In a letter to his fiancée, Natalia Goncharova, dated September 9, 1830, A.S. Pushkin lightheartedly referred to cholera as “*une tres jolie personne.*”[[1]](#footnote-1) But in a letter to P.A. Pletnev written on the same day, his tone was notably different, as he described his melancholy and dark thoughts. “*Cholera morbus* is near me. Do you know what kind of creature that is? Look at how it bustles to Boldino, and snaps at [*perekusaet*] us all.”[[2]](#footnote-2) His subsequent letters are characterized by repeated notes of both aggravation and worry, with Pushkin unable to get out of Boldino given the imposition of quarantines. In a letter to P.V. Nashchokin from Tsarskoe Selo dated June 26, 1831, Pushkin described cholera as a ”new guest” in St. Petersburg, and expressed relief that Nicholas I’s appearance on Haymarket Square had calmed the angry crowd and that “the matter was gotten around without cannons, and, G-d willing, without the knout.” A few days later, however, he noted with some consternation that “the epidemic is making great ravages in Petersburg,” and that while Nicholas I lacked neither courage nor oratory skill, disturbances had reemerged and the tsar might have to have recourse to “*la mitraille*.”[[3]](#footnote-3) Pushkin’s play, “*Pir vo vremia chumy,*” was written during Russia’s first cholera epidemic.[[4]](#footnote-4) A year later, when cholera had spread to France, Paris’ elite attended elaborate masquerade parties and danced to “cholera waltzes” costumed as the ghoulish corpses many would soon become. These served as the inspiration for Edgar Allan Poe’s “Masque of the Red Death.”[[5]](#footnote-5)

In his diary entry from September 25, 1830, Aleksandr Nikitenko wrote that “cholera is already in Moscow. It’s official…We are making serious preparations for the reception of this terrible guest. Prayers are being offered in churches for the salvation of our Russian land. The common people, however, more willingly visit taverns than G-d’s temples. They alone do not grieve, while grief reigns among the upper classes.”[[6]](#footnote-6) Nikitenko offered greater details about the cholera epidemic in the capital, writing in June of 1831 that “cholera, in all its horror, has finally appeared in St. Petersburg as well. Severe, stern precautionary measures are being taken everywhere. The city is in distress. Almost all communication has been interrupted. People leave their homes only in extreme necessity or to go to work.”[[7]](#footnote-7) The next day he noted that “there are few doctors in the capital and it’s difficult to get hold of them now,” adding that “people are very unhappy in the city with the way the government is handling the situation. The emperor has left the capital and almost all the members of the State Council have left too. The governor-general can scarcely be relied upon. The infirmaries are organized in such a way that they are nothing more than a stopover from home to the grave. Superintendents were appointed in every section of the city, but they were chosen from among people who were weak, indecisive, and indifferent to the public welfare. The sick are carelessly attended to. It is understandable that poor people consider themselves lost if the question of moving them to a hospital is merely raised. Meanwhile, the sick are being taken there indiscriminately, with and without cholera. Sometimes drunks are simply picked up in the street and thrown in together with them. People with ordinary ailments are infected by those with cholera and meet the same end. Our police, who have always been noted for their insolence and extortionate practices, have become even more shameful, instead of being helpful in these sad times. Since there is no one to rouse the people and inspire trust for the government in them, disturbances are beginning to break out in various sections of the city.”[[8]](#footnote-8) On June 27, Nikitenko wrote, “a kind of apathy toward life is beginning to take hold of me. Of the several hundred thousand people now living in St. Petersburg, all now stand on the brink of death, while hundreds are flying headlong into an abyss which yawns, so to say, under the feet of each one of us.” The next day, June 28, Nikitenko continued his despairing account, writing “the disease is raging with diabolical force. One has only to step outside to run into dozens of coffins on their way to the cemetery. The people have shifted from a rebellious mood to mute, deep despair. It seems as if the end of the world has come and people, like condemned men, wander among the graves, not knowing whether their own final hour has already struck too.” In a diary entry some forty years later, in 1872, he described the terror that cholera outbreaks continued to inspire. “If your stomach rumbles, or you feel slightly different from usual, or you sense the slightest change in the normal pattern of your day, you imagine that disaster is about to strike. What is one to do? Common sense tells us to be careful, especially with our food and, without losing heart, to leave the rest to fate.”[[9]](#footnote-9)

Pushkin and Nikitenko provide striking accounts of the first of the six cholera pandemics that struck Russia, and they provide some sense of the fear, confusion, and existential despair (at least in Nikitenko’s case) that must have been experienced by many Russians in 1830-1831. Their personal accounts also contribute to an understanding of the governmental and social responses to the epidemic, describing measures by the authorities that aggravated and disappointed the populace, at times provoking revolt.

