Some Jewish Responses to Smallpox Prevention in the Late Eighteenth and Early Nineteenth Centuries: A New Perspective on the Modernization of European Jewry

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Source: Aleph, No. 2 (2002), pp. 111-144

Published by: Indiana University Press

Stable URL: https://www.jstor.org/stable/40385475

Accessed: 29-11-2018 17:15 UTC

REFERENCES

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Some Jewish Responses to Smallpox Prevention in the Late Eighteenth and Early Nineteenth Centuries: A New Perspective on the Modernization of European Jewry

Historians of medicine and public health have long considered the history of smallpox inoculation and cowpox vaccination to be a significant stage in the emergence of modern medicine and its achievement of authority throughout the Western world. The modest beginnings of inoculation, at the beginning of the eighteenth century, and Edward Jenner’s dramatic discovery of the much safer procedure of vaccination, near its end, offer remarkable testimony to the impact of new scientific discoveries on state policy and on the shaping of a new public consciousness about health care. In a more general sense, the story of the fight against the scourge of smallpox is also related to the emergence of new attitudes towards religion and science, the role of the medical professional vis-à-vis sacerdotal and political authority, and human beings’ new sense of their power to resist any fatal condition and overcome it. The new procedure was revolutionary even from the perspective of physicians and the history of medicine. Inoculation, and
to a lesser extent vaccination, actually meant giving a disease to a healthy person—the very inversion of the physician’s traditional role and objectives.¹

To my knowledge, historians of the modern Jewish experience have never treated this subject seriously, although there are ample sources suggesting that Jewish doctors and rabbis were just as concerned as non-Jews about the brutal results of smallpox in their own communities and sought ways to eradicate it. The discourse on smallpox and its elimination is particularly interesting because the subject of scientific and medical authority, especially as a challenge to traditional rabbinic opinions and praxis, is clearly an essential part of the history of the modernization of European Jewry.² Precisely during the same period as the debate over inoculation and vaccination, another controversy raged in Germany and the rest of Europe regarding the Jews’ alleged practice of premature burial. The pressure exerted by public health officials, representing enlightened governments, to postpone Jewish burials for several days, in order to be absolutely certain that no one was buried alive, understandably alarmed traditionalists within the Jewish community. Such unwarranted interference with time-honored Jewish practice appeared to threaten the sanctity and authenticity of Jewish law. It was a classic case of scientific opinion being at loggerheads with traditional custom. For nearly a century the controversy engaged traditionalists and modernists, rabbis and doctors, Jews and non-Jews, and produced an extensive literature in Hebrew, German, and other languages. This emotional struggle over a relatively minor dimension of Jewish law was a cause célèbre of the history of the Jewish enlightenment and emancipation well into the nineteenth century.³

There is thus an interesting disparity between the weight of one public-health debate (over smallpox eradication) among the general population of Europe and its relative insignificance among the Jews, precisely at the same time as another public-health issue (early burial) evoked bitter acrimony among Jews alone. Is this disparity an accurate

reflection of reality or only of how modern historiography has treated the issues? It seems to me that the issue of smallpox prevention needs to be reconsidered from the perspective of Jewish culture. If nothing else, it might provide us with a sharper perspective on the well-documented history of the early-burial controversy, allowing us to understand more profoundly the general response of Jews to the new challenges posed by medicine and science at the dawn of the modern era.

As modern scholarship has amply demonstrated, the issue of who was in favor of inoculation and who was against it, who was pro- and who was anti-vaccination can no longer be reduced to a simple dichotomy between progressive and conservative, scientific and traditional, or secular and religious.4 Take the interesting juxtaposition of the German Jew Marcus Herz, distinguished physician, philosopher, and secularist, and close associate of Moses Mendelssohn, with Cotton Mather, the Boston preacher, Puritan divine, and Christian Hebraist. Despite his deep commitment to enlightenment values, his previous clash with the rabbinic establishment over its unyielding stand on early burial, and his own secularity, Herz was strongly opposed to the use of the Jenner vaccine. Near the end of his life in 1801, fully committed to his understanding of “philosophical medicine” (we shall return to this below), Herz objected to the notion of utilizing “brutish” material to cure human illness and concluded that the entire procedure was categorically improper, both philosophically and morally. Despite strong opposition from his medical colleagues, which significantly tarnished his professional reputation, he refused to admit the simple fact that vaccination worked.5

Mather, on the other hand, confronted no less than Boston’s only European-trained physician, William Douglass, on the use of inoculation, soon after a smallpox epidemic had ravaged the city’s population in 1721. But in this bizarre case of public debate between a clergyman and a scientist, the roles were remarkably inverted. Douglass and his medical colleagues argued that deliberately infecting healthy
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people was unsafe and would spread the disease even more. Mather, on the other hand, had no qualms about the widespread use of inoculation, which he promoted from his pulpit. He viewed it not as a sinful attempt to defy divine providence but as a gift from God, a demonstration of the election of this American Puritan community, which was obligated to seize the opportunity God had miraculously given it. For this religious thinker, inoculation was analogous to conversion. In both cases, it involved a leap of faith by which the believer relinquished his own autonomy for the higher ideal of complete trust in God. Once individuals had the courage to open up to God, in the case of conversion,


4 Contrast, for example, the differing responses of two major Enlightenment figures: Voltaire’s enthusiastic endorsement of inoculation (discussed in Rowbotham, “The ‘Philosophes’ and the Propaganda for Inoculation,” pp. 278–280) with Kant’s extreme caution (discussed by Maehle, “Conflicting Attitudes,” pp. 198–199).

5 This is discussed by Martin Davies, Identity or History?: Marcus Herz and the End of the Enlightenment (Detroit, 1995), pp. 117–144; see also below.
their souls would be healed; in the case of inoculation, their bodies would become immune to future epidemics.  

