciousness, from perfumes to dangerous drugs and poisons, according to Orta, seem to have been especially appreciated by the local population. Their effects liberated otherwise constrained bodies to do unimaginable things. The ill-fated Sultan Bahadur confided to Martim Afonso de Sousa that when he wanted to travel the world, to Portugal, Brazil, Turkey, Arabia or Persia, he simply took a bit of bhang. Prostitutes who wanted to be entertaining did the same.

Curing bodies with an excess of poison, blood, phlegm, wind, etc., was a primary task for the physicians. But how does one cure unruly and, from the Christian point of view, profoundly sinful desires that seem to have been endemic in the tropical climate? For Orta, however, as licentious as they might be, there were no sinful desires. This is the reason why his text, rich in ethno-medical details, gossip and curiosities, does not provide for eroticized reading. One of the most tantalizing of all exotic plants in the Indian herbarium was datura. In spite of much confusion between various datura species, which did not have the same medicinal or toxic virtues, the name itself became associated with a particular type of sexual and social transgression. Cristóvão da Costa as one of the earliest witnesses of datura's disconcerting qualities as a substance and its seductive appeal as a textual enticement. Probably a New Christian himself, he came to Cochin in 1568 – the year in which Orta died - and returned to Spain in time to write and publish his treatise in Burgos, in 1578, *Tractado delas drogas, y medicinas de las Indias Orientales, con sus Plantas debuxadas ai bivo por Christoval Acosta medico y cirujano que las vio ocularmente*, before dying shortly thereafter. For someone who was characterized as a *vagamundo*.

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26 Orta, vol. 1, p.100.
27 Orta, vol. 1, p.97
28 Acosta, Cristoval [Cristóbal or in Port. Cristóvão da Costa], Tractado delas drogas, y medicinas de las Indias Orientales, con sus plantas debuxadas ai bivo por Christoval Acosta medico y cirujano que las vio ocularmente, Brugos, 1578, Biblioteca Nacional de Lisboa, RES 4055P[hereforth: Costa]. For
and a picaresque adventurer, Costa's work was in fact closer to the style adopted by Charles de l'Écluse, the famous translator into Latin of the Colóquios and of the Tractado. He dropped the dialogic form and any pretense of literary effects and adopted instead a record-keeping narrative with ample annotations in the margins. Approaching things descriptively and employing the "invisible-hand" explanation point to Costa's "scientific" intentions. In the same way, the use and abuse of datura by the "mundane" women of Goa who inebriated men for as many hours as they wanted, is phrased as objective evidence, in spite of its briefly erotic charge. The same story, and one could suspect that Costa's account was the initial inspiration, grew into a full-fledged tropical topos.

Jan Huygen van Linschoten, who traveled through the Portuguese Asia from 1584 to 1592, added spice and spite to it. In his account it was not just Goan prostitutes who poisoned their clients with this plant, but married women did the same their husbands, "so that in his presence they may do what they will, and take their pleasure with their friends, and the husband never know of it". This behavior is only a drop on the larger canvas of spiritual squalor and physical licentiousness in Portuguese society in Asia which Linschoten painted for his Dutch audience. According to Pyrard de Laval, all women in India used this drug in order to trick those who command them. Spouses drugged their husbands, servants and slaves their mistresses. The impossible role reversal was thus facilitated at least temporarily by those who suffered, in the words of another French traveler and pharmacist, Jean Mocquet, "incredible cruelties". With each and every travel narrative the description grew and was fleshed out around datura with more juicy and voyeuristic details of perverse sex. Thus Laval added a curiosity concerning "all Indian women, gentle and Muslim", who in "company" of men want to be on top and consider any other way a monstrosity against nature.

For Orta, the sexual behavior and escapades of his compatriots were of no interest. What did matter to him were professional codes of conduct. Asked whether he gave datura seeds to his slaves (negro ou negra) "for fun", he responded that such an act would go against his consciousness. Except when rectifying the misrepresentation concerning elephant mating, no other indecent postures are present in his text:

"Ruano: They say that the male elephant (elefante) sleeps with the female elephant (elafanta) just like man and woman, contrary to other quadrupeds. Orta: The contrary is the truth, because they join together like other

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30 Costa, p. 88.
31 Linchoten stayed in Goa from 1584 to 1588 employed by the Archbishop Vincente de Fonseca.
36 Orta, vol. 1, p. 296.
quadrupeds; they are no different, except that the male gets on the bank which is higher, and the female is lower."

Obviously, neither women on top (mulier super virum), nor men from behind (retro canino), were considered as norms in prescribed heterosexual human relations. The suspicion that elephants also practice what came to be known as the missionary position, is perfectly in tune with their usual anthropomorphic reputation. From the classical period onwards, the elephant is seen as a mirror image of the European other, of a barbarian. Endowed with an almost, but not quite, human intelligence, it is an animal-surrogate inscribed within ambiguous and contradictory European desires either to deny or to confer full humanity on their colonial subjects. According to Costa's treatise on the elephant appended to his book, this "ugly" animal is endowed with memory and rudimentary speech, learns easily, is capable of discipline, is a good and strong worker, and practices some sort of religion (sun worship). It is also pleasant, modest, bashful, vengeful, prideful and chaste. It has, however, one weakness (enfermedade), it is unable to control his furia venerea, and then becomes a menace to whoever is in its way. An excess of carnality and frivolity, and a confused idolatrous religion were proofs of the essential lack.

This is precisely the type of often repeated argument Orta avoided expatiating upon, insisting rather on rigorously materialist evidence or explanation and "health" projects for the Portuguese in the tropics. Newcomers must change the management or the "techniques of the body", in words of Marcel Mauss, and thus connect it and adapt it to local climates and environmental habits. The body was to be, in Orta's view, a locus of accommodation, not conflict, between the European and Asian worlds. The relocation costs would not have a decisive impact on the loss of European bodily substances, if one were to supplement them immediately with vernacular additives: different types of food and drink, dress, sleeping habits, sociability, etc. What this conscientious physician was prescribing was, in fact, already in practice. In their drive for profit and adventure, Portuguese traders and soldiers tuned their bodies to fit the rules imposed by an almost permanent "extraterritorial" marketplace situation. In the Bakhtinian sense, theirs was a "grotesque" body which communicated fully with the outside world through the orifices: mouth, genital organs, nose, etc.

Food, Adaptation and Social Solidarity

Since food is necessary to construct this new tropicalized body, the Colóquios provides a whole range of dainty dishes which evoke exotic tastes through their non-Portuguese names and the familiar pleasures of a richly laid table. Although Orta refers to his culinary tips as "low things" not worthy to be written about, Ruano provided a justification and context for his complicated menus: "I am not so much physician as you fear, because I also consider myself a man of the court". Food was not considered as a low thing at the table of the Governor, a Viceroy, a Jesuit Superior or a simple casado, since, besides its nutritional value, it was considered as an important sign of status and honor. All social occasions were concluded with banquets

40 Orta, vol. 2, p. 103
of which travelers from other European countries left succulent descriptions. Feeding the poor, especially poor Portuguese soldiers, during the slack monsoon period in which their services were neither required nor remunerated was one of the duties of the members of the Misericórdia and other various confraternities.\textsuperscript{41} Even the prisoners of the \textit{aljube} and \textit{tronco}, the ecclesiastical and civil prisons, were regularly fed and their diets were adjusted according to their specific status, rank, ethnicity.\textsuperscript{42} Distribution and availability of food in Portuguese settlements, and especially in Goa, came to be assimilated to a question of civic and civilizational, Christian superiority vis-à-vis the surrounding non-Christian political structures. Eating, and eating well, according to Ruano, was a courtly privilege and duty. Another of the soldier's was to preserve his own health, but at the same time his healthy bodies was the concern and duty of the state, which sponsored health-care institutions. Hospitals and Misericórdias, fashioned on the metropolitan model, for examples the Hospital Real de Todos os Santos and the Santa Casa da Misericórdia in Lisbon, both established in the last decade of the fifteenth century, appeared throughout Asia. Royal centralization and state regulation were at the heart of these two institutions, considered today as an original and early "Portuguese model" of social welfare.\textsuperscript{43}

Although the descriptions of the organization and the conditions of health care in the hospitals vary, the writers all agreed that the food served in them was of excellent quality. In the Hospital del Rey in Goa, poultry and various meats were cooked, boiled, grilled and garnished with bread and rice, before the meal was concluded with fruit and sweets.\textsuperscript{44} In the early years, staying in the hospital seems to have been more comfortable for many poor soldiers than starving at home, if one had one at all. According to Gaspar Correa, Vasco da Gama discontinued the practice of keeping, for reasons of "friendship" (\textit{recolhão homens por amizades}), those men in the hospital who had injured themselves in drunken quarrels over women.\textsuperscript{45}

However, friendship and commensalism among men were important promoters of solidarity and community. Besides reinforcing horizontal ties and cooperation, transactions in food acted as indicators of vertical social relations. One of the social techniques of the colonial or "vice-royal" courtly lifestyle was to give banquets for stately, festive or religious occasions with a few hundred invitees, mostly \textit{fidalgoes} and soldiers. In the middle of the sixteenth century, however, a regular meal at least four times a week was given as a charitable act to impoverished Portuguese men in Goa.\textsuperscript{46} "To give table (\textit{dar mesa})" was one of the prerogatives of the governor or a viceroy, and it was imitated lower down the hierarchy. In the course of the time and by the end of the sixteenth century, charitable acts at the table of the viceroy seem

\textsuperscript{44} Laval, vol. 2, p.531-532.
\textsuperscript{45} Correia, Lendas, vol. II, p. 819. See also Fonseca, José Nicolau da, \textit{An Historical and Archeological Sketch of the City of Goa}, (Bombay, 1878), New Delhi reprint, 1994, p.229.
to have been completely replaced by an occasional theatrical display of the local courtly empowerment.47

Orta's text is also a display of empowerment, not over men and social relations, but over things and names. Most of the things are edibles (or consumables) and all of them are mercantile goods. On a few occasions, his learned interlocutors, Ruano and Dimas Bosque, the two Spanish physicians, exchanged with Orta both words and food simultaneously. The mixture of words and food mobilized in Ruano's opinion the "four senses", which facilitated a final professional judgement without passing through a learned, written opinion of the pharmacological or botanical classics. After tasting jangamas from Orta's Bombay garden, Ruano knew that they smelled good, looked like small sorb apples (sorvas), taste like plums and are were sour (estitiquas). The truth about things, Orta's primary goal, takes leave of text and voice and turns to palates and then back into the field of knowledge. Within the same movement, analogies with European botanical species provide the approximate meanings and tastes. This frequently used technique for grasping the new and strange is not employed to undermine local tastes in favor of the metropolitan varieties. On the contrary, it is locally grown plants that Orta defines as possessing better qualities, such as, for example prickly fruits (oranges, lemons, citrons). In so doing, he was well aware that he could be seen as nourishing "unpatriotic" ideas. "It is certain that there are some very persistent Portuguese who would rather die than confess that here there are some fruits equal to those in Portugal."48 Hence, a plethora of indigenized recipes function as sensory persuasion.