The term cholera originated in humoral theory to describe an illness associated with the expulsion of an excess of yellow bile (or choler).[[10]](#footnote-10) By the early nineteenth century, cholera was used as a general description for gastro-enteritis characterized by vomiting and diarrhea. Ambiguities of terminology persisted for some time after the first appearance of the infection that we now term cholera, as it was difficult “to distinguish the old friendly diarrhea from the newly invading enemy.”[[11]](#footnote-11) The first symptom of cholera is profuse diarrhea, becoming watery and lighter in color over time; vomiting usually commences a day or two later (sometimes occurring simultaneously).[[12]](#footnote-12) An enormous amount of liquid is lost by the individual afflicted, with the expulsion of up to thirty liters in diarrhea and seven liters in vomit. Thereafter, cardiac activity is weakened, the face and extremities turn blue, urination ceases and body temperature drops.

*Vibrio cholerae* is a microscopic, comma shaped species of bacteria, collecting in and on copepods, adhering to the eggs and the interior lining of their guts and feeding on their shed chitin (Shah, 18). They flourished in the warm, brackish coastal waters of the Sundarbans, an expansive wetlands at the mouth of the Bay of Bengal. Contact with humans came with the East India Company and British development in the region, and the first epidemic began in Jessore in August of 1817 following a particularly heavy rainfall. The bacteria at this point developed a toxin that allowed it to get rid of competitors in the human gut, leaving it to colonize the organ undisturbed and also allowing for transmission from one victim to another. Ten thousand perished as the disease spread through Bengal in 1817.[[13]](#footnote-13) The bacteria irritates the intestinal walls and capillaries and erodes and kills the cells in the lining of the intestines. The shed mucus and epithelial cells account for the rice-like substance excreted.[[14]](#footnote-14) It’s actually incredibly difficult to develop the disease, and healthy individuals can survive quite heavy doses of infection, as stomach acids generally kill the cholera bacillus.[[15]](#footnote-15) About seventy percent of those infected with the cholera bacillus will be asymptomatic, and a further fifteen to twenty-three percent will develop only a mild illness.[[16]](#footnote-16) Cholera is most likely to affect those who are malnourished or with weak digestive systems, those who live in overcrowded housing with shared toilet facilities, who regularly come into contact with contaminated food or sanitation systems, or who draw their water from infected supplies.

The cure for cholera is “almost comically simple.” “As deadly as cholera is, its tenure in the body is really more like a visit from an unpleasantly demanding guest than a murderous assailant.”[[17]](#footnote-17) Effective hydration reduces mortality from fifty percent to less than one percent, with oral rehydration or an intravenous saline solution for more serious cases. Yet, as Hamlin notes in the opening to his work, “for most of the nineteenth century it could not reliably be prevented, avoided, or cured.”[[18]](#footnote-18) In fact, older theories of cholera often represented fluid loss either as desirable or as incidental, as humoral theory held that the expulsion of bile, in vomit and diarrhea, was restorative rather than pathological. Conceptions of cholera and the wide range of treatments essayed while be discussed below. The characteristics of cholera, its ability to kill amazingly quickly, and the lack of effective treatment all meant that repeated outbreaks of the disease in the nineteenth century would have enormous repercussions for the societies affected. As Morris noted, “Cholera was humiliating, uncivilized, an affront to nineteenth-century sensibilities.”[[19]](#footnote-19) Erismann, Russia’s leading sanitationist at the end of the nineteenth century, described cholera as complex and mysterious, like a sphinx “which instills fear with its deadly gaze, but which we still cannot understand, in spite of the fact that thousands of scholars in all the countries of the earth have been occupied with its solution.”[[20]](#footnote-20)

There have been seven cholera pandemics since the start of the first outbreak in 1817; the latest of these, caused by a new strain of the cholera bacillus called El Tor, began in 1960 in Indonesia (this is the strain that affected Haiti’s population in the wake of the 2010 earthquake, when it was carried to the country by UN relief workers from Nepal). The most accepted chronology for cholera pandemics is 1817-1824, 1829-1851, 1852-1859, 1860-1875, 1881-1895, 1899-1923 and 1960 onward. In the first pandemic, cholera was carried by English troops from India to Arabia in 1821, spreading thereafter to Persia and Turkey and on to the Transcaucasus, appearing in Astrakhan in September of 1823. Official reports stated that cholera cases occurred in Astrakhan from September 15 to October 3, during which time 192 of 370 of those infected died.[[21]](#footnote-21) Cholera would disappear from the Russian empire thereafter, reappearing in 1829 with the first outbreak in Orenburg, spreading thereafter in Russia and then into Western Europe. The third pandemic travelled much the same route as the preceding one, peaking in 1847-1848 with additional spike in cases during the Crimean War. The Suez Canal and steam ships speeded up the spread of cholera from India to Europe during the fourth pandemic, reducing the time of transmission from two to three years in earlier pandemics to a period of several weeks. In 1865, cholera travelled from Egypt to the Mediterranean and on to Western Europe and America. In this instance, cholera came to Russia from the west in a reversal of the usual trajectory. The fifth pandemic, in the 1880s and 1890s, was very limited in Western Europe, due to advances in bacteriology and more effective sanitary controls. In contrast, the 1892 epidemic was among Russia’s most severe outbreaks. The sixth cholera pandemic lasted much longer than earlier ones, and was especially lengthy in Russia, connected to the disruptions of World War I, the Civil War, economic collapse, and famine in the Volga region, while it did not affect the United States or Western Europe at all. Thus, modernization is associated with both the spread of cholera as well as the measures instituted to meet it, and what might be most notable is the divergence in the experience of cholera in Russia and the West in later cholera epidemics.