Considering the unconventional and unexpected positions of the Jewish secular philosopher and physician and of the eccentric Christian pastor allows us to appreciate the complex personal, philosophical, medical, and religious factors that shaped a wide range of reactions both for and against inoculation and vaccination. When we look at several other Jewish responses to the same issue we should not expect to find a unanimity of opinion or a consistent pattern of response to scientific novelty and risk. For the Jews, like their Christian neighbors, both the threat of smallpox and the radical and unconventional solutions now offered by science left them unsure and conflicted. Given the unprecedented nature of the disease and its cure, the legal and moral voice of the collective religious tradition was more ambiguous than in the case of early burial. As these respondents openly acknowledged, they were living in new circumstances never fully anticipated by their ancestors. While they might be able to derive some general moral guidelines from Jewish law, the ultimate decision about whether to advocate mass inoculation among Jews rested ultimately on mathematical probability, common sense, and an innate feeling that, in most cases, doctors were to be trusted.

1.

In 1785, Alexander ben Solomon of Hamburg, who also called himself Abraham Nansig [=Nancy], succeeded in publishing in London a rather unusual book. Entitled Aleh terufah (Leaf of healing; see Ezek. 47:12), the small work consisted of several modest compositions, including a commentary on a section of the Mishnah and several some rabbinic homilies the author had orally presented in the Ashkenazi synagogue of London. These insignificant pieces were clearly meant to
accompany his most original composition, a rabbinical responsum on the permissibility of inoculation against smallpox, or in the author's words, "whether it is permitted to use the new cure from the doctors of our time, new ones, who came but lately, whom your fathers did not know (after Deut. 32:17)." Given the paucity of Hebrew books published in London at that time, it appears quite daring that the publishers Alexander Alexander and his son Levi would have chosen to undertake such a project in the first place, one by so obscure an author and on so unusual a subject. More interesting is the fact that Abraham's re-

6 Here I follow the interpretation of Louise Breen, "Cotton Mather, the 'Angelical Ministry' and Inoculation," Journal of the History of Medicine and Allied Sciences 46 (1991): 333–57; see the bibliography listed in her article.

7 For an earlier Jewish response not considered in this essay, see Jacob de Castro Sarmento, A Dissertation on the Method of Inoculating the Small Pox: With Critical Remarks on the Several Authors who have Treated of this Disease (London, 1722). On Sarmento, see Matt Goldish, "Newtonian, Converso, and Deist: The Lives of Jacob (Henrique) de Castro Sarmento," Science in Context 10 (1997): 651–676. For two earlier summaries of the smallpox issue in rabbinic literature, see: J.D. Eisenstein, Oṣar yisrael (New York, 1951), 1:76–77; H. J. Zimmels, Magicians, Theologians, and Doctors (London, 1952), pp. 107–109. They both mention the generally positive reaction to vaccination of Ishmael ben Abraham Hakohen (1723–1811) in his Zera' ʾemet (Livorno, 1796), Yoreh deʿah, n. 32, which I was unable to consult.

8 On this, see Laurence Bradley, Smallpox Inoculation: An Eighteenth-Century Mathematical Controversy (Nottingham, 1971).

9 Abraham ben Solomon Hamburg, ʿAleh terufah (London, 1784–85), title page. The other works include an exposition of one chapter of Mishnah Berakhot and a sermon preached at a special meal in honor the completion of the study of the entire Talmud in the London yeshiva.

sponsum appeared in the same year in a somewhat reduced form in the pages of Ha-me'assef, the primary journal of the Jewish enlighteners of Berlin.\textsuperscript{11} It is difficult to determine which version came first. The text that appeared in Ha-me'assef was sent to the editors by one Moses bar Menahem; it is dated 1768 and was completed in The Hague. The London text is more expansive and clearly emerged at the author’s own initiative, with his own introduction.

All we know of Abraham ben Solomon’s life is what he relates in the introduction to this work. He was born in Nancy, where he lived until invited to come to The Hague under the patronage of the well-known Orthodox Jewish banker and businessman Tobias Boas.\textsuperscript{12} He lived in Boas’ home for sixteen years before departing for London, where he apparently remained until the end of his life in the home of the Jewish communal leader Abraham Kampen.\textsuperscript{13} He calls himself one of the insignificant members of the hovešei beit ha-midraš of the Ashkenazi community. The term is a talmudic idiom that usually signifies a regular yeshiva student; in light of Abraham’s interest and apparent expertise in medical matters, however, perhaps he meant hoveš in its literal meaning of a dresser or bandager, someone who is not a licensed doctor but deals with minor medical matters. Whatever the case, Abraham was clearly not a prominent figure in either the rabbinic or the medical world, so that his publication is all the more unusual.

Abraham was motivated to write this responsum by the death of two of his children at the hands of the dreaded disease.\textsuperscript{14} He had intended to publish his text much earlier, sharing his experience in The Hague, where many were inoculated and survived.\textsuperscript{15} But despite the fact that the shorter version indicates that it was finished in 1768, while Abraham was living in Boas’ home, neither version was published for another seventeen years.

The responsum offers a rich mixture of rabbinical opinion, medical information, and common sense. He defines the disease of smallpox and
describes the scarring and other effects of the disease and its high mortality rate. His primary Jewish authority on the disease itself is the seventeenth-century “expert doctor and Torah sage,” Jacob Zahalon of Rome, who published his medical textbook *Oṣar ba-ḥayyim* in 1683. Zahalon suggests that smallpox is caused by the impure blood of menstruation, which enters the child through the mother’s womb and remains dormant for several years. Abraham mentions that this hypothesis, implying that a child may be potentially sick as soon as he or she is born, is also current among other (non-Jewish) medical author-

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11 The composition appeared in *Ha-meDa’sef* for Tishrei 5545 (1784), in section 2 of “Letters,” pp. 5–15, with the same title, *‘Aleh terufah*.


13 I have not been able to identify him, but he was probably a member of the Kampen (Salomons) merchant family of London, which included David and Eleazar. On them, see Gedalia Yogev, *Diamonds and Coral: Anglo-Dutch Jews and Eighteenth-Century Trade* (Leicester and New York, 1978), pp. 250 and 262.

14 He mentions them in his introduction (unpaginated) to the London edition. My citations from *‘Aleh terufah* are from this edition.

15 *‘Aleh terufah*, introduction.