Mango, the most valued fruit, can be eaten in sugar syrup, in vinegar, in oil and salt, filled with ginger and garlic, cooked and salted. In addition to these vernacular preparations, Orta added a Portuguese invention - sliced mango in strong-scented wine.49 In the same way, plants and herbs serving mainly as condiments were pushed on the readers' palates and on what he called imaginative faculties (virtude imaginativa) in order to evoke the same alloy of tropical and European. Thus ginger could be eaten in achar (pickle), in salad or in fish or meat turn-over (pasteis de peixe) or in sugar syrup.50 Especially the Friday fish dish could be improved by "adding taste", Orta suggested in one of his very few remarks concerning Christian religion and practices. From other sources, especially foreign travelers who visited Goa, it appears that the Portuguese creole diet abounded in meat and fish prepared in sauce, garnished with the famous mango pickle and a fair quantity of rice.51 In the late seventeenth century, an English physician, John Fryer, paints almost an idyllic domestic scene of a typical Goan household:

"They [women] sing, and play on the Lute, make Confections, pickle Achars, (the best mango Achars coming from them), and dress Meat exquisitely, not to put the Stomach to too much trouble, but such as shall digest presently; Supoes, Pottages, and varieties of Stews, in little China Dishes or Plates, which they shift before you are cloy'd and at common Entertainment alter half a dozen Modes: Their Relishing Bits have not the Fieriness of ours, yet all the

49 Orta, vol. 2, p. 102. Wine was an imported item. See Laval: vin de passe vol. 2, 596.
pleasure you can desire; and to speak truly, I prefer their ordinary way of
ordering Victuals before any others."  
Food and women are inextricably woven together in most "tropical" travel literature.
Scarcity or availability of both makes all the difference for the poetics of the encounter.
Like Fryer, Francesco Carletti experienced and appreciated the abundance. Especially, the abundance of domestic and wild fowl in the Goan diet.
Prepared in numerous ways, cooked, backed and stewed in sugar on white rice, these
dishes were delectable, astonishing, cheap to buy and tasty. The same could be, and
was said for women. Carletti compares them to Boccaccio's free and passionate
heroines who would rather die for love and amorous encounters than give them up.
The proverb on their lips, often heard, was "more than death" (mais que morrer),
which under the circumstances was quite appropriate, since adultery for a woman was
punishable by just that, death. His admiration for their courage in passion, since
"there is not a single day without a man killing his wife", blends with his admiration
for exquisite dishes.
"Among the recipes, I will only mention the one called 'royal dish', prepared
with capon's meat, first cooked, boiled or roasted, which is cut in very small
pieces and then incorporated with pounded almonds, sugar, amber, musc,
crushed pearls, rose water and egg yolk; the mixture which refreshes and
excites again the lovers to the carnal pleasures."  
If the consumption of food was to stimulate "union", solidarity and cooperation, sex,
on the other hand was divisive, disruptive, transgressive and had to be controlled. The
French royal apothecary, Jean Mocquet, was scandalized with sex crimes in Goa and
the cruelty with which they were executed. Jealous wives tortured and disfigured
young slave girls, men raped and murdered their lovers and wives, women poisoned
their husbands, etc. The tortures which were applied competed in ingeniousness and
exoticism with the popular contemporary books on "religious" cruelty – from martyrs
of the primitive church to wars of religion.

The purpose of the Colóquios, which was printed in Goa and for Goans -
unlike the disparaging descriptions of the foreign travelogues destined for the
European audience -, is not to expose, but to dispose of the perils of Portuguese life
in the tropics. Each and every item in his titanic inventory of Asian flora and minerals
serves to help human bodies, male bodies in particular, to preserve and gain health,
longevity and virility. If the climatic conditions drain the bodies of their fluids (sperm,
water, urine, sweat, diarrhea, etc.), or provoke the rotting of food and nourishing
substances in the bodily cavities, the local natural pharmacopoeia provides the means

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52 Roe, Thomas and Fryer, John, Travels in India in the Seventeenth Century, (London, 1873), New
Delhi reprint, 1993 p. 384. Commissariat, M.S., Mandelslo's Travels in Western India (1638-1639),
(London, 1931), New Delhi, reprint, 1995, p. 79
53 See a "transcription" of a dialogue concerning the custom of "swapping women" among the merchant
communities in Malabar as recorded by and 15th-century Italian traveler. p. 59. Varthema, Ludovico,
The Travel of Ludovico di Vartema, transl. by J. Winter Jones, ed. by G. P. Badge. (London, 1863),
New Delhi reprint, 1997. On Vartema's travels in South India see, Rubíes, Joan-Pau, Travel and
Ethnology in the Renaissance; South India through European Eyes, 1250-1625, Cambridge, 2000, pp.
125-164.
54 Carletti, Francesco, Voyage autour du Monde de Francesco Carletti (1594-1606), [henceforth:
Carletti] Paris, 1999. p. 249. See also, Carletti, Francesco, Ragionamento del mio viaggio intorno al
55 Carletti, p. 255.
56 Carletti, p. 256
58 See, Verstegan, Richard, Théâtre des cruautés des hérétiques de notre temps, ed. Frank Leestringant, Paris, 1995,
for regeneration. Following Galen's theory of primary qualities and the complexionate balance between passive (dry and wet) and active (hot and cold) qualities inherent in the simples, the medicine depended on counterbalancing the patient's disorder, the so-called cure by contraries.\(^{59}\) Hence, the dialectics between ingestion and expulsion, in order to stabilize the balance of the four humors, syncopates Orta's text. Thus, within a few lines, a recipe for a delicious food will be followed by advice on how to purge the bowls with an appropriate clyster. Similarly, a watermelon (\textit{pateca}) is praised for its exquisite taste and for its diuretic, vermifuge, anti-fever, somniferous effects. 

"It is one of the best fruits that I've seen in my life; and at certain times I prefer it to our melons (\textit{melões}); [...] and most of it seems to be evacuated in urine and some in diarrhea (\textit{câmara}); and no thing remains subjected to corruption (\textit{corrupção}), as it happens with melons and cucumbers (\textit{pepinos e cogombros})."\(^{60}\)

For Orta's Goan audience, it must have been quite reassuring to find that the goods easily procured on the local market had such various uses. He also prescribed watermelon (\textit{melam da India} or \textit{pateca}) for choleric fevers, to warm up liver and kidneys.

\textit{Physicians, Quacks and Confessors}

While Orta was incurably optimistic about nature's ability to provide cures and remedies for all the worst diseases and ailments, he was suspicious of the medical specialists (\textit{médicos, sangradores, boticários, dais, curandeiros}) one encountered in Goa. Whether they were Arabs, Gentiles, Coraçones, Jews, Spaniards or Portuguese, for a majority of them money and easy enrichment won over their sense of professional ethics. Regardless of their "ethnicity", there were illustrious exceptions, such as Ruano, Dimas Bosque and a few other doctors whom Orta encountered at the various native courts in the Deccan and on the Malabar Coast. However, his judgements of other specialists is never submerged or short-circuited by way of ready-made generalizations or "ethnic" or "religious" stereotyping.\(^{61}\) Human beings with whom he interacted are defined according to their moral qualities or their humoral temperament. They can be brave, cowardly, avaricious, generous, choleric, melancholic, etc., but they are not avaricious because they are Jews, brave because Portuguese or cruel because Muslim, as Orta's Catholic contemporaries seem to have perceived members of other religions.

Dispersed in his text are all kinds of villains and heroes, learned physicians and quacks from all camps. Just as he proceeded with an identification of medicinal plants, he also identified doctors and healers without any preconceived cultural or social blinders. Most of all, he underscored at every point the usefulness of crossing over, borrowing from one another, exchanging prescriptions, adapting to situations, climates, regions or individual bodies. "A shoemaker does not make identical shoes for everyone" is one of Orta's chosen Galenic dictums.\(^{62}\) This is one of the reasons why his text lacks a unified, fixed methodological framework. He even refused to

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\(^{59}\) The strength of the simple, which might be predominantly hot and wet was quantified on a scale from temperate (neutral) to the fourth degree.

\(^{60}\) Orta, vol. 2, p. 135


\(^{62}\) Orta, vol. 1, p. 141
follow the simplest mechanical arrangement of his chapters in alphabetical order for rhetorical reasons. In order to capture the attention of his audience, the most beneficial (proveitosas) things had to be said first, because he heard that "the worst sins have to be confessed first to the confessor."\(^6^3\) Intentionally or not, Orta likened his audience to confessors, some of whom would ultimately turn into inquisitors. To what extent this furtive sentence was a particular captatio benevolentiae, a simple premonition, a fetish against the evil eye, cannot be discerned. That he was successful in the beginning irrespective of his intention is proved by the fact that the imprimatur of the book in 1563 was given by the first Goan Inquisitor, Aleixo Dias Falcão.

On the other hand, there is a natural connection between his botanico-pharmacological treatise and confession, as they both turn around the discourse of truth and the truth in discourse, according to Michel Foucault's famous dictum. And yet, Orta had to hide more than he could ever reveal. Not only because he actually had something to hide, but because he and all the New Christians in Goa were forever suspected of hiding the fact that they were still Judaizers and enemies of Christians. In this strange position in which everybody knew everything, and inversely everybody hid everything, and in which the roles of each and every person were defined by the purity of his/her blood, the Colóquios can be read as a piece of anti-Inquisitorial propaganda. The confessor and the Inquisitor were supposed to uncover difference, label it as sinful and annihilate it. To this exclusive method, Orta opposes an eclectic herbarium of plants and people, all of whom, although labeled with so many names in different languages, preserved the essential qualities of natural or human beings. None of them deemed to be superfluous, but rather is seen as contributing to the eco-diversity.

"And since the region was never so well-known as in the present, especially by the Portuguese, do not believe that there is a lack of famous remedies, because plants and fruits were never so many as they are today; because the grafting (enxertias) produces diversity among fruits, and because the transport from one land to another also produces diversity."\(^6^4\) With this Darwinian insight avant la lettre concerning the variability of the species, Orta imagines the "new" world without ecological and thus without political borders. Free exchanges of goods, plants and people were to be regulated according to the mechanism of supply and demand. Thus, the available quantity of coconuts lowers its price in Goa, while its scarcity in the interior, in Balagate [Ahmednagar], makes it higher.\(^6^5\) Absolute scarcity, on the other hand, may produce the effect of monopoly, for example, such as the famous (and imaginary) "anti-venomous" coconut from the Maldives, supposedly the fruit of giant underwater trees, which was exclusively the property of the king. As Orta put it, "this gives to the coquo of the islands more authority (autoridade)"\(^6^6\) However, the ideal world in his opinion was one of travel and exchange. This is why he complained about not being able to obtain permission to leave Goa and Portuguese territory in search of information concerning medical practices and remedies, and in order to get farther away from the ominous shadow of the Inquisition, one might suspect.\(^6^7\) His dreamland seems to have been China which once sent its merchant fleets, loaded with silk, porcelain, musk, pearls, copper, etc. all

\(^{63}\) Orta, vol. 1, p. 23


\(^{65}\) Orta, vol. 1, p. 238.