In her study of the first cholera epidemic in Paris, Kudlick remarked that cholera was “the most mysterious and terrifying killer in nineteenth-century Europe. Cholera’s unknown causes, gruesome symptoms, and perceived preference for poorer neighborhoods made it a modern disease of unusual social significance.”[[22]](#footnote-22) And in the introduction to their collected volume, Ranger and Slack write that “the most radical responses may be expected to follow epidemics which are novel, violent and intense, random (at least as initially perceived), and associated with other social disturbances.”[[23]](#footnote-23) Much of the historical research on cholera focuses on the first pandemic, and it tends to concentrate on connections to industrialization, urbanization and commercial culture (which may be less relevant in the Russian context, particularly in the case of the earlier outbreaks).

Cholera began to attract the attention of social historians in the 1950s and 1960s, with early works by Louis Chevalier, Charles Rosenberg and Roderick McGrew. McGrew, in his brief study of the first cholera epidemic in Russia, refers to the “Chevalier thesis,” which “emphasizes that epidemics do not create abnormal situations, but intensify the normal aspects of abnormal situations.”[[24]](#footnote-24) Most works on cholera open with an obligatory reference to Asa Briggs’ 1961 article in *Past and Present*, in which he argued for placing medical history within its social and political context and called for additional comparative study. Cholera, Briggs argued, “quickened social apprehensions…It exposed relentlessly political, social and moral shortcomings.”[[25]](#footnote-25) In a 1988 article in *Past and Present,* in what is in essence an update of Briggs’ earlier article in the same journal, Richard Evans repeats Briggs’ call for comparative work, and he additionally notes that cholera outbreaks beyond the first have garnered little attention, while taking care to reference his own rather lengthy study of the 1892 epidemic in Hamburg.[[26]](#footnote-26)

Historians have focused on the responses of government, the medical profession, and the broader populace to cholera outbreaks. Some argue that epidemics bring out latent social tensions, leading to conflict, violence, and in some cases, revolt and revolution, thus seeing cholera as a test of social cohesion, while others have maintained that its impact wasn’t particularly significant. Evans notes that cholera was “an object of peculiar terror and revulsion to the contemporary imagination,” undermining bourgeois optimism by exposing urban poverty and degradation. “In this way, confidence in bourgeois society as the epitome of progress and civilization was precariously maintained by ascribing the ravages of the disease to the uncivilized nature of the poverty-stricken masses.”[[27]](#footnote-27) In turn, Evans writes, the poor could see the bourgeoisie’s relative immunity from the disease as evidence of exploitation and injustice, and perhaps as a purposeful effort to do away with the poor.

Historians like Evans have thus tied cholera outbreaks and responses to them to the challenges of modernization, with an increasingly interventionist state, a developing medical profession, and the challenges of urbanization. “Since at least the era of absolutism, preventing and dealing with contagious and epidemic disease have together been one of the major tasks of states.”[[28]](#footnote-28) The nature of government measures and their effectiveness depended upon the level of development of state administration as well as the contributions of the scientific and medical communities. As will be discussed at some greater length below, contagionist theory led the state to institute cordons, quarantines and sequestration in response to cholera epidemics, while localists (most often miasmatists) would look to remove or correct the environmental causes of disease. In the late 1940s, Edwin Ackerknecht argued that the policies elaborated in response to epidemic outbreaks corresponded to the nature of the states instituting them. “Quarantinism, in this view, was authoritarian and interventionist in a drastic and imposing sense, legitimating the state’s right to infringe on its subjects’ liberties by invoking a higher good, posing a zero-sum tradeoff between individual and public weals. Sanitationism, in contrast, suited the desires of liberal polities not to interfere unnecessarily in the life of the individual, offering an approach to disease prevention that not only left civil society comparatively unhampered, but also identified the best means of prophylaxis as social and hygienic reform.”[[29]](#footnote-29) Ackerknecht wrote that absolutist states like Prussia, Austria and Russia saw epidemic disease as an invasion of foreign enemy agents, requiring a tightening of borders against potentially dangerous persons and things, and a clamping down on the minimal freedoms of movement, assembly, choice of medical care, and religious consolation then allowed.[[30]](#footnote-30) In contrast, anticontagionism held sway in liberal states, it was argued, with the belief that while cleaning and strengthening the population might help but repression gained nothing. Hamlin argues that Ackerknecht’s theory has held up over time, although it overlooks vacillation and oversimplifies the problem that cholera posed. This was certainly true in the Russian case, as will be discussed below.