16 Ibid., p. 1a.

ities, but declines to offer his own opinion on its validity. More important for him is the new treatment of inoculation; he underscores its novelty in his own generation, alongside other new inventions never imagined by the ancients.

Abraham is fully aware that the position of refusing to be inoculated is compelling to some, since infecting a healthy person with the disease would seem to endanger his or her life. Moreover, carrying out the procedure seems to be questioning God’s providence. Abraham notes that this view is shared by both Jews and non-Jews. After due consideration of biblical and rabbinic texts on human life in situations of real or potential danger, he opts for a pragmatic and realistic position on the particular case at hand. Based on his own personal experience, he maintains that a person who encounters the plague, whether or not he or she is actually sick, is already potentially so and should be considered to be ill: “Everyone is sick in the face of this ‘hatred,’ that is to say, the disease of smallpox. Anyone who has tasted the cup of poison from this illness he is, without doubt, potentially sick until the evil becomes actual.” Here he brings his horrible experience of watching the deterioration and eventual death of his son and daughter. In this predicament, which was never anticipated by the ancients, Jew or gentile, so that they are unable to offer precise guidance in the present situation, one is obligated to forestall the peril of smallpox with a remedy.

It is true, he continues, that those inoculated with diseased matter occasionally die, but the statistical probability is one in a thousand and the death is often due to a mistake in the medical procedure. Physicians have long taken risks in their attempts to cure patients. The older procedures of bloodletting and purgation, and even eating some foods, are always accompanied by noticeable risks. Traveling in the desert or at sea is also dangerous, but is not prohibited by Jewish law. If such travel, usually motivated by monetary gain, is licit, inoculation should certainly be permitted where the goal of saving life is paramount. En-
listing Maimonides’ support, Abraham proclaims that the dichotomy between trusting God and relying on a physician is a false one. Following the doctor’s prescriptions is analogous to eating: “Would we say that a person has abandoned his trust in God by trying to save his own life and sustaining himself during a famine?” The doctor’s prescriptions are meant to make people healthy and are thus consonant with God’s wishes. Only the kind of ancient remedies associated with idolatry are threatening for the faithful. The argument that a smallpox

18 Aleh terufah, p. 2a. This hypothesis ultimately derives from the earliest discussions of smallpox by the Arab physicians Rhazes and Avicenna. See Darmon, La Longue Traque de la Variole, pp. 23–24.
19 Aleh terufah, pp. 2b–5b.
20 Ibid., pp. 4b–5b, 7a–7b.
21 Ibid., p. 6a.
22 Ibid., p. 3a. In the version in Ha-me’assef, p. 8, he gives the figures 5 in 60,000, which seems highly understated, given the usual estimates of the lethality of smallpox inoculation as one in a hundred. See Maehle, “Conflicting Attitudes towards Inoculation,” p. 200.
23 Aleh terufah, pp. 6b–7a. Note a similar argument advanced by Immanuel Kant. He wrote that someone who decides to have the smallpox inoculation risks his life in uncertainty. And though he does so in order to preserve his life, his case is morally more questionable than that of a sailor who entrusts himself to the storm. The sailor at least has not made the storm, whereas an inoculated person intentionally contracts the disease that endangers his life. Johann Christopf Hoffbauer (1766–1827), a follower of Kant, nevertheless criticized this position. For him the appropriate analogy is with endangering oneself in a storm. Though the sailor is not responsible for the storm, he still puts himself deliberately in danger, just like a person who has himself inoculated. (See Maehle, “Conflicting Attitudes,” pp. 198–199 and 222 n.55.
24 Moses Maimonides, Commentary on the Mishnah, Pesahim 4:5.
25 Aleh terufah, p. 7b.
epidemic is a kind of divine punishment is foolish: "For we should not question God's ordinances, how and what and where we discover them, but rather we should seek from God food, clothing, medicine, and all human needs with all our strength, while trusting in His great name." In preparing a treatment to combat the plague one fulfills God's will, not the opposite.

Abraham returns to the novelty of the disease. It is not found in all regions and at all times. The fact that the rabbis never mentioned it indicates that it did not exist in their days. He ends by citing the interesting testimony of his well-known London contemporary, the kabbalist Shalom Buzaglo, who told the author about the practice among Sephardi Jews of putting raisins in the hands of afflicted children until they grew warm. They were then fed to healthy children. Abraham concludes that this is analogous to the present practice of injecting the smallpox under the skin. Although he is somewhat hesitant to encourage the ingestion of smallpox by mouth, the current practice of inoculation is praiseworthy and should be encouraged by his co-religionists.

Abraham's publication in the pages of Ha-me'assef elicited at least one strong response some two years later. The unknown correspondent compliments Abraham for the quality of his arguments but politely disagrees. He too brings various rabbinic sources that emphasize the saving of life at all costs. Even the ratio of one death in ten thousand is too much. It is a sin to lose one child even for the sake of many more saved, for one should ultimately trust God, not the physicians. The analogies to purgation and bloodletting, or to the risks encountered on desert or sea journeys, are unconvincing to him. He defends the rabbis for not mentioning the disease. One should not assume they did not know about it; perhaps they classified it differently. Until proven otherwise, Jewish children should not be inoculated, although the writer is willing to change his opinion if refuted by other rabbis.

What is fascinating about both Abraham's responsum and the re-
sponse is their hybrid nature—part traditional rabbinic responsum, part journalistic essay advancing commonsense arguments. This is certainly due to the fact that probably neither of the two men was an ordained rabbi, but it also has to do with the forum in which they published. Ha-me几个人 was addressed to a literate Hebrew-reading secular public that tended to be contemptuous of rabbinic authority and the traditional genre of the responsum. That Abraham’s essay bears the trappings of rabbinic culture and was nevertheless published in the journal, albeit in condensed form and without the autobiographical introduction of the London edition, offers an interesting vantage point on the editors’ position as both inside and outside the tradition.