\(^{67}\) Orta, vol.
the way to Ormuz. It had tantalized Portuguese and Europeans, for that matter, from the inception of the "discoveries" era, and by the middle of the sixteenth century, reports full of admiration, if somewhat tainted by the hostility encountered, percolated down to Goa. The pharmacists Tomé Pires, Galeote Pereira and Fernão Mendes Pinto, among the first, must have already stimulated the appetites and enthusiasm for Chinese things. What impressed Orta more than anything, except the mercantile and "mechanical" skills of the Chinese, such as the invention of the printing press, was the fact that "they give grades and many honors to the literati, and they are the ones who govern the king and the country". This being one of the ideals of the classical res publica, it continued to thrive in all utopian literature, culminating with the French Enlightenment philosophers. Besides Orta, the Jesuit missionaries in the sixteenth and the seventeenth centuries, were responsible in more important ways for heralding the most positive sides of the Chinese political system, especially compared to European regimes.

Beyond utopia, on his own ground in Goa, Orta dealt with local literati and doctors. He wrote that he learnt a lot from the "great physicians", Arabs and Coraçones [Khorassani], whom he encountered at the court of Nizamoxa [Nizam Shah]. However, on a daily basis, local physicians, Muslim hakims and Hindu vaidyas, were not dissimilar from Portuguese doctors in their healing methods and in their unprofessional and avaricious behavior. Thus, the vaidyas used Portuguese remedies in order "to please people" and "earn more money". Although they avoided blood-letting, they imitated the Portuguese in checking urine but with no idea as to how to proceed, and "of the anatomy, they don't know where the liver or spleen, or anything is". In a word, they cured "by experience and by custom", and it was precisely that which Orta studied and amply used in his medical practice. Asked if he "took some things [remedies] from them", Orta replied, "Yes, many; but first I try remedies of our doctors, and when they do not work, I take those of the Brahmans of the country". This is a curious statement given that not all doctors in Goa were Brahmans and that Orta had no access to the classical medical Sanskrit texts such as the Suśrutasamhitā and the Carakasamhitā. It is possible, however, that he suspected or even had some notion of the existence of such books since, on the wings of the Counter-reformation, the Catholic clergy and the Jesuits had began to confiscate manuscripts from the Brahmans of Chorão, Divar and other surrounding villages. Nevertheless, as many "intellectuals" after him, such as the Jesuit missionaries themselves, Orta admired, respected and often futilely searched for the comprehensive local literate tradition and their "honest" exponents. In the long run, it became an

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impossible task, but the belief the Brahmans hold the keys to all Indian sciences remained.

*Rot and the demonic in colonial culture*

In spite of such lofty goals such as acquiring and perfecting knowledge of tropical flora, fauna, geography, linguistics and the like, the most pressing task for a doctor, which Orta never forgot, was saving lives through successful cures of the most common, yet deadly, illnesses such as fevers and diarrhea (*câmara*). Following closely the Galenic humoral theory, all diseases were attributed to the disturbance of humors outside and inside the body: bad air, caused by piles of dead animal carcasses, excrement or garbage, or undigested food in one's own stomach. Public and personal hygiene were directly responsible for the state of one's body and for the outbreak of general epidemics. According to the contemporary accounts, the stench in the city of Goa was quite unbearable because of the unsanitary practices, for example, leaving excrement on the roof of the houses to be cleaned by wind, rain, birds or ants. Even well-to-do households had no toilets and their refuse was disposed of by Bhangis, all belonging to a special caste of sweepers and chamber-pot bearers. Village life was no better and, according to one Jesuit missionary, the peasants lived in pigsties.

The tropics in general were considered as regions in which rot and decomposition were endemic in both the ecological and moral senses. "You should know that this land, at least along the coast, is too prone to putrefaction", explained Orta to his readers. The rot was thus viewed as a climatic, not as a social and cultural fact, as if the land itself produced vapors stimulating the decay of things and institutions, such as their own *Estado da Índia*, as the Portuguese came to believe in the second half of the sixteenth century. Rot was inherent to the tropics just as the dwellers of such places, according to the humoral theory, had an increased sense of smell. They spent huge amounts of money for perfumes, ointments and fragrant flowers, according to Duarte Barbosa and many other contemporary travelers. The reverse side of this olfactory paradise was that they equally cherished, according to Portuguese taste, malodorous things such as asafetida. Orta's little story is quite instructive in this respect and spells out clearly his and his compatriots' taste:

"A Portuguese in Vijayanagara had a very valuable horse which kept on breaking wind, and the king did not want to buy it from him. The Portuguese cured it by feeding it this *ymgu* with flour. The king bought it as soon as it was healthy and asked him how he had cured it. And he told him about *ymgu*. To this the king said, do not be surprised, because this is the food of the gods, or as the poets say the nectar. The Portuguese lowered his voice and responded in Portuguese that it should better be called the grub of the demons."

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76 Orta, vol. 2, p. 374, vol. 1, 156..
79 Duarte Leitão to the members of the Portuguese province, Goa, Nov. 16. 1570, Biblioteca Nacional, Lisbon, Fundo Geral, 4532, f. 81v.
Filled with signs (rather signifiers) of foul smells, this particular passage juxtaposes people and animals, divine and demonic, and food and filth in the most syncretic mixture without endeavoring to exclude one or the other. Orta took a personal stand on asafetida - "a thing that for me smells worst in the world" - but allowed his text to lead us to olfactory relativism. Natives (gente desta terra) enjoy its smell and even a Portuguese merchant found it delicious in certain vegetable preparations by the Baneanes [Gujarati merchants]. The medicinal properties of asafetida were many and important - against rage, plague, poison, constipation, flatulence, lack of appetite, etc. Thus by the end the colloquy, when Orta contradicted the opinion of Ruelius concerning its anti-aphrodisiac virtues and insisted that "everybody writes about it as never letting the member down", this otherwise quite mysterious plant, as nobody could figure out how it looked and from where it came, was fully rehabilitated.82

The connection between foul and/or inebriating smells, devilry and women, however, is not accidental. It was precisely because of the smell produced by tropical nature and the enhanced olfactory capacities of the Indians that they "are all inclined to Venus".83 There is a discursive vicious circle that brings Orta's various "scientific" prescriptions and enunciations to purposely or unwittingly connect women with illness, food, rot, and social disorders. Thus the causes of the morxi (or passio colerica), considered the most virulent and mortal illness, were excessive eating, excessive "conversation with women", and "it occurred mostly in June and July (which is the winter in this land)".84 The illness, clinically described in detail by Orta and confirmed by other travelogues, which in the eighteenth century under French vocalic and semantic distortion came to be known as mort-de-chien [Dog's Death], is generally known as epidemic Asiatic cholera.85 The patient would usually die within twenty four hours, dehydrated, exhausted and in excruciating pain. The ultimate remedies suggested in the Colóquios were as painful as they were inefficient, resembling more a torture than a cure: branding the soles of the feet with a burning hot iron "and throwing in the [patient's] eyes a long pepper in order to test the force".86 These were methods adopted from the "native physicians" and considered by Orta as appropriate. In addition, he proposed a cocktail of spices and oily massages which resembled ayurvedic treatments and, what is more, had his own curious theriaca mixture containing, among other things, opium and exotic and medicinally indifferent materials such as unicornio and the bezoar stone.87

Orta's Colóquios is an entirely open text, just as Orta is an open-minded student of nature. He may have ridiculed certain practices by native medical specialists, such as Gujaratis and Deccani who healed fevers without medicinal remedies, but by starving their patients for up to fifteen days.88 Nevertheless, he was always ready to try new methods, as long as they did not contradict reason and his sense of medical ethics. Thus, he was reluctant to try certain alleged antidotes, for example, the mysterious giant water coconut from the islands of the Maldives, as he

82 Orta, vol. 1, p. 76, p. 86
83 Orta, vol. 1, p. 70
85 See Hobson-Jobson, p. 586-7 for travelers' descriptions.
86 Orta, vol. 1, p. 265.
thought that there were many other good simples and preparations. His writing resembles picaresque traveling from one part of the earth to the other with utter disregard of frontiers, customs officers and passports. China, Brazil, Persia, or any other geographical region, appear in his text to be connected by underground passages in which etymology, trade, illnesses, plants, people and, what he did not know, germs, circulated, enriching the knowledge of the world. The rhythm of acquisition of knowledge had accelerated in an unprecedented manner since, according to Orta, in his own time, the Portuguese knew in one day more than the Romans in hundred years. In a similar fashion another Renaissance figure, João de Barros, Orta's contemporary and a famous grammarian, continued to compare the Portuguese to the ancient Romans. However, while he envisioned and desired linguistic conquest, that is, capturing foreign words, although ultimately imposing the Portuguese language even in the "Indian temples", Orta appropriated foreign things and words, not to build an empire but to consume them. The consumption of things and words was meant to support and cure individual bodies – be they Portuguese, Muslim, Gujarati, Brahman, Baneanes, etc.

Orta's was an empire of humors and his claim to authority reposed on the ability to keep them in check, in spite of the fact that "every day there [were] new illnesses". And to prove that his task was worthy of effort, he invoked divine help as confirmation. Regarding the appearance of syphilis he said,

"God is so charitable that in every country he gave us the remedy to cure it; because the one who gives the illness gives the remedy for it; if not, as Temistio said, our knowledge is the smallest part of what we do not know. And since we do not know remedies in order to cure all of them [illnesses], we bring ruibarbo from China, from where we bring pão or raizes for curing sarna de Castella [i.e. syphilis], and cana fistola we bring from India, and manná from Persia and guaiacam from the West Indies."

The boundary between natural and supernatural remains permeable and the divine (and demonic, for that matter) signposts seem to be randomly scattered over the face of the earth. It was up to courageous adventurers to collect them and bring them all to serve one and the same purpose - healing the ailing body. A soldier (and/or merchant and/or traveler) was an exemplary syphilitic body, both victim and carrier of the disease. According to Orta, the boubas which betrayed the infection were not considered shameful in Goa. Moreover, they were a cause of boasting among the local "studs". Some of the reasons for taking this illness lightly were that in the first stage it appeared curable, it had spread with record speed throughout Europe and its colonies, and it was considered to be a providential illness, displaying divine wrath and cured by divine mercy. Medical explanations, based on the idea that the primary cause was God's will, were reassuring and placed both the physicians and the patients in a symmetrical world of preternatural axles and pulleys.

Orta's exuberant, appetizing and soft-spoken textual crescendo reveals much, but hides even more. His exchanges with ayurvedic and yunani medical specialists confirmed his Galenic humoral view that human bodies were basically adaptable

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92 Orta, vo. 1, p. 179.
93 Orta, vol. 1, p. 179. Themistio was a friend of Julius the Apostate and the commentator of Aristotle.
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natural machines, fuelled on natural products such as plants, spices, minerals, and meats. Extracting nourishing substances from whichever ecological zone, and a difficult tropical climate is no exception, and ingesting them in order to tune one's body to the environmental habitat was the most important factor in maintaining health. He did, nevertheless, understand that health is also a psychological and social phenomenon. It is an inalienable property of the self which makes the subject identical to him/herself. Illness would then be something like a theft or a loss of property, alienation of the self. The physician is therefore a judge or a mediator in the recovery of an estranged property. Orta's model of healing was negotiation, that is, establishing an efficient interpersonal relation between the physician and the patient. It can also be called winning over the patient's trust and confidence in one's healing method. Precisely around the time he was working on and publishing his _Colóquios_, this trust was somewhat broken and fissured.