“Its name has become a by-word of terror for the Russian peasant, and cholera has long been with him a favorite expletive and term of abuse.” Seven of the twenty-seven outbreaks of cholera in Russia claimed over 100,000 victims. The number of cases and deaths for 1831, 1848, 1853, 1855, 1871, 1872 and 1892 are as follows: 466,457 and 197,069; 1,742,439 and 690,150; 249,788 and 100,083; 331,025 and 131,327; 322,711 and 124,831; 310,607 and 113,196; 331,077 and 151,626 (with essentially unchanged death rates of 42.2, 39.5, 40.0, 39.7, 39.0, 36.4, and 45.8).[[31]](#footnote-31) Drankin provides different figures for the first cholera epidemic in Russia, as he states that 534,000 people were infected, with nearly 230,000 dying.[[32]](#footnote-32) This paper is an early examination of the first cholera epidemic in Russia, part of a broader research project on the history of cholera in imperial Russia and the early Soviet state from the 1820s to the 1920s. The English language literature on cholera in Russia is relatively small, with Roderick McGrew’s 1965 study of the first cholera epidemic bracketed by Charlotte Henze’s recent monograph on cholera in Saratov (with particular attention to the 1892 epidemic). Cholera has also figured into a number of articles on the medical profession in imperial Russia and on questions of urbanization and empire.[[33]](#footnote-33) This ongoing project will contribute to an understanding Russia’s medical history, along with the use of cholera outbreaks as a means of examining the changing relationship between state and society over this century long period.

A report from Tiflis dated July 17, 1823 indicated that cholera had appeared in the Talishchinskii canal district in May and that four men died of it in the Lenkoran fortress on the Caspian Sea. Several newly graduated physicians were ordered to Georgia to join the personal staff of the Governor-General. Reman urged the government to prepare for a major epidemic, including the creation of a special cholera council.[[34]](#footnote-34) The Central Cholera Council was created in October 1823, a prototype for Zakrevskii’s Cholera Commission established in 1830. The work of the council, however, was minimal, consisting only in the collection and dissemination of data, and the council disappeared in 1824.

Cholera spread from Afghanistan to Khiva and Bukhara, reaching Orenburg, a major military post and trading center situated on the still turbulent frontier between the Kazakh steppe and European Russia, in late August of 1829 when a private in the Third Battalion of the Orenburg Line fell ill. A week later, the wife of the Neplevskii school treasurer died after a brief but violent illness, with several more cases following in the days that followed.[[35]](#footnote-35) Orenburg’s governor, doctors and customs officers initially felt that the evidence of an epidemic wasn’t convincing enough to justify a quarantine of Bukharan caravans.[[36]](#footnote-36) The disease quieted down in the fall and winter of 1829-1830, reappearing in Astrakhan and spreading up the Volga to Tsaritsyn, Saratov and Samara. Within twenty-four hours of striking, more than two hundred deaths were recorded in Astrakhan.[[37]](#footnote-37) The civil governor and director of police were among the first victims, and local administration collapsed. “Hysteria swept the city, and the population fled into the surrounding hills.” Panicked flight from towns served to spread the disease. The epidemic reached the peak of its intensity in Astrakhan between July 20 and August 15, with a mortality rate surpassing that in any major Russian or European population center during the first pandemic. 3633 cases were reported, with 2935 deaths for a 90.8% mortality rate; in the province, 5912 cases were reported between July 4 and August 27, with 4856 deaths (a mortality rate of approximately 82%). V. Borshchevskii, an inspector of the local *uchilishche* in Samara, wrote of the people’s despair at the spread of cholera in the town, with people going to nearby churches and repenting all day long, rushing in to take extreme unction in anticipation of their deaths.[[38]](#footnote-38) In Kazan’, Lobachevskii, the university provost, set up an anti-cholera committee and two hospitals staffed by the university’s medical faculty. Medical students were sent out into the city and surrounding districts, and the city’s physicians met every evening at the university. The university itself was closed off from the city, with a guard posted; all letters, papers and other goods brought to the university were to be fumigated with chloride. Lobachevskii would later report that these measures of quarantine, disinfection, and isolation of the sick had protected the university against cholera, with not a single student or faculty member falling ill.[[39]](#footnote-39)

