

**The International Quarantine Conference of Paris in 1851-2 : with remarks /
by Gavin Milroy.**

Contributors

Milroy, Gavin, 1805-1886.
Royal College of Surgeons of England

Publication/Creation

London : Savile and Edwards, 1859.

Persistent URL

<https://wellcomecollection.org/works/gdqhwv92>

Provider

Royal College of Surgeons

License and attribution

This material has been provided by This material has been provided by The Royal College of Surgeons of England. The original may be consulted at The Royal College of Surgeons of England. where the originals may be consulted. This work has been identified as being free of known restrictions under copyright law, including all related and neighbouring rights and is being made available under the Creative Commons, Public Domain Mark.

You can copy, modify, distribute and perform the work, even for commercial purposes, without asking permission.



Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>

6

THE INTERNATIONAL
QUARANTINE CONFERENCE OF PARIS,
IN 1851-2,

WITH REMARKS.*

BY GAVIN MILROY, M.D.,
FELLOW ROYAL COLLEGE PHYSICIANS, ETC.,

*Reprinted from the Transactions of the National Association for the Promotion of
Social Science, 1859.*

In 1850, upon the invitation of the French Republican Government, it was agreed among the different States which had coast possessions near or close to, the Mediterranean, that an international Conference on the subject of quarantine be held in Paris.

Delegates, medical and consular, attended from France, Great Britain, Austria, Russia, Sardinia, Tuscany, the Papal States, Naples, Turkey, Greece, Spain, and Portugal.†

The omission from such an inquiry of the United States, which would have afforded the most valuable information on some leading points, was, I think, much to be regretted.

A Report of the proceedings of the Sub-committee, that was appointed by the Council on February 23, 1859, for the consideration of the whole subject of quarantine, was read by Dr. Milroy, secretary of the sub-committee, at the same time as this paper, which was prepared at the suggestion of some of the members.

The sub-committee had framed a series of queries, embracing the various points requiring elucidation, and on which authentic data were most desirable. These queries had, on the application of the Earl of Shaftesbury, then President of the Public Health section of the Association, been submitted to the Foreign and Colonial Secretaries of State, and by these ministers sent to all British consuls abroad, and to the governors of all our colonies. The Directors-General of the Army and Navy Medical Departments had also transmitted them to the principal medical officers of both services on all foreign stations.

From these channels a large amount of most valuable information had been obtained, more than ninety replies having been received at the date of the meeting at Bradford. Upwards of forty more have since been received (Dec. 31).

A local committee has been formed at Constantinople, through the instrumentality of Dr. Foote, an able resident physician there, for the investigation of the quarantine practice in the Turkish dominions. Some highly interesting details have already been received in a preliminary report from this gentleman.

The sub-committee expect to have their full report ready at the next annual meeting of the Association.

The *Consular* delegates were M. David, Sir A. Perrier, MM. Lavison, Ebeling, Gaetano, Cecconi, Escalon, Falcon, Halphen, Vitalis, Segovia, and Silveira; the *medical* delegates were Drs. Melier, Sutherland, Menis, Rosenberger, Bo, Cappello, Carbonaro, Bartoletti, Costi, Monlau, and Grande.

The first meeting was held on the 23rd of July, under the Presidency of M. David, a Minister Plenipotentiary of France; and the subsequent meetings, forty-two in number, took place during the next six months. The Conference finally closed on the 19th January, 1852, receiving the thanks of the Prince President, then just elevated to permanent supreme power.

At one of their earliest sittings it was decided that only two kinds or degrees of quarantine be henceforth recognised—viz., 'quarantine of observation,' and 'quarantine of rigour or strictness,' and that the third or intermediate kind, 'suspected quarantine,' should be discontinued.

Quarantine of observation involves only the enforced detention and isolation of a vessel with all persons and things on board for a specified time, due attention to ventilation and cleanliness being required to be observed. In strict quarantine, besides a longer detention and a more rigorous isolation, other special precautionary measures, including the disembarkation of persons and the cargo in a lazaret, and their presumed disinfection by fumigation, &c., are imposed.