_Perceptions of Tropical Decadence_

From the time Orta arrived in Goa, in 1534, until 1563, the situation had, has even in the eyes of his contemporaries, changed from worse to crisis. Two inextricably connected problems were identified. The first was financial and economic, the second moral. Financial problems of the _Estado da Índia_ multiplied and were reported back home by various historical actors. The most coherent and persuasive among these reports were letters by the royal financial supervisor, Simão Botelho, written between 1547 and 1552, and his _Tombo do Estado Índia_. This situation of a real resource crunch and moral degradation came to be enshrined, from the last quarter of the sixteenth century, in the literature of _decadência_, the decline, which appears to have been a broad historiographical trend, as much among Portuguese, as among Ottoman and Mughal historians.\(^{95}\) However, even before the pre-eminent historian of Portuguese decline, Diogo do Couto (1543-1616), for whom, in fact, the _decadência_ theory served as a screen for a merciless critique of the present, the golden age myth of the early period of Albuquerque's rule had been already formulated in 1569 by the Archbishop of Goa, D. Jorge Temudo (1567-1571).\(^{96}\)

Something had gone viciously wrong with _Estado da Índia_ and the Portuguese, according to Temudo. Christian faith, justice and good customs were all in danger of being irreparably lost, without a profound "reformation (_reformação_""). He portrayed a political system based on financial corruption, violence and lawlessness. Moreover, from captains to governors, they were ready "to favor infidels" in order to satiate their greed and their personal interests. Among the most pernicious customs that came under the Archbishop's merciless condemnation was idleness (_ouciosidade_), which led to concupiscence and finally to the loss of martial warrior virility, so much extolled during Albuquerque's conquest of infidel territories and necessary for the defense of the _Estado_.\(^{97}\)

Orta's medical knowledge acquired from non-Christian physicians and, as he himself admitted, especially intended to help men and women in sexual encounters


\(^{96}\) Wicki, José, S.J., "Duas Relações sobre a situação da Índia Portuguesa nos anos de 1568 e 1569", _Studia_, no. 8, Lisbon 1961, pp. 123-221.

\(^{97}\) Vertu is etimologically related to vir (Lat. male person).
(coito), seems particularly out of place in Temudo's scheme of national regeneration. What was needed was efficient policing geared to reform the body of society, rather than a herbal remedy to cure an individual body. In 1569, when Temudo wrote his letter, Orta had been dead for a year and his sister Catarina and the other members of the family came under attack from the Inquisition. Under torture, they all admitted that he had been a crypto-Jew, which led to his post-humous process and the auto-da-fé of 1580.98 And one thing was certain, by 1569 the New Christian physicians, like Orta, who were the majority among the European-trained medical practitioners, were mostly discredited in Goa.

The persecution of the New Christians in Goa was both a belated reflex of the Inquisitorial clean-up in Portugal and a specific local situation in which a combination of various factors seem to have enhanced each other more than anywhere else in the Portuguese colonies: the financial and political crisis of at the middle of the sixteenth century; the arrival of the Jesuits and other religious specialists, armed with a combative post-Tridentine Catholic vision, supported by the Portuguese crown; a specific colonial situation with various non-Christian peoples under its jurisdiction; the opulence and success of New Christian merchant communities and their suspected ties with other Jewish merchants; the sense of an ambiguous, both desirable and uncomfortable, distance from the European world and the emergence of a xenophobic mentality arising from the minority standing of the Portuguese in the large society in India and Asia. All these reasons, spelled out clearly or unself-consciously, would be ultimately funneled into the grind of the Goan Inquisition.

Read against the background of mounting persecution, Orta's book was a final and heroic effort to turn the tide of history backwards. In the same year, 1563, all Brahmans and other gentile physicians (medicos gentios)."who were prejudicial to Christianity" were ordered to leave Goa within a month.99 The first Church Council of Goa, held in 1567, issued a prohibition against allowing non-Christian physicians, midwives (dais or daya) and barbers to cure or shave Christian patients or clients.100 How inefficient or lightly were these prohibitions taken comes out clearly from subsequent, even stronger, interdictions issued by the Third (1585), Fourth (1592) and Fifth (1606) Church Councils.101 Even if these laws "for conversion and in favor of Christianity (sobre a conversão e favor da Christandade)" targeted the gentile and infidel doctors and paramedics, the New Christians were considered to be more pernicious for Christian health.102 As the Inquisition started its deadly spiral of denouncement, confessions, judgements and auto-da-fé, fears of New Christian revenge for the violence wrought on them multiplied accusations and fed into the inquisitorial machine. As a passionate Archbishop, Gaspar de Leão Pereira, wrote to the Jews in his Letter of the Archbishop of Goa to the People of Israel who still follow

98 Reportorio geral de tres mil oito centos processos, que sam todos os despachados neste sancto Officio de Goa, & mais partes da India do anno de Mil & quinhentos & secenta & hum, que começou o dito sancto Officio até o anno de Mil & seis centos & vinte & tres, cõ a lista dos Inquisidores que tem sido nelle, & dos autos publicos da Fee, que se tem celebrado na dita CIDADE de GOA. Feito pello licenciado Joaõ Delgado Figueryra do Dezembergo da sua Magestade, Promotor & Deputado do dito sancto Officio. Sendo Iquisidores os senhores Francisco Borges de Souza & Joaõ Fernandes de Almeida, ANO de M.DC.XXII, Biblioteca Nacional, Lisbon, Res. Cod. 203, fl.360v.
99 Carta do V. Rey Dom Francisco Coutinho, Conde do Redondo, mandando comprir outra da Sua Alteza para lançar fora de suas terras os bramanes e gentios, que impedem a christandade, in Rivara, J.H. da Cunha, Archivo Portugues Oriental [henceforth: APO], (Nova Goa, 1865), New Delhi reprint, Fasc. 5/2, p. 543-545.
100 O Primeiro Concilio Provincial celebrado em Goa no Anno de 1567, in APO, fasc.4, p.25.
101 APO, fasc. 4, pp. 132,176, 263-265.
102 APO, Fasc. 5/2, p. 543-545.
the Law of Moses and the Talmud because of the deception and the maliciousness of
their Rabbis, printed in Goa 1565 as a preface to the translation of another fifteenth-
century homily against Judaism written by a physician and converted Jew, Hieronimo da Sancta Fe:

Is there any other infirmity & greater misadventure than yours? It lasts already two
gthousand years, & two thousand millions of souls died of this illness. The proper
time for remedy has expired, in which a great number of your ancestors cured
themselves and profited from the doctor (medico) when he came, & and those were
the principals (principaes) of the early Church. You remained sick, suspicious of
all doctors, the law tells that you will die of this infirmity [...]. The prophets think
of you as dead, although long ago they prophesized your health".103

Judaism was an illness which had to be cured is the point Dom Gaspar Leão Pereira,
made as if talking directly to the Jews. Printed in the same press two years after Orta's
Colóquios, one of its aims might have been to dwarf any special claim to medical
expertise by the New Christian doctors. Christian faith is the only remedy, Christ is
the ultimate doctor of souls (médico das almas).

Building Trust: Jesuit Medical Mission

Orta's mid-sixteenth-century celebration of the secular, ever adaptable world
of Portuguese overseas colonies, which turned out to be mostly the stuff of his own
dream-work, gave way in the second half of the century to a different definition of
"medical" service and to a different solution for curing the ailments of Portuguese
Catholicism in the tropics. Unlike Orta, who trusted only his own eyes, his own taste
and touch and based his medical experience as much as possible on observing local
illnesses and local remedies, the members of the Society of Jesus, the "doctors of
souls", arrived in India (1542) with a more coherent and efficient, but also blinding,
shaf of prefabricated rules, regulations and mental frames. This is not to say that they
did not apply them in a variety of ways and, at times, with far from ordinary
sensitivity and superior intelligence. Even then, when they agreed to disagree, the
space of innovative Jesuit maneuvering was restrained by the fact that their ultimate
raison d'être was the conversion of the world. Various subsidiary activities of the
Jesuits, such as the works of mercy (opera caritatis), educational institutions and the
like, were important but were pursued only as means to an end. Hence, some of them
were dropped when considered unnecessary or if they overlapped too closely with
similar or rival secular institutions. Extremely ambitious in its social involvement, the
Society of Jesus experienced a chronic shortage of personnel and the Jesuits were
more often than not sent as task forces on an ad hoc basis to hospitals, orphanages, or
to any other institution or place where their services were needed. This is more or less
what happened with the case of the Royal Hospital in Goa. But let us start from the
beginning.

According to canon law, religious and priests were not allowed to practice
medicine without special papal dispensation. The Jesuits did obtain one, Unigeniti Dei
filii, in 1576, with the stipulation that Jesuit doctors were to be employed in the case

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103 Jeronimo da Santa Fe, Tratado que fez Hieronimo, medico do papa Benedicto XIII. Contra os
judeus: em que proua o Messias da ley ser vindo, (preceeded by the Archbishop, Frey Dom Gaspar de
Leão Pereira's letter to the Jews: Carta do primeiro Arcebispo de Goa ao Povo de Israel seguidor
ainda da ley de Moyses, e do Talmud por engano, e malicia dos seu Rabbis), Impresso em Goa por
João de Endem, por mandado do senhor Arcebispo da India (19/9/1565). Biblioteca Nacional, Lisboa,
Res. 411P, p. 2.

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of shortage or lack of secular doctors. Even without the papal exemption, the Jesuits were able to provide medical help by way of a special grade or office among its members, the so-called "temporal coadjutors". Not ordained priests, these were employed in low-status and menial jobs like cooking and washing, although some of them were painters, surgeons, pharmacists, nurses, etc. One of the most famous surgeons in Goa, Pedro Afonso, who started his career in 1560 in the Hospital of the Poor Natives, "attached" to the Jesuit College of Saint Paul, was a temporal coadjutor. Although these were "uneducated" members, that is, without sufficient knowledge of Latin and theology, and very often recruited from lower social strata, they were encouraged and allowed to use their skills "for the greater glory of God", just like "spiritual coadjutors" and the "professed" fathers, the highest priestly grades within the Society.