We should also recall that Abraham’s essay was published at the same time as the second stage of the early burial debate. Beginning in 1785, Isaac Euchel took the public controversy over early burial to another level by publishing in Ha-me几个人 Moses Mendelssohn’s letter to the Jewish community of Schwerin, privately chiding them on their overly cautious approach, followed by the negative responsum of Rabbi Ezekiel Landau of Prague and, finally, the critique of the aforementioned Marcus Herz. It is worth noting how the issue of in-

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26 Ibid., p. 9a.
28 This is reminiscent of the well-known practice of Pockenkaufen or buying smallpox. Children who were expected to fall ill were sent to a smallpox infirmary, where they paid for a smallpox scab to rub in their hands. See Huerkamp, “The History of Smallpox Vaccination in Germany,” p. 619.
29 ‘Aleh terufah, pp. 9b–10a.
31 For the chronology of the debate and detailed descriptions of each of the works
oculation was completely upstaged by the more controversial matter of early burial. Both the unimportance of the author and the relatively noncontroversial nature of the subject probably contributed to this fact. We shall return to this contrast again. Here we need only note that smallpox remained an issue of some consequence to the Jewish community in subsequent years.

In 1789, an even more prominent member of the Berlin circle of maskilim, Naphtali Hertz Wessely, published in *Ha-me'assef* a petition for good health, to be recited in the synagogue on behalf of the Prussian royal family, which was threatened by smallpox. In a later issue, in 1790, he published another thanksgiving prayer, blessing God for sparing them from death. His reference in the former to intervention by physicians and his explicit support of their efforts probably meant inoculation as well:

May God remember for goodness the courageous prince, the hope of all the earth’s inhabitants, the firstborn to inherit the crown Friedrich Wilhelm, and his brother the joy of all the earth the noble Ludwig, and their dear brothers the nobles Heinrich and Wilhelm, and their pleasant sister Augusta, the daughter of the king, who are presently all quarantined in their chambers according to the advice of the physicians who take care of them with cures to save them from the evil of smallpox, which has spread throughout the land and raised its hand against humanity. Please stand to assist the doctors. Appear to acknowledge [addressing God] their advice and support their efforts and make successful all that they do for them, for you God are a faithful healer. . . .

The same enlightened despot Friedrich Wilhelm, who was destined to become king several years later, strongly supported the efforts of the physician Johann Christian Wilhelm Juncker to promote inoculation
after the epidemic of 1790–91 and to compile local and regional reports on the fight against smallpox. He even ordered his board of health to examine Juncker’s radical proposal of compulsory inoculation, although it eventually declined to implement it. Whether or not Wessely was taking a position on the debate over inoculation, he seems to have endorsed, at least indirectly, the campaign for its eradication through isolation and inoculation.

2.


33 “A Prayer of the Community of Israel who dwell in Berlin on the welfare of the family of the king, may his splendor be uplifted, by the advice of the doctors, they contracted the disease of smallpox,” Ha-me’assef, Kislev 5550 (1789): 65–68. “Songs of Praise and thanks to God ... here in Berlin in the synagogue on the recovery of the royal family from the disease of smallpox which they had contracted,” ibid., Tevet 5551 (1790): 99–107.


well. He performed his first vaccination in 1796 on a young boy, using cowpox taken from the blisters of a person infected with the disease. In 1798, Jenner published his results in a work entitled, An Inquiry into the Causes and Effects of Variolae Vaccinae, a Disease . . . known by the name of the Cow Pox. Despite some initial medical opposition, such as that of Marcus Herz, as we have seen, the medical profession adopted the new method of vaccination.36 Thousands were vaccinated in England and then throughout the Continent. This immediate success was largely attributable to the campaigns by various governments to encourage the population to be vaccinated.37

The first Jewish responses appeared in central and eastern Europe within a decade of Jenner’s discovery. The most unusual, though not the first, was that by Phinehas Elijah Hurwitz (1765–1821), a Polish Hebrew writer who traveled extensively throughout central and western Europe. With the support of his Lemberg patron, Nahman Reiss, Hurwitz published his Sefer ha-berit (Book of the covenant) anonymously in 1797 in Brün, Moravia. He brought out a new and expanded edition in Zholkva (Zólkiew) in 1807 (a Christian publisher had printed another version in Prague in 1799 without the author’s permission). The new edition, subsequently published many times throughout the nineteenth century, included an extensive discussion of smallpox and the Jenner vaccine.

Sefer ha-berit purports to be a commentary on a sixteenth-century kabbalist work by Hayyim Vital on the possibility of attaining the holy spirit. Hurwitz, the author of several other kabbalistic works, would seem to be an unlikely source of new medical information. Yet his work—at least the first part, filled with a mixture of outdated and up-to-date information on all the sciences of his day, based on a smattering of contemporary sources and earlier Hebrew scientific works—is a virtual medical and scientific encyclopedia. Hurwitz includes descriptions of the Copernican theory (with which he disagrees), the air pump, the thermometer, the discoveries of the New World, the diving bell, Kant’s
philosophy, and much more. The most intriguing dimension of the book is its essential premise that scientific knowledge, at least as sanitized in a traditional Hebrew text, is propaedeutic to recovering the holy spirit and attaining prophecy. Hurwitz follows a long tradition of kabbalists who were open to and appreciative of the natural world, who criticized scholastic philosophy while seeing science as a resource for their religious faith. In fact, Hurwitz is aware of and uses many of their works. But his book is situated in the radically different cultural ambiance of the Haskalah, the Jewish enlightenment of central and eastern Europe. He vigorously disputes many of the radical rational positions of his contemporaries while accepting many of their underlying values. Hurwitz’s use of Kant’s *Critique of Pure Reason* to justify his own position of faith and his identification with a universal morality of brotherhood between Jews and non-Jews are two remarkable examples of the distinctiveness of his work.\(^{38}\)

Whether or not Hurwitz had actually read Jenner’s treatise in one of the many languages into which it was soon translated, he certainly displayed a detailed knowledge of his discovery, the procedures he followed, and the subsequent history of vaccination among both Jews and non-Jews. He begins, as Abraham ben Solomon had done, with a description of smallpox, its various names, its horrendous effects, particularly the scarring and pockmarks it leaves on its victims. Like Abraham, he mentions in passing its possible origin in the impurity of


\(^{37}\) For bibliography, see note 1 above.