It was also resolved that, in future, only two forms of bills of health should be used—the clean and the foul—according as certain diseases, to be presently mentioned, are ascertained and certified by proper local authorities (and not merely rumoured or conjectured as had often been the case hitherto) to exist in the port of departure.

The intermediate form, the suspected bill of health, was declared to be unnecessary.

Moreover, it was agreed that, in all cases of quarantine without exception, the quarantine measures shall apply equally to the vessel, to the crew and passengers, and to the cargo, whatever be their condition as to health and soundness, or otherwise, during the voyage or on arrival.

It must always be borne in mind that the imposal of quarantine by no means implies that there has ever been any, even the slightest trace or suspicion of, sickness on board the ship which is detained. In the large majority of instances, the vessel and all on board have been and are quite healthy and sound; but the port from which she sailed being declared to be infected, all arrivals therefrom are presumed to be liable to convey and transmit some portion of the local infection. The quarantine is directed against the 'pays de provenance' generally, and it therefore involves all persons and things coming therefrom, without reference to their actual and ascertainable condition.

The first question of real importance which the delegates had to settle was, to agree among themselves what are the diseases against which this general quarantine should be declared to be necessary. After much learned discussion, it was resolved that the three diseases of the plague, yellow fever, and malignant cholera shall be held as, in an especial manner, demanding the use of quarantine measures for the protection of a country against their introduction from abroad.

This decision of the Conference was not adopted without much opposition, more particularly as regards the *cholera*. Austria pro-

tested against the necessity for general quarantine against this disease. She had given a fair trial to it in 1831, and had found it not only useless, but disastrously mischievous; and the subsequent experience of other countries had confirmed the opinion she had formed on the subject.

Besides England, France and also Sardinia expressed their opposition to the measure. They had indeed continued a modified and mitigated sue of it in some of their ports, but only out of deference to other States in the Mediterranean, and until some general agreement on the subject could be come to.

On the other hand, Naples and the Papal States resolutely maintained the necessity for as strict quarantine against the cholera as against the plague, and expressed their determination to resist any attempt to do away with it. The Island of Elba and many places in Italy, they said, had been preserved from the pestilence by the adoption of strict segregation and the exclusion of all suspected arrivals; and other places might enjoy the same immunity by like measures, if promptly and energetically used.

The delegates from Spain and Portugal, while admitting that it is mainly by carrying out sanitary measures on board merchant vessels, and also in all sea and river ports which are very generally noted for their extreme unhealthiness, that the spread of cholera can be checked, contended that, until such measures have been universally and efficiently carried out, quarantine must be continued.

The Russian delegates stated that, in consequence of the unsuccess of the practice throughout Russia during the first epidemic in 1830-1, no regular quarantine measures were anywhere adopted on the second visitation in 1847. The epidemic of that and the following year proved, however, to be more widely spread and more fatal than on the former occasion; and as their Government had been informed that the conterminous countries of Sweden and Silesia had recently (1850-1) been preserved from the pestilence by the adoption of energetic restrictive precautions, Russia had not come to a definite decision on the question, but awaited the results of further trial and observation.

On two points, however, experience, they said, appeared to be conclusive, viz., that the disease, when occurring only in sporadic and occasional cases, is certainly not importable by intercourse; and, secondly, that the only *fomites* or articles capable of transmitting the cholera poison are bed or body clothes fouled with the excreta of the sick.

The final decision of the Conference, as carried by a majority of votes, was that all arrivals whatever from a place where cholera exists should be liable to a quarantine of observation of five complete days, the voyage being included in this period, before free pratique is granted.

If a case of the disease occurred during the voyage, the quarantine to date from the arrival of the vessel; and, if during the performance of quarantine, a fresh detention to be imposed from the date of each such occurrence.

With respect to cargoes generally, it was decided that they shall

never be required to be disembarked into a lazaret, or be subjected to any other measures of purification, except free ventilation on board, and due attention to the cleanliness of the vessel itself.

These remarks apply to arrivals from countries actually infected with the cholera. A shorter quarantine of observation, namely, for three days only including the voyage, might be imposed on arrivals from countries which a local board of health should consider to be compromised, either by proximity to an infected place or otherwise, although the disease may not yet have manifested itself.