From the inception, therefore, what Ignatius of Loyola had in mind for his religious order was to organize it as a "machine", with every member assigned to his own place according to his talents, qualities and usefulness. In his early work, the *Spiritual Exercises*, Loyola proposed a spiritual technique, by using prayer and meditation, for regenerating the human soul deep in the abyss of the self, and thus enabling the individual to make the right choice with full freedom of mind and under divine inspiration.104 In the opening pages we read that the purpose of the exercises is "to prepare and predispose our soul to rid itself of all its disordered affections and then, after their removal, to seek and find God's will in the ordering of our life for the salvation of our soul".105 The first and foremost illness of one's body was located, according to Loyola, in the soul in which disordered affections bound the individual to sin and demonic illusion. His spiritual diagnosis and therapeutics were in perfect accord with, and influenced by Galenic humoral theory in which affects or passions were humors of the soul and any excess of one or the other humor resulted in illness.106

Although a flexible and porous text, because it was not meant to be read but to be acted, the *Spiritual Exercises* teach inner discipline, self-abnegation and obedience to the rules. And these rules come from the higher authority located in a hierarchy of fathers, superiors, directors, generals, popes and all the way up to the extraterrestrial will. But, conversion, as this inner metamorphosis is also called, was not enough for to become a Jesuit. A complementary foundation text for the members of the Society of Jesus was the *Constitutions*, which Loyola wrote and re-wrote from the day the Society was approved by the Pope, in 1540, until his death in 1556. It was not simply a detailed instrument of governance, or a collection of ordinances comparable to the Rules (*Regulae*) of the older religious orders, but closer to a grammar of the language of power. The *Constitutions* is a self-fashioning manual, teaching its readers, who are at the same time its subjects and its objects, how to face authority. Although mirroring the monarchical and aristocratic model of power distribution, the authority in the *Constitutions* is a flexible structure geared at practical efficiency and pragmatic

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104 The right choice, or in Ignatian vocabulary, the election, the discernment of the mind is staged as a multiple dialogue between the divinity, the director of the exercises and the exercitant.
106 That the need to evaluate and know psychological make-up of each and every member of the Society was of utmost importance and it is confirmed in the introduction of the system of triennial catalogues. Hence, from 1580 each Provincial was to produce every third year a catalogue in three volumes. Demoustier, Adrien, S.J., "Les catalogues du personnel de la province de Lyon en 1587, 1606 et 1636", *Archivum Historicum Societatis Iesu* [henceforth, AHSI], 42 and 43, 1973 and 1974; Lamalle, Edmond, S.J., "Les Catalogues des provinces et des domiciles dela Compagnie de Jésus", AHSI, 13, 1944
rationalization. Never loosing sight of the ultimate plan and purpose of the order - the redemption and the salvation of humanity -, Jesuit ministries, as varied as they were and often considered to be walking precariously on the razor edge of orthodoxy, possessed a clear sense of overall direction. In a word, the rules could also be twisted "for the greater glory of God".

In the overseas missions in India and Asia this multi-layered and flexible approach to authority was a blessing and, ultimately, proved to be a curse that caused the Society of Jesus to be dismantled in the eighteenth century. The tropical Catholic communities in Goa and in other Portuguese enclaves in the sixteenth century, especially "profited", in the spiritual and social senses, from the Jesuit impulse to uniformity, psychological undergirding and eschatological certitude. When John III, the King of Portugal, sent Francis Xavier and his companions to the East Indies in 1542, he had just that in mind.

Jesuit Corporeal Politics: Martyrdom

The Jesuit conception of the body was not unlike Orta's. The body was considered as potentially adaptable to places and circumstance. This was alluded to in the portrait of an ideal Jesuit and his qualities in the chapter of the Constitutions in which Loyola discussed the modalities of admission to the Society. Pleasing appearance, health, strength, intellect were all required in Jesuit candidates, although exceptions could be made, "if it is judged in the Lord that this lack is compensated for by his other qualities." When individual members were not completely adaptable, a proper personnel politics could rectify the problem by choosing those who were strong for services or missions where "greater bodily labors" were indispensable, or by sending a "cultivated person of talent and learning" to work where he was needed. As a body composed of individual members, the Society of Jesus was the most adapted to face the unknown socio-ecological frontiers opened up by Iberian naval expansion in the sixteenth century.

Although the Jesuits trusted the Galenic humoral medical theory and therapeutics, probably even more than did Orta, in their overall soteriological scheme, corporal health was far under-valued compared to the spiritual health. This did not mean that the body should be allowed to wither away under contemplative practices or under emaciating austerities associated with old ascetic and conventual orders. On the contrary, a Jesuit life was precious and had to be conserved as long as possible by physical exercises, rest, healthy diet and moderation in everything. "Temperate restraint in spiritual and bodily labor and similar moderation in relation to the Constitutions, which do not lean toward an extreme of rigor or toward excessive laxity (and thus they can be better observed) will help this entire body to persevere in its good state and to be maintained in it".

109 Constitutions, Part IV, ch. 2, para. 624.
110 Constitutions, Part VI, ch. 3, para. 582.
111 Constitutions, Part X, para. 822.
Heroic individual feats, especially martyrdom were not whole-heartedly encouraged, as this was suspected of being reckless and wasteful behavior. In the light of a hagiographic history or an edifying letter re-telling a recent death in the field, regardless of whether it qualified for red or white martyrdom, Jesuit martyrs were cherished and their deeds amplified to suit European readers and to boost the spirits and expectations of the young novices and other members. The Jesuit argument was that there was nothing intrinsically bad in dying as a witness of faith, in the manner of an early Christian saint, but that it was even better to exercise "discretion" and prudence and preserve one's body for more strenuous work. In fact, each case of martyrdom was looked into by the Jesuit authorities in order to discern whether the death could have been avoided, or was inevitable and thus divinely inspired. The first death of a member of the Society in India, Antonio Criminali, who had been struck by an "infidel" hand, was judged imprudent in spite of a torrent of enthusiastic letters about his courage.

Circuitously, descriptions of scenes of martyrdom and of tortured and fractured bodies serve as one more proof of Jesuit adaptability. Staged as a providential, but temporarily tragic battle between forces of good and evil, martyrdom was the surest inscription of the Christian message on the pagan landscape. The blood spilled on the ground becomes a fertile compost for the new Christian vine, according to the Jesuit historical imagination employed to make the best of an otherwise complicated issue. In the same way, local religious folklore in Salsete, south of Goa, where the second and more important martyrdom occurred in 1583, accorded a special place to the spilling of blood. Martyrs, just like any other type of martial heroes, were easily translated into the tutelary deities of particular lineages and clans. In the seventeenth century, the blood of a Jesuit missionary, João de Brito, would transform the color of the sand into terra-cotta red. To this day, it is reputed to have thaumaturgic qualities and is taken away as a relic from Oriyur by the pilgrims.

Before the Jesuit martyrs left their blood and bones in the soil, European relics were steadily imported. We read about them on the ships where they helped to calm the stormy weather and turbulent seas. They were paraded in processions or, in the last moment of extreme danger, thrown into the sea. All these and similar rituals marking, as some would say, the possession of space, appear as favorite topoi in the literature of maritime disasters, in Jesuit correspondence and in hagiographic histories and paintings. Just as Portuguese "discoverers" planted memorial columns (padrãos) along the coasts of their maritime passage, as an exaggerated token of their presence and their claim to proprietorship of the land, Jesuit bodies, alive and dead, were planted with a similar end in mind. Moreover, Jesuit sanctity grew and flourished in the tropics and became part of the social landscape, to the point of resisting centralizing efforts of the Roman curia, as the scramble for Francis Xavier's relics clearly revealed. Except for Xavier's right hand, chopped off and sent to Rome in 1614, where enshrined in a reliquary it consecrated the side chapel of the Bom

\[\text{Ines G. Županov, CNRS, Paris}\]
Gesù church, the Body, as Xavier's relic is locally called, remained encased in the Bom Jesus in Goa.

In a word, the Jesuits took bodies and their material qualities seriously, but for a different reason than Garcia de Orta. Bodies were so many clay tablets on which the divine impressed signs of wonder, prophecy and miracle. The duty of humans was to read them carefully.

**Providential Signs: The Origin of Disease**

Illness, disease and suffering were also divine signs and the result of the sinful human condition. The church fathers had belabored this basic medical fact and the Jesuits believed in it as much as Christians, of all denominations. In the missionary field in Asia, opened up by the Jesuits, disease acquired an additional meaning not unknown in the history of Christianity, that of an ordeal and a divine test. Hindu religious practices and Islam had already been associated with illness, placed within close range of the demonic, the reverse side of the saintly. With a plethora of tropical parasites against which Europeans had no immunity, and which impressed with their virulence and an inevitably deadly results, it was not difficult to attribute disease to a malicious otherworldly agency.

Although the Portuguese studied and learnt quickly the way in which to cure the diseases locally, not all methods were acceptable. In addition, besides these "curing" techniques adopted by Portuguese physicians or adapted to their own medical practice, there were certain ritual performances widely used in the villages around Goa. They consisted in propitiating the goddess Durga, who was considered responsible for the illness in the first place. Offerings such as flowers and coconuts, flags and iron, as well as fire sacrifices were involved in this ritual healing geared to annihilate the curse which was believed to be the first cause of the illness. When the end of the patient drew near, he was escorted with all the honors (of a corpse) into the high see and left to float until death.

From other parts of India, Jesuit missionaries reported similar cases in which the connections between healing and superstition were highlighted. On the Fishery Coast, in the mission among the Parava pearl-fishing lineage, technically the first Jesuit mission in India where Xavier spent two years in the mid-1540s, these ritual methods of healing were branded as downright demonolatry. Manuel de Moraes gave a condensed, caricatured and simplified description of the major ritual instruments and practices in this southernmost region of the Tamil country. When they, the gentiles, fell sick or were dying or a woman was about to give birth, "they promised to the devil (dyabro) in the temple (pagode) a certain amount of fanams (fanõis) and that they would construct another temple". Since paganism was perceived as an imposture, a reverse image of Christianity, what appears familiar in this accusation, the fact that Christian religious specialists proceeded in exactly the same manner, was considered precisely the most menacing. This is not so much the case with what follows, which is a jumbled description of various forms of cultural practices associated with the temple ceremonies:

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116 Manuel de Moraes to the members in Portugal, Cap Comorim, Dec. 15, 1547, ARSI, N.N. 66 I, f. 226v.
"It is a custom here to rub oneself with oil and to wash the body, as do the young
black there (?), when they are washed they clean their teeth, then they smear
themselves with sandal [paste or powder], because it smells good; they cook a lot
of food and they bring many goats and near the temple they kill them and offer
them to the temple as well as the money they had promised; the Brahmans and
some gentiles do their ceremonies (crymonyas), and one man makes himself into
a figure of a demon, saying that he would cure and facilitate the birth; [there is]
loud drumming and feasts, much painted cloth; and the one who made himself into
the devil (diabo) […] appears like the real demon."\(^{117}\)

There is only a thin line separating impersonating and becoming a devil. Jesuit
missionary reports vacillated between crying devil and pointing to the imposture.
Possession and trance, that is, the descent of the deity into the body of a worshipper,
is one of the most important features of the South Indian religious mentality. It is
present in a wide spectrum of religious practices, from low-caste worship, exorcism
rites for expelling demons from pregnant women, to Brahmanical worship in major
temples.\(^{118}\) Although most ethnographers and students of religious studies agree that
possession in India is about personhood, which is a result of multiple renegotiations
between the individual and the collective self, they tend to disagree on just how it
works and what its meaning in particular cases is.\(^{119}\)

For Jesuits, possession was either the work of a trickster who intentionally
fooled ignorant people for money, or a downright diabolic intervention. One of the
important activities, according to missionary letters, was exorcising demons from
newly converted Christians, neophytes, catechumens and those non-Christians who
came to ask for "medical" help.