\(^{38}\) On Hurwitz and his work, see Noah Rosenblum, “The First Hebrew Encyclopedia:
menstrual blood. He carefully reviews the process of inoculation as practiced for the past century. He emphasizes that although inoculation had considerable success, it did not always produce the expected results and some patients died anyway. That is why "the sages of Israel abstained from this procedure, not wanting to permit it for members of our community so as not to involve our children from the outset in a doubtful case of saving life." Clearly he knew nothing of Abraham ben Solomon's treatise; nor would he had been sympathetic to his position. The new procedure of vaccination, however, is of an entirely different sort; "it is a commandment to publicize this tested cure which God bestowed on us in this generation, and which previous generations were not privileged to enjoy." 

Hurwitz's primary motivation in spreading the good news is to assure his readers of the remarkable safety record the new vaccine has achieved: "Already thousands and ten thousands of people have tried it and all of them have come out of it safely, with not a single one dying." He adds that when the rabbis saw these results they immediately offered their support for the vaccination campaign:

When the sages of Israel saw that the procedure was verified and carefully tried and that this practice spreads day by day and is accepted in every state to the ends of the earth and to far-off islands, and no one has heard or seen any impediment or flaw affecting any person great or small, since it is a procedure that never harms anyone, they all arose, the elders of Israel and the supporters of Torah in this generation, and permitted it to all of Israel according to the Torah, commanding the doctors to do this to their children and grandchildren. . . .

Hurwitz next offers his readers a detailed description of Jenner's empirical studies of the milkmaids who came in contact with infected cows.
and were thus immunized against the more dangerous smallpox. He describes Jenner's method of injecting the cowpox beneath the skin, the waiting period as the pustule appears, opens, scabs, and falls off. He insists that the scab must not be picked off and that one's hands should be kept clean. The immunization usually works the first time but occasionally needs to be repeated.45

Hurwitz lists four advantages of the cowpox vaccine: It is more...
easily obtainable, more reliable, and less dangerous to use; it is easier to focus on one area of the body; it does not spread easily to other parts of the body; and it does not affect children at the vulnerable age when their teeth are emerging or they are susceptible to other diseases. He cautions that proper medical supervision is necessary to insure good results and that the vaccine should be taken early in order to prevent the spread of smallpox from the first time it appears.\textsuperscript{46}

He again emphasizes the reliability of the cure, the fact that for some thirty years \textit{[sic!]} it has been universally accepted by peoples all over the earth, including the American continent.\textsuperscript{47} He reiterates that the practice of vaccination has begun to spread among Jews. This time he singles out the practice of a particular physician:

The halakhah is according to Rabbi Simon, a doctor in my city of residence, Cracow, . . . in his pamphlet \textit{Terufah ḥadašah} (A new cure), published in 1803/4, in which he urged the members of our community to give this tested medicine to all their seed, whether male or female, before hearing of or viewing the presence of this very dangerous natural smallpox. And thus the holy community of Cracow and others act accordingly. Simon the righteous actually showed me a list in his ledger of hundreds of children vaccinated by him, and all of them came out of it safely, perfect and unscathed in their bodies, all of their organs strong and firm.\textsuperscript{48}

I have been unable to locate the booklet by the doctor “R. Simon,” but the author can be identified with certainty. He was Dr. Szymon Samuelsohn (Samuelson), born in Frankfurt an der Oder, where he also studied medicine between 1773 and 1779. At the recommendation of Count Sułkowski he was invited to serve as court physician in Cracow; he was allowed to live in the Christian quarter in Kazimierz despite his Jewish ancestry. In 1781 he was appointed physician of the Jewish
quarter. He later settled in Warsaw and then in Lublin, where he served as court physician. Hurwitz obviously enjoyed a personal relationship with this respected doctor, who used his political capital with Christian patrons and his official position in the Jewish community to encourage his co-religionists to be vaccinated.49

Hurwitz concludes his observations by underscoring the point made strongly by Abraham ben Solomon: the novelty of the disease. He repeats that there is no mention of smallpox in all of Jewish literature, including Maimonides, nor in the classical medical literature such as Hypocrites, nor even in the popular contemporary medical textbook by Tissot, which he had consulted.50 He closes with a plea to Jewish parents to consult doctors and vaccinate their children to protect them against smallpox.51 In Hurwitz’s composite of scientific information, moral guidance, and kabbalistic instruction, preserving one’s health by heeding the most up-to-date medical opinion was clearly a high religious priority.

46 Ibid., pp. 249-50.
47 Ibid., p. 251. If we assume that this section was included in the 1807 edition of Hurwitz’s work, it would erroneously put the discovery of vaccination twenty years earlier than Jenner’s work of 1796/1797.
48 Ibid., p. 251.
50 But see Maehle, “Conflicting Attitudes,” p. 219 n. 20, who mentions a propagandistic treatise by Samuel August André David Tissot (1728–1797), L’inoculation justifiée, published in French in 1754 and in German in 1756. Hurwitz apparently consulted one of Tissot’s popular medical texts that I have not seen.
51 Sefer ha-berit ha-šalem, pp. 251–253.
The most public display of Jewish support for vaccination came from the Jeiteles family of Prague. Jonas Jeiteles (1735–1806) led the campaign for vaccination among Prague Jewry and beyond. A medical graduate of the University of Halle, author of a medical textbook and other articles, he was in a good position to evaluate the evidence Jenner had assembled. As the chief physician of the Jewish community hospital and supervisor of the Jewish surgeons’ board he was also well-situated to propagandize on behalf of the new vaccine. After vaccinating himself, his sixteen-year-old daughter, and twenty other members of his family in a highly publicized manner, he was able to vaccinate more than 1,500 persons.52

Jonas had the full support of his son Barukh (Benedict) (1762–1813), rabbinic scholar and maskil, and founder of a yeshiva in Prague. In 1804, Barukh preached in the synagogue on the subject of vaccination, insisting that Jews were obligated by Jewish tradition to vaccinate themselves and their children. The sermon was published in German under the title Die Kuhpockenimpfung: eine Predigt von Rabbi Benedict Jeitteles (Prague, 1804).53