In contrast to the position taken during the earlier cholera outbreak in Orenburg, in 1830 the governor, Pavel Sukhtelen, supported by most of Orenburg’s doctors, established quarantines on the borders of the province. These would be deemed “excessive” by the central government.[[40]](#footnote-40) Both Count A.A. Zakrevskii in Ministry of Internal Affairs and Count E.F. Kankrin in the Ministry of Finance would oppose extending quarantines, citing the danger of disrupting trade and creating unrest thereby. General regulations issued on July 8 and August 12, 1830 greatly modified quarantine rules for cholera, flatly contradicting the recommendations made by the Central Medical Council.[[41]](#footnote-41) The August 12 decree forbade provincial governors from exercising their own discretion on quarantine regulations and required clearance from St. Petersburg for all such steps. Hastily established medical boards were to report directly to St. Petersburg. The central government was concerned that too zealous a quarantine policy would undermine trade as well as attendance at the Nizhnii Novgorod fair scheduled for late summer. The fair was held in 1830 and 1831 in spite of the cholera epidemic, and would in fact hasten its spread.[[42]](#footnote-42)

It was only on August 28 that Zakrevskii presented a special memorandum on cholera to the tsar, with the disease already rapidly advancing within the empire. The cabinet acted on his proposals the following day, although Zakrevskii would not leave for Saratov until September 9, arriving only on September 20 (the cholera outbreak there had begun in early August, peaking in late August and early September). The central commission on cholera, led by Zakrevskii, simply added another layer of administration in responding to the epidemic. “Tsar Nicholas and his view of autocracy were primarily responsible for the cholera commission’s administrative weaknesses, and that responsibility began with the men whom Nicholas selected as his ministers.”[[43]](#footnote-43) Zakrevskii’s entire experience prior to his becoming Governor-General of Finland was with the army, “and he brought a ritualistic faith in organization and chain of command to his administrative work.” He was honest, McGrew notes, but lacked the necessary imagination in meeting the challenges presented by the epidemic. “Here was the dilemma. The cholera had created a situation which could not be handled uniformly, a situation which demanded flexibility and initiative. To grant such initiative was beyond Zakrevskii’s authority, and to recommend it was beyond his capacity.”[[44]](#footnote-44) The cholera commission relied on cooperation with local authorities, but Zakrevskii quickly alienated them, resulting in “conflict, recrimination, and chaos.” The commission was both inundated and bypassed, as Zakrevskii wrongly conceived of its work as akin to a military campaign. He probably did his most effective work in Kazan’, where he moved his headquarters in October. By that time, Zakrevskii was pushing for extreme protective methods, closing all schools, churches and markets, and employing military force to enforce these measures.

The Medical Council, which included a number of prominent academics, was to collect information about the epidemic as well as provide the medical personnel and supplies to counter it.[[45]](#footnote-45) M.I. Mudrov (who would die of cholera himself in 1831) headed off to Saratov, already in the grip of the epidemic, along the way writing a short brochure on cholera describing the disease and the means for preventing it. A month after its establishment, the entire Medical Council would relocate to Kazan’. The members of the council were to consider the reports sent daily from a large number of provinces to the Ministry of Internal Affairs and to offer their conclusions. Its members produced a lengthy tract about the ongoing epidemic, drawing upon information gathered in Russia as well as works produced in Paris and Berlin. This work, *Traktat o poval’no-zarazitel’noi bolezni cholere byvshei v Rossii v 1830 i 1831 godu*, reflected the challenges to physicians in Russia as they attempted to make sense of this deadly epidemic. The second chapter on the causes of cholera opens with an admission of the lack of clarity on this issue, with most supporting some form of (airborne) contagion, including the possibility of transmission by goods. This stance is in contrast to the dominance of miasmatic theory in the West during the first pandemic. At the same time, like their colleagues in the West, the members of the Medical Council recognized that poverty made individuals more susceptible to the illness, noting the influence of “the everyday despair, grief, overwhelming cares and in general oppressive psychological tribulations*.”[[46]](#footnote-46)* The Council was divided in its recommendations regarding the treatment of cholera, and the imperial government sponsored an essay contest on cholera, promising 25,000 rubles in state bonds as a prize.[[47]](#footnote-47)

Cholera continued to spread inexorably, largely following trade routes within Russia. James Keir, an English physician working in Russia during the first cholera epidemic, had heard that the first cases in Nizhnii Novgorod were of two boys employed in sorting unshorn sheep skins brought by bark from Astrakhan. The two boys died, as did a woman who lived with them. He added, “I incline to the opinion that the disease was imported to Moscow from persons coming from Nijney [sic] or Saratoff [sic].”[[48]](#footnote-48) A physician in Moscow, whose report appeared in the *Edinburgh Medical Journal*, wrote that the disease appeared sporadically in Moscow between September 12 and 15, with over seven thousand cases in the city and over four thousand deaths by the time of his account in late November. He noted that it particularly affected the lower classes, “the ill-fed, ill-clothed, living in low and damp houses or cellars, and whose habits of intemperance, and carelessness of health, predisposed them to the action of the cause, whatever that may be.”[[49]](#footnote-49)