Depositions of witnesses who testified at various canonization processes
organized throughout Portuguese Asia shortly after Xavier's death are all narratives
of his thaumaturgical healing powers, from exorcism, curing infertility in women, to
resurrection.\(^{120}\) More than two hundred people from Goa, Bassain, Kochi, Kollam,
Melaka, and from the Travancore and the Fishery Coast spilled out their secrets,
hopes and tribulations at an official inquiry. These miraculous stories were written
down in detail by local topazes or línguas (interpreters). From the transfer of these
stories from their oral and bodily presentation onto the palm-leaf manuscripts in
Tamil written by a topaz, to their final translation and abbreviation in Latin in order to
be presented to the Congregation of Sacred Rites in the early seventeenth century, all
cultural sap was drained out of them and they were transformed into tombstone
inscriptions. Nevertheless, they eloquently remind us that, although Paravas converted
en masse almost a decade before the arrival of Francis Xavier (1542) for political
reasons, it was because of his healing methods that they allowed Catholicism to help
them reformulate their social body. Jesuit priests were thus perceived as endowed
with special powers, just as were Muslim fakirs, Hindu yogis and various other

\(^{117}\) Manuel de Moraes to the members in Portugal, Cap Comorim, Dec. 15, 1547., ARSI, N.N. 66 I, f.
226v.

\(^{118}\) See Feeman, Richard, "Dynamics of the Person in the Worship and Sorcery of Malabar",
Parusārtha, 21, 1999.

\(^{119}\) See various articles in Assayag, J. and Tarabout G., eds., La Possession en Asie du Sud; Parole,
Corps, Territoires, Parusārtha, 21, 1999.

\(^{120}\) Monumenta Xaveriana ex autographis vel ex antiquioribus exemplis collecta. Scripta varia de Santo Francisco
Xaverio, Matriti, 1912, vol.2.
religious specialists, who all proposed or promised health and prosperity in exchange for money, prestige, political authority, etc.\textsuperscript{121}

There is also ample evidence that Jesuit faith-healing techniques and instruments intrigued and attracted non-Christian healers. The cross, the Bible or the book of prayers, the holy water and the burning of oil in the church were all taken to have curative qualities. Some of the native healers ultimately converted to Christianity after having lost confidence in their own powers. Some, on the other hand, probably converted partly for practical reasons, that is, to be able to keep their jobs in Goa among the growing Christian population. Thus, Luís Fróis mentioned a family of Muslim physicians in Goa, two brothers of which converted to Christianity in 1560, while their father remained Muslim under pretext of not wanting to desert his Muslim wife.\textsuperscript{122} It is difficult to speculate what conversion actually meant to these Muslim physicians. Whatever the case, they probably followed their sense of pragmatic urgency rather than any fundamentalist or ideological inclination. When, in spite of all display of Christian medical mystique, the native physicians did not show any sign of losing their superstitious faith, there were other methods to be used. Henrique Henriques's complained a few times in his letters about native non-Christian physicians "who do not cure with remedies in which God deposited the [healing] virtues", but with superstitious prayers to false pagan gods.\textsuperscript{123} He repeated a similar complaint from his mission on the island of Manar between the South Indian coast and Sri Lanka,

"And because we know that the physicians who cure make war on us, because many of them cure with words and other worse things [...] we ordered them to join us in the house every Saturday in which we tell them how to cure and other things they need to know for their souls. After having done this for some weeks we ordered them to come every fifteen days."\textsuperscript{124}

If grace was a necessary and indispensable chemical element that changed hearts, the closely supervised use of time was probably as efficient. Strict time management produced coherent routine, which then absorbed the sense of direction to otherwise messy social realities. The famous and often-mentioned methodical approach of Jesuits to social and natural phenomena is perfectly visible in their missionary field. Nowhere could one observe better, as in some alchemist laboratory, the formulas of social engineering and cultural transformation than in those clearly bounded mission

\textsuperscript{121}Although Jesuits did everything to combat and estrange these local healers, they were willing at times to test their remedies. In 1561, Henrique Henriques, asked for permission to try out local medicine (mezinha) used by jogues, because it was reputed to fortify the body, without mortification, against the "appetite coming from sensuality". The then General of the Society of Jesus, Lainez, responded a year later from Trent – where he participated in the closing sessions of the Church Council -, without offering any decision and leaving the whole matter in hands of the Jesuit Provincial in India. With the election of Francisco de Borja to the office of the General (1565-1572) and with the tightening of the post-Tridentine religious environment, using pagan medicine became unimaginable. He stiffly ordered the Provincial in Goa, António de Quadros, to leave "the medicine for chastity" to the "bonjes", obviously confusing the name used for the Japanese Buddhist priests with the jogues from Henriques's letter. What the metropolitan injunction implicitly prohibited was any kind of comensurability between a Jesuit body and that of a pagan religious specialist. Controlling one's sexual impulses was (and Borja had in mind just that) the result of choice, will and grace, at least for those who sought membership in the Society of Jesus.Henrique Henriques, to Diogo Lainez, Mannar, Dec. 19, 1561, ARSI, Goa 8 II, f 294r. Diogo Lainez, to Henrique Henriques, Trent, 12 Dec., 1562, DI, V, p. 661. Francisco Borja, to António de Quadros, A. de, Rome, 29 Nov., 1565, DI, VI, p. 526

\textsuperscript{122} Luís Fóis to a brothers in Coimbra, Goa, Dec. 1, 1560, Biblioteca de Ajuda, Lisboa, Ulyssiponensis 2, f.210v

\textsuperscript{123} Henrique Henriques to the General in Rome, Manakkudi (near Kanniyakumari), Jan. 13, 1558, ARSI, Goa 8 I, ff.148v-149r

\textsuperscript{124} Henrique Henriques to Diogo Lainez (the General), Mannar, Dec. 24-Jan. 11, 1564, ARSI, Goa 8 II, f.422v.
places in southern India where Jesuits patiently carved and engraved the coordinates of time and space against what they thought was the ever-encroaching pagan chaos in the background.

Health as Order and Discipline

Francis Xavier is reputed to have founded some forty or more churches on the Fishery Coast, from Vembar in the north to Kanniyakumari on the southernmost tip of the Indian peninsula. These were no more than palm-leaf provisional structures, but they marked the point of special potentiā, the intersection of human and divine, and a miraculous window to an invisible presence of the supernatural. The churches and the giant crosses in front of them, made out of black varnished wood and lodged into and supported by white-washed stones, were not simply terrestrial antennas for catching divine cosmic energy, they were rather power plants of human relations and social articulation. Although during his first stay among the Paravas, from 1542 to 1544, Xavier traveled incessantly from one part of the coast to the other, without staying for a longer time in one place, the churches and chapels were left under the supervision of the prominent Parava catechists. These in were often recruited from or became the chief overseas, pattankkatti, of Christian communities. The head overseers of the Paravas, the patangatin-mōr in Portuguese or jāti talaivar in Tamil, resided in Tuticorin [Tūtūkkūt] and the hereditary holder of this office was later to become a Tamil "little king". The new order imposed by Xavier and his successors, such as Henrique Henriques who arrived to this mission in 1547 and was buried in Tuticorin in 1600, consisted in imposing uniformity in ritual and cult observances, especially geared at confession and the sacrament of penance, and in empowering the traditional caste notables as executive officials subject to the "spiritual" guidance of the missionaries. Through inner and outer regeneration, Jesuit priestly sponsorship then ultimately enhanced the Parava sense of separate identity and caste solidarity.

The success of the mission among the Paravas was not simply a triumph of Jesuit social engineering, but also the result of a combination of geographical, social and political factors. In different contexts, say in Japan, in the mission at the Mughal court or in Monomotapa, the contingencies of local politics brought the situation out of control. In spite of the inevitable setbacks, however, the Jesuits were still the most influential missionary order, because unlike other zealous missionaries in the sixteenth century, Franciscans and Dominicans and other ecclesiastical figures, they not only had the general plan, but also the method. In fact, this method was a work in progress chiseled out and tested through experience. In their gigantic correspondence from all over the world to Rome and vice versa, made mandatory by the Society of Jesus, the Jesuits created a forum for exchanging ideas, comparing notes and taking concerted decisions on a scale that had not been seen before.

According to the Formula of the Institute of the Society of Jesus, the first program among the Jesuit ministries was: ministries of the Word, of the sacraments

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126 On the concept of little king in Tamilnadu see Dirks, Nicholas, B., The Hollow Crown; Ethnohistory of an Indian Kingdom, Ann Arbor, 1993. See also a very informative article by A.Sivasuppiramaniyan, Paratar kalve tuc ceytikal (Parava Inscriptions), (xerox copy, no publisher, no date).
and of works of mercy. This pastoral triad based on late-medieval catechesis and institutions of southern Europe (Spain and Italy) was complemented by the second program of taking Spiritual Exercises in a secluded place, a "retreat" for a month (or less) under a spiritual guide, and the third program of setting up and managing humanistic schools. Each and every program, as it was being developed and maintained, was discussed within the Society in thousands of written pages of manuals with detailed instructions. In addition, learned Jesuit theologians were sent to the provincial residences and colleges to explain these instructions and take note of local ideas, disagreements and special conditions that had to be taken into account in their implementation. It was precisely in their bureaucratic skills that the Jesuits offered the most valuable lessons in administration and management to the secular institutions. Even when the Jesuits moved out of the institutions, their rules and regulations remained. And that was the point.

Jesuits were not the only historical actors obsessed with orders, rules and constitutions. Nor were their normative texts exceptional in their methodology or executive ingenuity. What was new in their conception of order and discipline was flexibility of rules that were to be adapted to circumstances; but once accepted, they had to be obeyed with a religious zeal. Hence, obeying the rules - whatever they may have been and changeable at that - were elevated to a sacramental pedestal. It was as if only through rules imposed from above could one sense the working of the sacred, of "God in all things". Thus, every single repetitive, menial and profane act became a providential work of grace. The seven corporal works of mercy – feeding the hungry, giving drink to the thirsty, clothing the naked, housing the homeless, visiting the sick and imprisoned and burying the dead – ceased to be what they were, that is, hard physical labor, and were conceptualized as "contemplation in action" and participation in the divine salutary plan.

The Hospital of the Poor Natives as the "Soul Fishery"

The most famous Jesuit surgeon in Goa in the sixteenth century, Pedro Afonso, depicted his daily routine in just these terms, that is, as a marvelous exercise in tedious, humbling and difficult service to the sick. He locates his growing sense of importance in a daily "white martyrdom" induced by corporal fatigue and repetition of innumerable tasks. As if moving down the rosary in prayer, Afonso endlessly rushes through the Hospital of the Poor Natives established by the Jesuits near the College of St. Paul, to the Seminary, then to the House of Catechumens and back. At each and every step, his work is portrayed as gigantic. During the consultation time for the outdoor patients, waiting for him every day in front of the door of the Hospital, he complained that "from time to time, I run out of paper for writing prescriptions". In addition, given that he was a lay member of the Society, a temporal coadjutor and not

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128 The Formula of the Institute is an important document, a product of the discussion among the founding fathers in Rome in view of presenting their project for papal approval in 1539. "The Five Chapters", another name of the document, was incorporated in 1540 into Regimini militantis ecclesiae and is considered as a Rule of the Jesuit order. Constitutions, p. 66. O'Malley, J. W., The First Jesuits, Cambridge, Mass., 1993, [henceforth, O'Malley], p. 5 and p. 85 The second program were Spiritual Exercises, practiced in "retreats" and the third program included the schools.

129 Pedro Afonso to the European members, Goa, Dec. 1, 1560, Biblioteca de Ajuda, Lisboa, Ulyssiponensis 2, ff.329-330v. Also published in Carvalho, Augusto de Silva, Garcia d'Orta, Coimbra, 1934, pp. 184-87. Pedro Afonso inherited the Hospital from Misser Paulo Camerino whom he nursed until his death in 1560.
a priest, the burden of managing financial transactions, such as the collection of alms for the hospital, was also his responsibility.