Another of Jonas’s sons, Judah Loeb Jeiteles (1773–1838), Hebrew writer, maskil, and supervisor of the German-language school for Jewish students in Prague, published a Hebrew collection of letters, reminiscences, poems, and riddles in Prague in 1821, entitled Benei hané‘urim. It includes a lengthy discussion of the Jenner vaccine and of his father’s efforts to propagate it within the Jewish community. Although I have not yet been able to procure a copy of Barukh’s sermon in German, it seems plausible that Judah’s Hebrew summary closely approximates his brother’s effort on behalf of their father’s campaign.54

Judah begins his description with an account of Edward Jenner and his discovery. Writing in an embellished homiletic style pitched to
capture his readers’ emotions with religious fervor, Judah transforms the scientist into a kind of divine emissary and his vaccination into a kind of divine intervention:

Behold it is known to all that in those days God raised the spirit of the dearest of men and the most splendid of doctors, the famous master doctor Jenner in the city of London, capital of the kingdom of England, to save small children from the hand of their oppressor. Lest they be cast away in the youth of their lives, he called to the angel of death to stop! Don’t raise your hand to the children; don’t let the innocent lad or young girl unblemished by sin be touched. The spoil of the plague comes immediately and destroys immediately, ... a sword making childless, the heat of vipers destroying the infant in the street and the suckling baby at the breast of its mother. These are taken to die, murdered in their mothers’ bosom, and these are injured, the beauty of their countenance transformed into ruin. Others’ faces are disfigured with pox, pox, white spots, white spots; some are stricken which bring blindness, lameness, extension, and contraction. Anyone who sees them feels disgusted. A father is terrified when he seeing his progeny and a mother is disgusted when she sees the fruit of her womb. Thus the smallpox would have destroyed God’s creation, the creatures of his hands; the world formed for habitation would have

53 On Barukh Jeiteles, see EJ 9:1330–31; Kestenberg-Gladstein, Neuer Geschichte, index.
55 An echo of God’s intervention when Abraham is about to slay his son (Gen. 22:12).
been made into a waste;[56] the pox would have sought the removal of humanity from this earth until it is thoroughly destroyed, were it not for the fact that God extended us to be fruitful[57] and multiply and opened the eyes of the wise-hearted doctor Jenner to find a cure for this plague and expel it from the face of the earth so as to utterly destroy it.[58]

Judah offers a full account of the discovery by the English milkmaids of cowpox and Jenner’s experiments based on their practice. He emphasizes the accidental nature of this scientific discovery: “All this came to be known by chance, and no one thought about it. . . . This was not the result of research and experiment, enlightenment and learning, but simply the result of the experience of common people with simple intelligence and whose discernment is not false. For this was a reliable proof of the truth of the matter.”[59] He proceeds to relate Jenner’s original twenty-three case studies, the follow-up to what he had learned from the accounts of the farmers of Gloucestershire. His account, which is fuller than Hurwitz’s, may well have drawn directly on Jenner’s published work.[60]

Most interesting are Judah’s comments on the situation in Germany: people’s initial reluctance to trust the doctors, the theological arguments against vaccination, and the reluctance to interfere with a natural process seemingly ordained by God. Echoing his father and (probably) his brother’s sermon, Judah is emphatic that trusting God means allowing the doctor to heal: “Protecting our souls is an ordinance of God to preserve our lives. For why is this disease different from others, that we should place a fence around it and lock up the door of medicine that the wise doctors found appropriate?”[61]

There is a new element in his insistence on following the doctors’ advice: the intervention by governmental authority: “Let the wisdom of the government of each state impose a punishment on any person who willingly would endanger his child by withholding this blessing from
It is government’s responsibility “to supervise the maintenance of the lives of its citizens and the preservation of their health to the extent possible, for it is advantageous for a country to maintain a large population and it succeeds when they are healthy and unharmed.” Judah emphasizes the good of society over the wishes of individuals. Since the ramifications of individual decisions to vaccinate or not have a public dimension, each person acts not only for his own welfare or that of his family but for society as a whole. In the interest of the greater good, governments have published and circulated simple instructions to educate the public and eradicate the disease.62

For Claudia Huerkamp, the intervention of state authorities in support of competent medical professionals is the true novelty of the campaign to vaccinate the general public in the nineteenth century. For the first time in history, it seemed possible to protect the entire population from a dreaded disease and even to eradicate it altogether. In Germany and other European countries, she points out, absolutist regimes were intent on strengthening their central authority by maximizing all their available resources, especially military and fiscal power. Significant mortality as a result of crop failures, epidemics, and famines diminish the strength of these regimes, which worked to avoid them through concerted efforts to maintain public health and welfare. Vaccination was clearly a boon to these governments, since it promised to save thousands of lives each year. The public debate as to whether the

56 See Isa. 45:18.
57 [Here Jeiteles is echoing Gen. 26:22.]
58 Judah Loeb Jeiteles, Benei ba-ne’urim (Prague, 1821), pp. 60–61.
59 Ibid., p. 62.
60 Ibid., pp. 62–63.
61 Ibid., pp. 64–65.
62 Ibid., pp. 65–66.
government had a moral responsibility to compel citizens to be vaccinated was spurred by mercantilist interests. Judah clearly articulated these same concerns in his arguments to his readers. He acted in full support of the absolutist government of the Austrian Empire, a position totally consistent with his own version of Habsburg patriotism. For it was the same Judah who published Hebrew and Aramaic translations of the imperial anthem and objected to Mordecai Manuel Noah’s plan for a Jewish city of refuge, since it cast aspersions on the benevolent kings whom the Jews should support unflinchingly.

Judah’s lionization of his father’s heroic efforts was also a strong endorsement of the medical profession and its claim to leadership within the Jewish community. Gaining governmental support for their demand for recognition as public authorities in all medical matters was an act not only of patriotic duty but also of self-interest. Jenner’s vaccine, as Huerkamp also points out, offered a significant opportunity to increase the prestige and influence of doctors in the realm of public health. For physicians, universal vaccination meant at the very least an increased income as well as an enhanced opportunity to reach more potential patients than ever before. Jonas’ campaign certainly fits this pattern in promoting himself in a very public manner as the so-called “Father of the Prague Haskalah.”