Yellow Fever.—The quarantines against this disease are made much more severe than for the cholera. A 'minimum' and a 'maximum' period of detention are appointed, according to the length of the voyage, the occurrence or not of suspicious sickness during the voyage, and other circumstances to be determined by the authorities in the port of arrival.

The minimum period shall be from five to seven days, the maximum from seven to fifteen days.

Should the voyage have exceeded thirty days, and have been quite free from sickness, and should the vessel be found to be in a good sanitary condition on arrival, the detention may be reduced to three days.

With respect to the treatment of the cargo, simple aeration on board may suffice if the voyage has exceeded ten days, and no sickness whatever has occurred since leaving the port of departure. But when any case of the disease has occurred on board, or if the voyage has been shorter than ten days, a local board of health may require, if it sees fit, the same strict precautionary measures, viz., disembarkation and disinfection in a lazaret, to be adopted as in the case of the plague.

As numerous instances had come to the knowledge of the Conference where long and expensive detentions had been imposed on the score of the yellow fever, and where it was afterwards discovered that no disease of the sort existed in the place at the time of the vessel's leaving it, it was decided by a majority of votes that the actual and ascertained existence of the fever in the port of departure should, in future, be duly certified by the local authorities, to warrant the issuing of foul bills of health. The delegates from Spain, Naples, and the Roman States, nevertheless, strongly resisted this decision—on what reasonable grounds it is not easy to imagine.

With the exception of M. David, who had resided for many years as French consul in the West Indies and America, none of the delegates seem to have had any practical acquaintance with the yellow fever in its native localities. As usual in such circumstances, their views were derived rather from individual and detached statements of others than from the sifted results of comprehensive observation. Several of the assertions made by the Spanish and Portuguese delegates were obviously incorrect.

The Plague.—Against this, the most dreaded because the least known, of pestilential diseases, quarantine has hitherto been directed

with especial rigour, and in this spirit the decisions of the Conference were framed.

As in the case of the yellow fever, a minimum and a maximum period of detention was imposed on all vessels, whether sick or well, coming from an infected or suspected port ;—the former to be of ten days, and the latter of fifteen days' duration.

An extra and special precaution was to apply to vessels arriving from any port in the Ottoman dominions, viz., of requiring that even when they brought clean bills of health, or, in other words, a certificate that the port of departure was quite free from any disease, a period of from eight to ten days (according as there shall or shall not be a medical officer on board) must elapse after sailing before free pratique shall be granted.

This precaution was to continue in force until the Turkish Government had completed the promised sanitary organization throughout their dominions, and also until European medical officers had been appointed by the different States, represented at the Conference, to reside as official superintendents of health in the principal towns and seaports of Turkey, after the example set by France ten or twelve years ago.*

It was decided that quarantine for the plague can only be duly performed in a port which is provided with a properly-appointed lazaret, where cargoes and persons may be landed for fumigation and the other customary appliances of disinfection. Mere detention on board ship and exposure to the air should not be deemed sufficient.

Moreover, the old and obsolete (it had been thought) threefold classification of cargoes and articles of merchandize is virtually retained : viz., into the highly susceptible, or such as are deemed especially liable to receive and retain the poison germs of the plague—the moderately susceptible—and the non-susceptible. Woollen and silken goods still belong to the first class ; cotton and linen goods to the second. Disembarkation into a lazaret, and fumigation, &c., are to be obligatory for the former ; but these measures are optional, or at the discretion of the health authorities, for the latter.

Letters, books, and newspapers, also all live animals, shall continue to be treated as hitherto.

It is satisfactory, notwithstanding the retention of such rigorous practices, to know that all the delegates, with the exception only of the Papal and Neapolitan, confirmed the important result of Sir W. Pym's observations in 1844, that not a single authenticated instance of the plague has occurred in any lazaret throughout the Mediterranean

* Among the recommendations of the Conference was that of advising the appointment of resident official physicians in different places in the West Indies, &c., for the accurate study, on the spot, of yellow fever. But abundant evidence, of the most instructive description, has since then been obtained, during the long and wide-spread prevalence of the pestilence in various countries of the New World since 1851. It is not more evidence that is wanted, but more of impartial discrimination and the simple love of truth in dealing with what is already before us.

among all the men engaged in handling the cargoes of infected or suspected vessels, or of a case of the disease having ever been known to be introduced into a country by cotton bales or other similar goods.