Significantly, Afonso went beyond a simple enumeration of his daily labors and pious exhortations. His is, in fact, the clearest statement of what a Jesuit medical mission in India was, or should have been. The Hospital of the Poor Natives was, in his words, "a fishery of souls" (*pescaria das almas*).

"The procedure and the manner, my dear brothers, by which the Lord brings the souls is the following: first, the native gentiles, when they are struck by illnesses that they cannot cure and have no more confidence in their gods and sorcerers, they come to take refuge among the flock of the Church because of their ailments and out of necessity ".

Among the infirmities he mentioned in his letter, the most prominent were wounds, either inflicted by arms or in attacks by animals or in accidents. Just like Garcia de Orta or Cristóvão da Costa, another New Christian doctor, Afonso agrees that there are also new illnesses, unknown to the "ancient (medical) writers" (*escritores antigos*). To cure these new types of illnesses he placed his trust firmly in prayer to God, and in particular to the "Cosmos Santos" (Cosma and Damian, physicians and Christian martyrs) to teach him and to provide the remedy. Given that his final goal was not necessarily to restore the body to health, but to heal the soul, he worked harder on converting his patients to Christianity than anything else. All cures in the Hospital began with baptism, especially for those who were *in articulo mortis*. For Christians treatment began with confession. 130 The ailing body for this Jesuit surgeon, especially the body broken and torn open, was nothing more nor less than an inscription of disorder caused by gentility and sins. The ultimate cure was, of course, conversion.

From the beginning of the Hospital, founded by Misser Paulo Camerino in 1546, it was clear that it was intended to draw non-Christians into the net of conversion. 131 Behind this propagandist façade, the assistance that the Jesuits provided to the most indigent in Goa was, nevertheless, real and heroic. Some years later, in 1552, Reymão Pereira painted an idyllic image of the order reigning in the Hospital. 132 The beds, mats, and covers could not be cleaner; the reserves of food were copious; the water from the garden well was healthy; the chickens in the yard were destined to feed the sick; female and male patients were separated and located in two different "houses". Some thirty to forty patients were admitted into this little medical utopia. The good example and reputation of this institution, Pereira noted, was such that pious Portuguese chose to die in the Hospital consoled by father Misser Paulo. The governors came in person to visit the place and were "amply consoled to see the respect of good order inside".

It is quite obvious that the Hospital of the Poor Natives in Goa was intended to be more than a common hospital. It was an edifying example of the Jesuit ability to fruitfully and orderly combine the works of mercy with the ministry of the Word. In a similar way, other hospitals on the Fishery Coast and in Japan would in their turn be characterized as marvelous because of the order established in them. The importance

130 It was Ignatius of Loyola who made a campaign in 1543 to reinvigorate an old decree of the Lateran Council of 1215, "*Cum infirmitas*" stressing the healing quality of the sacrament of penitence. Except Rome and some other Italian towns, it seems that it was never universally applied. Tachhi Venturi, Pietro, *Storia della Compagnia di Gesù in Italia*, Roma, 1951, vol. 2, part 2, p. 190-195.

131 *Determinação e asento pera a ordem da casa* (by. Nicolao Lancilotto), Goa, June 27, 1546, ARSI, Goa 22 I, ff. 48v-49r.

given to order indicates that it was perceived as lacking in other charitable institutions and in the *Estado da Índia* in general. At least three other hospitals were mentioned in the contemporary sources, without much enthusiasm for their effectiveness: the Royal Hospital (*Hospital del-Rey*), the Hospital of the Incurables (*Hospital de Todos os Santos* established by the *Santa Casa da Misericordia de Goa*), and the Hospital for contagious diseases (*São Lazaro*). Although information is scarce about the functioning of the last two in the sixteenth century, they did not serve to cure the diseased, but to nurse them until death and, more importantly, to remove them from public sight, lest they contaminate the healthy.

The Royal Hospital probably had the strongest record of curing patients and it was, in fact, intended to do so. Nevertheless, its statistics of success appear to have been less than brilliant and confirmed the adage that one had equal chances to be cured by a doctor, or to be killed by him. In its own right, the Royal Hospital, founded by Afonso de Albuquerque in 1510, was an important institution in Portuguese Goa because it was an exemplary charitable work, a showcase of the royal and official care provided to Portuguese soldiers. In principle, at least, no *mestiço* or foreign men were eligible for admission to the hospital. In terms of prestige and reputation, therefore, the Royal Hospital was to the Viceroyal government what the Hospital of the Poor Natives was to the Jesuits. Reymão Pereira’s statement that the governors came to visit the hospital "to be consoled" appears in this new light as a pragmatic act, rather than a spiritual or pious visit.

What impressed the Governor was what everybody knew Jesuits were good at: organizing time and space efficiently. Although there appear to have been no separate rules for the Hospital of the Poor Natives, since it was considered to belong to the complex of institutions around the Jesuit College of St. Paul, "the general rules of the [Jesuit] house [college]", written in 1552 by Gaspar Barzaeus, are quite enlightening on this point. He "took into account the spiritual advice of Father Master Symão [Rodrigues]" and adapted them "to the dispositions of the country." He objectified and prescribed the smallest gestures - from those of a brother in charge of washing clothes (*roupeiro*), or one in charge of awakening everybody in the morning (*despertador*) – in order to link the sacred and the profane with an invisible bond. In other words, the most humble tasks were associated with a Christsery imagery, and all physical labor was presented as the labor of Christ. Washing clothes became washing clothes in place of Christ, etc.

On the other hand, the repetition implied in these rules was reassuring. A Jesuit nurse (*infermeyro*), for example, had a variety of responsibilities and a precise time schedule. In the morning, before anything else, he had to verify the health of the brothers and inform the doctor. If there were sick persons, his duty was to provide comfort to the patient by ensuring that he was served the special food ordered by the physician, that his room was clean and by simply being patient with him, "in speech and in your example, because this is the principal virtue that you should employ in your office by always imitating Christ among his disciples."

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133 While exceptions were made, women were never admitted. Hospitalizing women was a problem even for the Jesuit Hospital of the Poor Natives and the practice of housing them in the same building was quickly discontinued.

134 O’Malley, p. 249. On the whole the Jesuits did in fact possess a sufficient knowledge of the hospital administration, of the latest methods of hygiene and nursing, both because of the compulsory novitiate "experiment" and because, in this manner, the new recruits had been invited to repeat the gestures of the founding fathers in the hospitals of Venice.

135 The *Spiritual Exercises* to the *Constitutions* are master examples of regulatory texts.

Be careful that their foul smells and their infirmities do not disgust you and make you sick because it is your sins that make you sensible to these smells; Christ was not revolted when he ascended the Mount of Calvary where he washed away your sins.137

In addition, he was responsible for reporting to the physician how much the patient ate and how he felt. He was responsible for keeping clean clothes for the patients in a special chest. And finally, once a week he had to read the rules prescribed for his office.

These rules were, in fact, job descriptions, and in Europe and Rome they were to be found under the title of "Common Rules" important in organizing "the domestic discipline" of the professed house.138 The number of such rules grew almost out of hand as each Jesuit institution, large or small, petitioned to have rules of their own. Jeronimo Nadal, the indefatigable interpreter of the Constitutions, traveled extensively in the mid-1550s in order to shore up enthusiasm for their implementation and to explain and clarify the finer points. However, after visiting Córdoba in 1554, a Jesuit reported that Nadal had left more than three hundred rules and regulations. Eighty of those were destined for the rector, who did not have the time to read them.139

**Jesuit Emergency Sanitary Measures: Epidemics in Goa**

In Goa, Jesuit know-how in rationalizing the administration of things, institutions and humans meant that they were in great demand by the secular authorities. When, in 1570, one of the bairros of Goa was struck by an epidemic disease and more than nine hundred people were infected, it was the Jesuits who brought the situation under control. The center-piece of the report written by a Jesuit, Duarte Leitão, was a detailed presentation of the emergency procedure organized by the Society.140 Significantly, it all began with taking a census of the sick in the affected suburbs (*rol dos doentes que avia em cada bairo*).141 Then, they consulted the gentile doctors who were mostly in charge of these people, before turning to the físico-mór, Dimas Bosque, "a great friend of the [Jesuit] house" (*grande amigo da casa*), who, incidentally, had aslo been a good friend of Garcia de Orta. Finally, they recalled Pedro Afonso, who had moved to the Salsete region in the south of Goa following the transfer of the Hospital of the Poor Natives. The efficient and systematic organization of Leitão's report appears to correspond to the public performance of the Jesuits in a health emergency.

First he discussed the causes and proposed various explanations based on the humoral conception of the disease.

"Different causes are proposed for this disease. The majority said that it was due to corrupted air because an elephant died there and they left it rot without removing it, and the foul smells corrupted the air and provoked this pestilential disease (*doença como peste*). In the beginning, it started with fever and then

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139 O'Malley, p. 338.

140 Duarte Leitão to the members of the Portuguese province, Goa, Nov. 16. 1570, Biblioteca Nacional, Lisbon, *Fundo Geral*, 4532, ff, 80r-83r.

141 Duarte Leitão to the members of the Portuguese province, Goa, Nov. 16. 1570, Biblioteca Nacional, Lisbon, *Fundo Geral*, 4532, ff, 81v-82r.
swellings appeared and the sick became yellow and dropsical, and in the end diarrhea killed them in a few days.”

At the end of the epidemic and the Jesuit efforts to curb it, and at the end of Leitão's narrative, a surge of surreal and divine concluded the story. As if borrowing another voice, the Jesuit correspondent reassured his audience that the forces from the other world watched carefully over the actions of the puny terrestrial actors and that everyone recognized the touch of sanctification in this whole affair. The people (povo) were astonished not only "at our familiarity with the sick given that the disease was contagious", but also at the fact that none of the Jesuits had fallen sick. "It appeared that this exercise of our Lord redoubled our forces."}

With hindsight, a century and half later, Francisco de Souza, a famous early seventeenth-century historian, situated the epidemic in the larger context of the ecological and social decadence of the capital city of the Estado da Índia. It was one of many contagious epidemics with high mortality that followed in the wake of wars, sieges and famines which regularly punctuated the late sixteenth and the whole seventeenth centuries. Worst of all, according to this confident and assertive Jesuit apologist, the 1570 epidemic was a straightforward symptom of social malaise and of vitiated ties of solidarity. By combining different reports, Leitão's included, Souza condemned the social customs in Goa as aberrant, barbaric, and against "natural law" and "against the Bible". The owners abandoned their sick slaves on the streets and, thus, into the hands of the Jesuits who nursed them, enfranchised them, baptized them and buried them. Another proof that social relations were going from bad to worse was, according to Souza, the disappearance of the Tribunal da Mesa da Consciencia, established in 1570 by the archbishop and by two Jesuit fathers, António de Quadros and Belchior Nunes Barreto: "since it was about conscience, it could not have lasted in India where conscience is more easily broken than stomachs".