One final aspect of the Jeiteles’ campaign on behalf of vaccination should not be overlooked. Vaccination policies in all the German states involved the local authorities, teachers, and clergymen, who were urged to promote vaccination and combat the popular prejudice against it. Clergymen in particular were urged to preach about the benefits of vaccination from the pulpit and to instruct parents in their “moral” duty to vaccinate their children. Barukh’s sermon, preached in 1804, is a wonderful illustration of religious support for the medical profession. Instruction in public health could be legitimately carried out in the synagogue. Dr. Jeiteles had scored his most significant success in gaining the full support of both the governmental and religious au-
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authorities. Indeed, the leadership of the Prague Jewish community in the first decades of the nineteenth century, as exemplified by the powerful Jeiteles family and their allies, was based on a remarkable collusion of political, scientific, and religious agendas. In sharp contrast to the painful fault lines opened by the early burial debate among politicians, religious leaders, and secular critics of the organized Jewish community, the case of vaccination brought these same interest groups together in a remarkably cohesive coalition that championed the advancement of science and public health.

The remainder of Judah's discussion of vaccination focuses on practical information. Given the distinct possibility that some of his readers had not seen any of the numerous publications on the subject, he provides a succinct summary of ten points each person should know about the disease and its cure: (1) There is no danger from vaccination. (2) It does not damage the body. (3) Other persons cannot contract the disease through the air from those who are vaccinated. (4) The vaccine should be given to uninfected persons before to the outbreak of smallpox, preferably during spring and harvest time. (5) An outline of the specific procedures for vaccination. (6) The signs of recovery from the vaccination appear after ten and fifteen days. (7) The patient needs to be watched for a four-week period after vaccination. (8) A person is generally immune from the disease after vaccination, but should be re-examined by physicians. (9) Inserting animal material into a human will not make the person beastly, just as someone who drinks milk or eats meat remains human. (10) There is no difference

64 See Kestenberg-Gladstein, Neuer Geschichte, pp. 293–96.
66 So called by Kestenberg-Gladstein, Neuer Geschichte, p. 120.
between those vaccinated and those who contract cowpox from contact with cattle.\(^6^8\)

Judah adds one more important detail about his father’s role in the campaign to vaccinate the Jewish population. Jonas had contacted the rabbi of Nikolsburg, Moravia, Mordecai Banet (1753–1829) and gained his full support to circulate his instructions on mass vaccination. Banet, known for his strong opposition to Reform Judaism and very much a part of the traditionalist camp, apparently had no problems with Jeiteles’ position or with encouraging Moravian Jews to vaccinate themselves and their children.\(^6^9\)

4.

Before reaching some tentative conclusions about these responses to smallpox treatment, we should consider once more the complicated position of Marcus Herz, distinguished physician and advocate of the Jewish enlightenment in Germany, to whom we have already alluded several times.\(^7^0\) Besides the significance of his position on vaccination, he is the only figure we have encountered who also took a public stand on the issue of early burial, thus uniquely linking the two issues in one person. In fact, this link did not go unnoticed by his contemporaries. Soon after he had articulated his position on vaccination, one of his chief critics, Jason Ezekiel Aronsson, reminded Herz of his highly visible critique of the rabbinic establishment regarding early burial. In 1787, Herz had pitted his rational moral commitment to relieving individual human suffering against a seemingly uncaring Orthodoxy, which was ready to ignore a few incidents of live interment so as to avoid altering tradition and custom. How was it possible, Aronsson mockingly asked, for Herz to display an apparent indifference to human suffering in the case of vaccination, utterly disregarding the high moral stance he had taken previously?\(^7^1\)
Aronsson’s question needs to be addressed not only regarding Marcus Herz but more generally, in assessing other Jewish responses to both of these medical/social issues. Thanks to Martin Davies’ insightful portrait, we can understand the inner contradictions reflected by his positions here. In the case of smallpox vaccination, Herz’s conception of science, informed by his metaphysical interests, would not allow him the openness to accept empirical insights derived from purely pragmatic procedures. When he published his polemic against Jenner in 1801, at the very end of his career, the philosophical premises underlying his medical practice seemed to be in jeopardy. Inserting cowpox into human beings subverted the central tenet of his notion of medicine, namely, that man was the noblest creature on earth in that he possessed a soul empowering him with unique moral, intellectual, and physical attributes over all other living species. Vaccination suggested a physiological affinity between

68 Ibid., pp. 66–70.

One additional aspect of these Hebrew texts on smallpox, inoculation, and vaccination not considered here is the creation of a Hebrew vocabulary for speaking of both the disease and its cures. Abraham ben Solomon, for example, prefers to use the word “inoculation” (in transliteration) but translates smallpox as holi ha-‘avot. In the version of his text in Ha-me’assef, however, the illness is called holi ha-tehorim. Hurwitz prefers to transliterate the German Pocken to refer to smallpox but refers to vaccination as neti‘ab. Jeiteles calls the disease tehorim and translates vaccination as havrakah. The subject deserves fuller treatment.

70 The comments that follow draw heavily on Davies, Identity or History?, pp. 117–144 and 200–205.
71 Ibid., pp. 142–43.
human beings and animals that was an anathema to him and might even lead to the brutalization of humanity itself. Furthermore, it thoroughly upset his own rational construction of how illness was caused and should be treated. Through a system of analogies it was possible, he claimed, to discern the logical character of illness and thus to match illness with cure with seemingly reliable results.

All of this was threatened by the sheer accidental nature of the discovery by the Gloucestershire dairymaids. Science could no longer be based on a rational construction of logical analogies. Experimentation could not be limited by a closed system of prior assumptions; it had to be free to follow its own observations if it was to have any practical value in real life. For Herz, the vaccination controversy brought to the surface the great divide between idealistic philosophical medicine and scientific progress. In the words of Davies, Herz’s final plea for his position, against all odds, was “one of the grand—even if paradoxical—gestures of the Enlightenment.”