A rising tide of panic swept over the city as cholera took its toll. Some 50,000 fled, with those remaining in Moscow shutting themselves up with their private remedies or seeking solace in the churches.[[50]](#footnote-50) Prince Dmitrii Golitsyn, the military governor-general of Moscow, rushed back to the city from his estates. He convened the municipal medical council (which would meet daily) and made his first public announcement about the disease, asserting that the danger of a major outbreak was greatly exaggerated. At the same time, he established a quarantine on September 18, contrary to the government’s position that the disease was not contagious and could not be transmitted by goods. A temporary chief was appointed in each of the twenty quarters in the city, with a hospital in each quarter along with an inspecting physician and young surgeons and medical students under his charge. Carriages were provided to transport those stricken with cholera to hospitals, and strict orders were given to report all cases of illness to the police, who would then send a medical man to examine those who were sick and make a report. A general mobilization of available talent followed Golitsyn’s announcement, with private contributions pouring into the newly formed cholera committee and dozens of volunteers appearing to staff the cholera stations.[[51]](#footnote-51) Herzen praised this spirit of self-sacrifice, comparing it to that shown at the Time of Troubles and in 1812 against Napoleon. Francis Bisset Hawkins also noted the vulnerability of the lower orders to cholera, “the number of remarkable persons and of nobility who have fallen victim have been extremely small; their names, indeed, might be easily enumerated.”[[52]](#footnote-52) He posits that those in the affluent classes who contracted cholera might have been vulnerable due to “particular mental anxiety” or already poor health. The physician whose report appeared in the *Edinburgh Medical Journal* noted that dislike of the hospital on the part of the indifferent and ignorant lower classes led to delays in getting them medical attention. As a result, many arrived at the hospital half dead, without a discernible pulse, and he recorded that he managed to save only fifty-six of the one hundred and sixty-four individuals brought to his hospital.[[53]](#footnote-53)

According to McGrew, Golitsyn’s early handling of the outbreak left much to be desired, “and if we judge solely by his published denials and assurances, we must be critical indeed, for these reflected a blind unwillingness to face reality which is staggering in a responsible public official.”[[54]](#footnote-54) The deeper failure, McGrew, argues was that of the central government for not having made provisions against cholera’s spread to Moscow, and Golitsyn could not act until Zakrevskii had arrived in the city. Still, Moscow’s medical council was the most effective of those formed in 1830, grounded in local government and able to draw upon a large pool of medical and administrative talent. This included twenty-one physicians, the same number as were available to serve the entire Volga region. Moreover, the police in Moscow were never given the broad powers they received elsewhere, with less conflict with the population as a result. “Naturally, this does not mean that co-operation was complete, or that people lost their fears of the officials. Nor does it mean that brutality, crassness, and venality were banished. But it does suggest that there was a way to bridge the gap between the authorities and the people.”[[55]](#footnote-55)

Nicholas I wrote to Golitsyn expressing his intention to come to the city, “to share your dangers and your labors. We must submit to the decree of the Almighty!” He arrived in Moscow on September 29, at the beginning of the worst period of the epidemic in the city, and “was greeted by an outpouring of public enthusiasm, which was all the more passionate for the hectic time the Muscovites were going through.” “You are our Father, we knew you would come! Where there is trouble there you are!” (quoted in *Journal de St.-Petersbourg* October 11/23, 1830). Baron A.I. Delvig wrote two sentimental poems, “The Consoler” and “Tsar-Father” in honor of Nicholas I’s visit to the cholera-stricken city, and Pushkin’s “Hero” was published anonymously in *The Telescope* in 1831. Nicholas would remain in Moscow until October 8; “his only advice was to submit, to obey, to follow directions, and to submit to G-d’s will.”[[56]](#footnote-56) Nicholas celebrated his name day by raising the cordon sanitaire in Moscow on December 6. *Te Deums* were sung in both capitals to mark the deliverance of the city, and though the disease continued to ravage the provinces, the general feeling was that the worst was past. Yet, the 1831 outbreak would prove much more severe than that of the year before.

In 1830, cholera affected thirty-one provinces, with 68,091 cases and 37,595 deaths; in 1831, cholera attacked forty-eight provinces, with 466,457 cases and 197,069 deaths. In the 1831 epidemic, Moscow and St. Petersburg were particularly hard hit, with more than 250,000 cases and over 100,000 deaths (roughly one half of the total number of cases in the empire).[[57]](#footnote-57) On June 28, 1831 the British ambassador noted two cases of cholera in St. Petersburg, both were boatmen.[[58]](#footnote-58) Drs. David Barry and William Russell, who had been sent by the Privy Council to investigate this new epidemic in Russia, arrived in St. Petersburg three days after the start of the outbreak in the city, returning to England in mid-October. They had been on their way to Riga, given concerns about ships carrying contagion leaving the port for points west, but they couldn’t get there due to the quarantine imposed on the city. Russell had been a non-contagionist during his days in India, but he changed his mind about the transmission of cholera after his experiences in St. Petersburg. Barry would later be dispatched by the Privy Council to report on the outbreak in Sunderland, the location of the first cases of cholera in England.