Monastery or Prison: The Royal Hospital in Goa

The Royal Hospital in Goa was one of the fields of Jesuit apostolic action. They kept temporal and spiritual hygiene in this important Portuguese institution, marred otherwise by incompetent management and corruption. It has been said that the funds provided from the royal revenues in Asia were siphoned away, from the highest official in charge, the mordomo, to the washerman. Thus, from 1578, the Jesuits intensified their "help" because of the growing number of diseased and, when some three hundred died in the Royal Hospital due to lack of care, the Viceroy ordered the Society of Jesus to take full charge of it. It is quite certain that this put additional strain on the members, and some like Giovanni Battista de Loffreda, a talented physician, but short-tempered and conceited, expressed loudly their

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142 Duarte Leitão to the members of the Portuguese province, Goa, Nov. 16. 1570, Biblioteca Nacional, Lisbon, Fundo Geral, 4532, f.82v.
143 Duarte Leitão to the members of the Portuguese province, Goa, Nov. 16. 1570, Biblioteca Nacional, Lisbon, Fundo Geral, 4532, ff. 82v-83r.
145 Souza, I, I, 39.
146 Cristóvão de Castro to Claudio Aquaviva, Cochin, Jan. 5, 1582, ARSI, Goa 13 I, ff. 104r-105v.
147 Gomes Vaz to Mercurian, Goa, Oct. 20, 1578, ARSI, Goa 31, 404v-405r. The Governor Dom Diogo de Menezes ordered each religious order to serve in the Royal Hospital for a month.
Nevertheless, the Provincial, Ruy Vicente, accepted the charge temporarily ("ad tempus") because the general policy of the Jesuits was to obey secular heads, especially the Viceroy of the Estado da Índia, the highest Portuguese authority in Asia.\(^{149}\)

However, what looked like a temporary service lasted intermittently for a century and a half. It was the Royal Hospital, not the Hospital of the Poor Natives, that became the most famous Jesuit "medical mission" in India.\(^{150}\) "It is such a great work", wrote Cristóvão de Castro to Claudio Aquaviva in 1582, "and such a great service to Our Lord and on it depends the spiritual and temporal good of all India, because the lives of men depend on it, that is, of almost all soldiers.\(^{151}\) Soldiers' lives depended, in fact, on the military discipline enforced by the Jesuits. Their pre-modern technology of health, a combination of prescribed diet, unreliable medication and religious healing with sacraments, relics and holy objects, made sense and produced the psychological undergirding only when applied with absolute assurance. Besides, the subjective effects of discipline, the maintenance of rigorous hygiene and financial responsibility objectively improved health care in the Royal Hospital. When, in 1583, the Jesuits finally hoped to pass back the administration to the Misericôrdia, which had been in charge until 1579, they wrote a comprehensive new Regimento for the Hospital. The internal organization of the hospital, according to these rules, was to be structured along the lines of efficiency, security and trust, that is, the Hospital was conceptualized as an independent fortress of medical mystique, an extraterritorial space with *sui generis* jurisdiction. Or, at least, that was the point the Jesuits were making. Thus, the art of curing became the art of managing the patients. Two basic principles underscored the social conditions of healing, according to the Regimento: 1) the smooth repetitiveness of medical or paramedical gestures inscribed in time (every morning, every day, every week, every year), and 2) a strict division of tasks and offices among the hospital personnel.

In the opening of the first chapter, the order in the Royal Hospital is unambiguously linked to the health and life of the Portuguese in Goa. "Because the life, and health of the sick depends much on a good cure, and on its order: the order that should be kept in the Hospital every day is the following".\(^{152}\)

What follows is a busy time-table of work for just about everybody, patients included. The day began at five o'clock in the morning with church bells and the first Mass, where all protagonists of the daily drama met: the superintendent (*mordomo*), the nurse (*enfermeiro*), the priest or a chaplain (*Padre ou capelão*) the registrar (*escrivão*), the physician (*médico*), the surgeon (*cirurgião*), the pharmacist (*boticairo*), the overseer (*vedor*), the doorman (*porteiro*), the barber (*barbeiro*), the purchaser (*comprador*), the baker (*padeiro*), the washerman (*mainato*) the servants (*servidores*), and other occasional helpers. Each and every step of these actors is then followed almost hour by hour, as they visited the sick, prescribed and prepared medicine, ordered special food, supervised the cleaning of the hospital, attended to


\(^{149}\) Ruy Vicente to the General, Goa, Nov. 13, 1579, ARSI, Goa 12 II, f.497v.

\(^{150}\) With every new Portuguese Governor or Viceroy, the Jesuits tried to relinquish their charge of the Royal Hospital. It was considered by all, especially by the General Claudio Aquaviva, that temporal administration of the Royal Hospital was against the Jesuit Constitutions. See Ruy Vicente to Claudio Aquaviva [Annuário], Goa, Nov. 8, 1581, ARSI, Goa 32, f. 445r.

\(^{151}\) Cristóvão de Castro to Claudio Aquaviva, Cochin, Jan. 5, 1582, ARSI, Goa 13 I, ff. 104r-105v.

\(^{152}\) APO, Fasc. V/III, p.1006.
newly arrived patients who waited on the veranda to be examined and confessed, and so on. The busy rhythm of the Hospital activities was punctured by two meals, lunch at nine in the morning and dinner at five in the evening, and the cleaning of the chamber pots at eleven and three in the morning. Three times a week all the beds were to be thoroughly washed and fragrant substances burnt in all rooms in order to chase away foul smells.

Besides these instructions concerning the daily schedule, the Jesuits also provided a calendar of yearly expenses. Depending on the arrival of merchant ships either from Portugal or from the East and South East Asia, officials were to buy food-stuffs and medicine to be used later. The reason for the planning of Hospital provisions in advance was that those things were "better and cheaper" when bought at the right time. In September and October, Portuguese wine, olives and vinegar were bought from India-bound ships; in March and April, rice, sugar and wax were bought from Bengal; in April and May, valuable spices like cinnamon and cloves, and medicinal substances such as pão da China and benjoim were imported from Melaka and China, etc. In June and July, the Royal Hospital had to be refurbished and provisioned with all the necessary equipment (new beds, linen, etc.) in preparation of the arrival of the ships from Portugal with, as a rule, a huge number of sick soldiers. And finally, three times a year all the "houses of the Hospital had to be whitewashed" for the holy festivities of Our Lady in August, for Christmas and for Easter. The chapel in the Hospital was whitewashed once a year for the feast of the Holy Spirit, its "patron saint (orago)".

The second chapter of the Regimento gives detailed instructions to individual officials, arranged in decreasing order of responsibility and authority in the Hospital. At the head was the Mordomo, who should always be selected from among the "brothers" of the Misericórdia who were "honorable, noble, rich, prudent, liberal, compassionate, of good life and reputation", etc. He was, in fact, elected "in place of the Purveyor (Provedor) of the Santa Misericórdia", the highest office concerned with public assistance in the Estado da Índia, and was to be obeyed by all others in the Hospital. The mordomo's job description is scrupulously detailed with an additional time-schedule and yearly calendar just for his special tasks. The trickling down of authority and responsibility is one of the major Jesuit preoccupations. Who obeys or commands whom is prescribed as clearly as possible, thus fostering individual responsibility. Except for those at the bottom of the list, who consisted of both free labor and of slaves, and were there only "to be always ready to do what was ordered". Other than the mordomo and the priest, all other employees received wages, "calculated" from the highest twenty-five xerafins per month for the physician to two and half xerafins plus food and half a liter of urraqua, that is, locally produced alcohol, for menial laborers. Therefore, each person was assigned his place and his worth on this list, just as on the "list of medication (pauta das mezinhas)" each medicine had its price.

Both the Regimento and pauta das mezinhas were revised and changed in the years to come, but the basic structure remained the same. In spite of these pedantic rules, the administration by the Misericórdia did not seem to work and the Governor, Matias de Albuquerque (1591-97), ordered the Jesuits to take over the Royal Hospital again. The problem was obviously larger than the body of rules governing the behavior of the Hospital officials. Lack of funds and regular financial support, the deteriorating ecological condition of the town of Goa and the vicissitudes of local

politics made the Hospital unmanageable. With a new building constructed in 1609, things were improving and the French traveler, Pyrard de Laval, extolled it as the best in the world. Besides the beautiful building, the object of his admiration was the "good order and supervision (bel ordre et police)" and the cleanliness reigning inside. Finally, the Hospital was like a "monastery", with the resident Jesuit father in command of all other officials. But it was also like a prison, since nobody could leave the hospital, receive letters or visits without permission. Pyrard de Laval, who was admitted to the Hospital as the prisoner of a Portuguese captain, went straight to the prison of the Vedor da Fazenda upon regaining his health. Finally, of all the places Laval visited in Goa, the Royal Hospital remained the only place associated with health, with order and good customs (charity, compassion, liberality, sexual continence). All other institutions, from prisons to the intimate world of the Portuguese families, were perceived as unruly and sick.

Epilogue

By the seventeenth century, therefore, just about everything possible was done to make Goa a healthier place. Garcia de Orta left his monumental work, which was both a description and prescription for healthy life and rapid cure. His Galenic humoral optimism, enriched by the knowledge he collected through exchanges with Hindu and Muslim medical practitioners and his view of the human body as basically adaptable to all climates, was and continued to be shared by physicians. Jesuit engagement in medical care and social welfare in the second part of the sixteenth century was in no way opposed to Orta's ideas. Jesuit intention was to de-secularize medical practice through the introduction of religious medicine or "medicine of the soul", such as sacraments and holy objects. At the same time, the introduction of the Inquisition and the anti-New Christian panic, wafting from Lisbon and reaching its paroxysm in Goa, worked together to delegitimize the medical elite available in the capital of the Estado da Índia. Fear of Judaizers nourished fear of pagans, especially of the Brahmans, who were likened to the Jews. This led to another exodus, forced by the Portuguese authorities, of qualified physicians from Portuguese territory. With ecological disaster in store as the population grew, the Mandovi River silted up, rotting garbage piled high and infiltrated drinking water, combined with political difficulties and periodic sieges and attacks in the hinterland, the Jesuit medical mission in the Royal Hospital of Goa was a "civilizing mission", a mission aimed at rewiring social bonds and engendering a sense of responsible solidarity towards "sick neighbors" and the environment. The Jesuit opera caritatis were certainly inspired in their roots by late-medieval piety, but the way they went about putting them into practice was closer to the technologies of the flesh and mind of the modern period. Not yet, Foucault's panopticum, the Royal Hospital in Goa was a very special place, a utopian place to exercise such new mental tools as professional responsibility and accountability, method, time-schedule, advanced planning, as well as authentic active compassion.

For Orta, passion and desire and a conscious adaptation of the body to the ecological environment were constitutive of a healthy individual, while healing took place in the private space of the home (of the patient or of the physician). The remedies used were a combination of natural substances and selected customary practices, on the basis of local and European medical experience. The relationship between the physician and the patient was based on trust, and for that very reason was fragile and fraught with tensions. On the other hand, in Jesuit opinion, the compassion
and the desire to obey were constitutive of a healthy society. The patient did not have to trust the individual physician. He had to trust the system that prescribed the law and enforced it.\textsuperscript{154}

\textsuperscript{154} See article by Victoria Khan, "'The Duty to Love': Passion and Obligation in Early Modern Political Theory", \textit{Representations}, No. 68, Fall 1999.