So much for the quarantines recommended by the Conference against the cholera, yellow fever, and the plague. In order to make, it would seem, assurance doubly sure on the side of presumed safety by such measures, it was resolved that, even after the certified cessation of any one of these diseases in a place, a specified period must elapse before clean bills of health should be issued therefrom, viz., of ten days for the cholera, twenty days for yellow fever, and thirty days for the plague.

But in addition to these three diseases, the occurrence of other transmissible diseases, as typhus, small-pox, &c., on board a vessel shall warrant the imposition of such quarantine as the local authorities may determine upon the infected vessel itself, but not upon the country whence she came, nor upon other vessels arriving therefrom. In other words, the quarantine shall be individual, not general;—on the sick ship, but not on her port of departure. It is most necessary to attend to this distinction in all considerations of the subject.

Besides the various points already noticed, there were several other incidental and connected topics learnedly discussed by the delegates. One of the most important of these was the existing sanitary and hygienic condition of Turkey and Egypt, and the results of the system of health police which had been established in these countries ten or twelve years previously. The remarkable cessation—may it prove permanent!—of the plague in the very countries which had for ages been regarded as the chief birth-place and nursery of the pestilence, and the fact of this cessation being nearly contemporaneous and concurrent with the establishment of comprehensive sanitary measures, were set forth, with numerous interesting details which cannot, however, be given here.

The defective sanitary state of most merchant ships, and the much-required improvement of the accommodation for the crews, as well as of their victuals and of the quality of the water supply, attracted much attention from the Conference. All the members concurred in the necessity of a more minute and vigilant inspection of vessels, and of all on board, both before departure and upon arrival. A large amount of sickness and many deaths during the voyage would thus be prevented, and the working efficiency of the crew materially increased.

The unwholesome condition of most sea and river port towns, and of docks and harbours, notoriously favouring the development and spread of all epidemic diseases, was also universally admitted; and great praise was awarded to the first General Board of Health in this country for the views promulgated by it on this head.

To mark their sense of the risk to the public health by the neglect of sanitary measures on board merchant vessels, the Conference resolved that ships arriving in a foul and unwholesome condition, even although they had clean bills of health and no sickness had occurred during

the voyage, should be treated as if they had foul bills, and be subjected to quarantine detention and purification.

In the converse case, however, no abatement of the usual restrictions was proposed.

Such is, I believe, an exact epitome of the six months' labours of the International Conference, drawn from the minutes of their proceedings which were printed at the time by the French Government, but have not been made public. The convention, based upon and embodying the results of their deliberations, has hitherto been adopted by only a few of the represented Powers, viz., by France and Sardinia, in the first instance, and at a later period by Portugal, Tuscany, and Turkey. This country among others has, most wisely I think, declined to follow the example; for there is certainly much in the proposed restrictions upon freedom of intercourse, on account of the apprehended risk of imported disease, that appears to me to be unnecessary, and therefore objectionable. And it is a fact not undeserving of notice, that, in more than one of the countries which took part in the Conference, the quarantine system pursued since 1851 seems to be now actually more vexatious and oppressive than it was before.

The only comment which I propose to make on the leading conclusions of the Conference are in the form of two interrogatories, addressed to the medical profession, with the view of directing attention to an exact and scrutinizing investigation of the points submitted.

1. What evidence is there to show that any of the three diseases against which quarantine is specially directed, viz., cholera, yellow fever, and the plague, has ever been introduced into any place or country by a vessel on board of which no case of disease had occurred during the voyage, and which was also free from sickness on arrival?

2. On what trustworthy evidence rests the doctrine that, while the lapse of five days of exemption from any signs of the cholera among the crew and passengers in a ship is considered to be a sufficient guarantee against the risk of that disease being imported, double and triple that period is necessary for the like security in respect of the yellow fever and the plague?

The elucidation of these two questions is, it is obvious, intimately connected with a right decision on the fundamental principles of existing quarantine legislation and practice.

LONDON :
SAVILE AND EDWARDS, CHANDOS STREET,
COVENT GARDEN.