In their report dated January of 1832, Russell and Barry closed with thanks to the Russians, noting “in no part of the world have we found more highly cultivated, nor more zealous men in our own profession, than in St. Petersburg.”[[59]](#footnote-59) Given the number of patients and the ineffectiveness of the treatments administered, “a feeling of disappointment, and almost despair, seems at times to have dispirited the medical officers," as they adopted one extreme practice after another. Cholera carts travelled the city, and corpses laid in the streets. Orders were given to bury the dead at night, with one contemporary account describing these funeral processions without clergy or accompaniment.[[60]](#footnote-60) Theaters closed on July 3, after a member of the audience at a show collapsed in a corridor, turned dark and died. There weren’t enough hospitals or doctors, and most members of the government fled the city. The authorities in St. Petersburg ordered that those stricken be taken to the nearest cholera hospitals without distinction of rank if they could not be treated at home. The police took this as orders to bring people in; P.P. Karatygin later remarked that they acted with “the mercy [miloserdie] of dog catchers,” at times rounding up people who had simply had too much to drink. In five weeks, over 10,000 of the city’s 440,000 people had died.[[61]](#footnote-61)

As the capital city was being ravaged by cholera, the imperial government struggled to develop policies that would be effective against this previously unknown scourge. “In August 1831, the Russians gave up trying to impose cordons around the infected areas in the vast land. Their attempts had long descended into farce anyway.”[[62]](#footnote-62) Economically, quarantine and sequestration policies proved to be a disaster, with objections raised by mercantile and commercial interests. The threat of popular unrest, pressure from commercial interests, and the state’s own concerns about the cost of quarantine measures, hospitals, etc. led to a moderation of the initial regulations. In the winter of 1829-1830, the Russian government had relaxed the most economically damaging policies. The Medical Council of Moscow let itself be convinced by Dr. F.C.M. Markus, with close ties to the local merchant community, that cholera had not been imported by persons or goods and therefore that quarantines and cordons were useless. Moreover, “the restrictions prescribed were so extensive and complex, requiring so powerful an administrative machinery, that they were in effect unworkable.”[[63]](#footnote-63) The government lacked the resources for effective cordons, in addition to insufficient hospitals and medical personnel. Bribe taking was widespread among quarantine officials, who might reduce the quarantine period from two weeks to as little as two hours.[[64]](#footnote-64)

The Central Cholera Commission was not reconstituted in 1831, and local officials and cholera councils carried the brunt of the campaign. However, McGrew argues that the more relaxed approach of 1831 did not markedly improve government efficiency, with continuing shortages of medicine and personnel, along with persistent administrative abuses of all kinds. The bureaucratic mentality still failed to grasp the social realities associated with cholera, and the government’s actions during the cholera epidemic “reinforced the popular identification of public servants with exploitation and persecution.”[[65]](#footnote-65)

Physicians both in Russia and the West also struggled to make sense of this new and devastating illness, termed *cholera morbus* to distinguish it from *cholera spasmodica* (designating run of the mill gastroenteritis). The treatment of cholera in the nineteenth century was “largely a form of benevolent homicide.”[[66]](#footnote-66) Keir, like many physicians at the time, asserted that treatment should aim to assist nature in the course of the disease through the use of “diluents” and “a prudent and well-timed use of opium.”[[67]](#footnote-67) If caught before vomiting had begun, he noted, then bleeding, application of leeches to the epigastrium, hypochondria and “the neighborhood of the anus” was suggested, along with warm salt water baths, friction with “stimulating embrocations” and the application of blisters and dosing with calomel (mercurous chloride). The range of remedies proposed for cholera varied widely, but treatment most frequently included dosing with calomel, “which could destroy patients’ gums and intestines before finally killing them from mercury poisoning,” along with laudanum. Other treatments included blistering plasters (using mustard, ground Spanish flies, or boiling water), enemas might be applied (using turpentine or tobacco), along with bleeding of anywhere from eighteen to thirty ounces. The latter was designed to alleviate the congestion of the venous system; one of the most frequently remarked upon symptoms of the disease was a profound thickening of the blood.[[68]](#footnote-68) Barry and Russell described an attempt in St. Petersburg to inflate the stomach with air via the anus, along with the application of electric shocks (they noted that the patient died an hour later in the latter case). In deploying all sorts of treatment for the illness, some physicians even stumbled upon the idea of rehydration. Ysenbeck and Brailow, two German physicians, reported to the Medical Council that in the preceding eleven days they had treated thirty patients at the customs house hospital, none of whom had died. The patients had been given two tablespoons full of salt in six ounces of hot water, then one tablespoon in cold water every hour thereafter. Still, these physicians noted that “they always begin by bleeding.”[[69]](#footnote-69)