In 1787, Herz had challenged talmudic orthodoxy on the basis of a scientifically vindicated ethic and a commitment to medical progress. He had also attempted to redefine the social jurisdiction of the physician in relation to the rabbi. Given the specialized knowledge of the physician over the clergy, it was incumbent for the latter to defer to the former. The physician, armed with the cumulative knowledge of medical practitioners, was in a better position to provide the most reliable advice for the maintenance of human life. Seventeen years later, however, Herz was incapable of recognizing the emergence of a new approach to combating disease and the fact that medical progress had made his version of scientific theory obsolete. For science to be true to itself, it had to rid itself of all regnant orthodoxies, including its own. The doctor’s authority, unlike that of the theologian or religious sage, did not rest on a fixed system of prior assumptions but on the empirically driven and constantly open reassessment of the physical world.
Looking beyond Herz, we can offer some tentative conclusions about the variety of Jewish responses to smallpox prevention we have considered in this essay: that of a medical worker and yeshiva student who composed a responsum on inoculation; that of a kabbalist who includes a discussion of Jenner and vaccination in his own version of a scientific encyclopedia; those of a distinguished family of doctors, rabbis, and community leaders; and finally the bitter denunciation of vaccination by an enlightened physician. Viewed together, they constitute only a small sample of the discourses on smallpox and its prevention. These narratives provide only a partial glimpse of the collective Jewish response to the disease, one which might be reconstructed authoritatively only on the basis of detailed statistical information that remains unavailable. Nevertheless, one should note the geographical diversity they encompass: from London to Berlin to Prague, Cracow, and Moravia. The discourses we have considered were primarily written in Hebrew for a highly literate public, that was especially familiar with traditional rabbinic genres—the responsum, the sermon, even the mystical compendium. This internal conversation eventually broadened to include a German readership. Jeiteles' sermon appeared in German, as did Herz's writing on both early burial and vaccination.

Based on this sample, one might conclude that the Jewish response to smallpox inoculation and vaccination reveals basic commonalities with that of the non-Jewish population. The arguments both in favor and against inoculation and vaccination are more or less the same in both faith communities. They focus on the conflicting claims of physicians and religious leaders to know the truth and guide their communities, on the moral implications of the procedure of injecting poisonous and alien materials into the body, and on the right of human

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Ibid.
beings to act as God in reversing the natural spread of disease. If one can detect a slightly different tone in the Jewish sources we have considered, it might be the following. Across a wide spectrum of Jewish voices, including the most traditionalist rabbis like Jacob Emden and Ezekiel Landau, both of them participants in the early burial debate, one can easily locate a genuine appreciation of medicine and the physician’s role in shaping Jewish culture. Indeed, Jews had developed a rich and hallowed tradition of medical lore and practice long before the eighteenth century. Physicians were esteemed for their wisdom and practical insight. Many rabbis either became doctors or sought out the advice of physicians on matters pertaining to human health and the physical world. Even the seemingly intransigent Emden, who had rebuked the doctors for usurping rabbinic authority, would sometimes consult physicians for practical advice in determining Jewish law. Theological concerns such as the impact of vaccination on God’s providential design carried little weight among the Jews; Abraham ben Solomon even dismissed them out of hand as nonsensical. Since many physicians were familiar with traditional Jewish law and practice, they were hardly perceived as alien or antagonistic to the traditional Jewish community. In most instances, their knowledge in their own area of specialization was greater than that of the rabbis and the rabbis tacitly acknowledged this fact as well.

Vaccination also offered some Jewish leaders the opportunity to save Jewish lives while demonstrating their political loyalty to the governments that offered them partial or full citizenship. It was a splendid opportunity for the Jewish leadership to fall in step with mercantilist governmental policy, as the Jeiteles’ campaign illustrates dramatically. Vaccination, because of its impact on society as a whole, became an issue of political significance to Jewish leaders. They could simultaneously display how enlightened their community was in complying with the mandate to vaccinate their children, while at the same time act to save Jewish lives. In contrast to the early burial
debate, which conspicuously threatened the community’s authority to carry on its own affairs in the emotional matter of death, the vaccination campaign engendered no internal struggle among Jewish leaders, who were concerned primarily with saving Jewish lives. Herz’s opposition to vaccination had nothing to do with his feelings about the Jewish community and rabbinic authority. And a bitter opponent of reform like Mordecai Banet promoted vaccination at the urging of his rabbinic colleagues in Prague. The smooth acceptance of vaccination by the traditional Jewish community helps contextualize the early burial controversy as a glaring aberration from the Jewish norm in matters of public health. Despite the invasive nature of the vaccination procedure, most rabbis went along. They responded negatively only when the government overtly threatened the legitimacy of their institutions—specifically decisions about burial made by the Jewish burial societies—and the sanctity of time-honored custom. Despite the novelty of smallpox and vaccination, the rabbis, shaped by a long tradition of pragmatic openness to scientific discovery and of political

73 On this, see Ruderman, *Jewish Thought and Scientific Discovery*. Gad Freudenthal, in his introduction to AIDS in *Jewish Thought and Law* (Hoboken, New Jersey, 1998), pp. xxiv–xxviii and xlv, similarly articulates “an unchallenged consensus” within the Jewish tradition about assisting the sick through medical care. This point is entirely lost in Thomas Schlich’s discussion, in his “Medicalization and Secularization,” of the public discourse regarding the Jewish ritual bath. When underscoring the parallel positions of medical authorities and religious reformers regarding the unhealthy conditions of the ritual baths, he fails to consider that the rabbis, too, could not have tolerated baths that placed women and men at risk. Their own religious positions would have obliged them to insist on the prevention of illness through proper medical procedure, without compromising halakhic norms. Schlich does not explore their positions on this matter.

74 See, for example, Azriel Shohet, *Im hillufei tequfot* (Jerusalem, 1960), pp. 220–235.
expediency in supporting governmental policies that did not harm Jewish interests, offered little opposition and even embraced the issue. In many respects, European Jewry was psychologically well disposed to tolerate and even promote the general medicalization of the nineteenth century.