Russell and Barry surmised that cholera was brought by persons and/or boats travelling up the Volga, “have brought something with them, which, disseminated in the atmosphere” caused the outbreak.[[70]](#footnote-70) The predisposing factors they listed include Russians’ coarse food, crowded housing, infrequently changed sheepskin clothing, and protracted religious fasts followed by intemperate eating and drinking. If cholera were to reach England they believed that “cleanly habits and a mild climate will mitigate its severity.” Government regulations issued to the inhabitants of Nizhnii Novgorod included avoiding chills and keeping one’s feet dry, not sleeping in the open air, not eating too much food, particularly “indigestible” fruits and vegetables, abstaining from strong drink and “a heating diet” (especially garlic). People were also advised to keep themselves and their living quarters clean, to keep windows open and in rainy and damp weather to aerate rooms with vinegar and spirit of juniper, not to go out in the morning on an empty stomach and to avoid exhausting labor. The police were to be informed right away if someone in the household fell ill, and if someone died their linens and bed should be washed and aired and not used for at least four days, with the body interred within twenty-four hours. The instructions issued to the populace also asserted that “a very important means of safety is to repress all tendency to depression or chagrin, and to preserve, on the contrary, a cheerfulness and tranquility of mind.”[[71]](#footnote-71) It was believed that states of mind influenced receptivity to disease, and strong depressive emotions were to be avoided. “Time and again, activities that improved the mood, keeping one distracted and content, were recommended. The fear of disease itself, choleraphobia, was widely considered a dangerous factor.”[[72]](#footnote-72) Keir thought that the disease might be contagious, and he tried to avoid breathing in the air expelled by his patients or swallowing his saliva while on rounds; he also washed his hands in chloride of lime as a precautionary measure. He attributed his own escape from contagion to “regular living, firmness of mind, and the excitement naturally induced by the circumstances in which I was placed.”[[73]](#footnote-73)

Keir was not alone in being disquieted by the course of this mysterious new illness, which killed such a large number of its victims so quicky and horrifically. Barry and Russell described events in St. Petersburg as follows: “The malady is spreading rapidly. The people are in the midst of a solemn fast; - the street thronged with processions and other crowds; - the churches filled all day.”[[74]](#footnote-74) The intemperance to follow the fast, they noted, would doubtless add to the severity of the outbreak. The fear and despair recorded by Nikitenko, described at the opening of this paper, were shared by many others in St. Petersburg. The American consul reported on the case of a fifty year old timber merchant in Rozhdestvennskaia Quarter who erected a seven foot fence against the disease, discussing business from the second floor of his house. “This man, notwithstanding all his precautions, was not only seized with the disease and died within his seclusion, but was the only individual of his family attacked.” A portion of the fence, the consul reported, still remains standing, a testament to people’s vulnerability to the disease. A number of Old Believers lived in St. Petersburg, “and are such pure fatalists, that they never seek for aid of any kind for their sick, nor admit of medical assistance under any circumstances;”[[75]](#footnote-75) their dead were generally buried unnoticed.

Fear and despair might give way to anger and the threat of popular disturbance. A certain P. Olenin wrote to the governor of Tambov in January of 1831, “Forget in this difficult time any leniency, characteristic of your good heart, as a commander act with all severity for the general security. The enraged rabble [*chern’*] is more dangerous than beasts.”[[76]](#footnote-76) Rumors circulated that the noble landlords had sent sorcerers with the goal of killing the simple *narod*. The poet P.A. Viazemskii wrote on October 31, 1830 in his diary: “It’s curious to study our people in such crises. Mistrust toward the government, mistrust of the complete powerlessness toward the will [*nevolia k vole*] of the ‘all powerful’ expresses itself here decisively.” The people, he wrote, “find in cholera an ailment that is more political than natural, and they call this perilous time arevolution.” “On the lower social ranks cholera didn’t instill fear as much as distrust. The simple people [*prostoliudin*], believing in G-d’s benevolence, did not reconcile themselves to the reality of natural misfortunes: it ascribed them to the malice of people or some sort of secret types of authority.”[[77]](#footnote-77) Others believed the epidemic was the doing of the Poles, whose revolt coincided with the cholera epidemic in the empire. The state-secretary of the Polish Kingdom, S.F. Grabovich, told his colleagues not to go out on the street alone, advising them to travel only in groups. The state censor O.A. Przhetslavskii, a Pole himself and a friend of Mickiewicz’s during their university days, averred that “the enormous majority” of St. Petersburg’s residents believed the Poles were wandering the city at night, poisoning vegetables and pails of water.[[78]](#footnote-78)

As would be the case with the first cholera epidemic in the West, rumors of poisoning were widespread, with physicians and other medical personnel often targeted. Barry and Russell, in a letter dated July 16, said that they had offered to take on some patients, but the “violent excitement of the people” in St. Petersburg against foreigners, particularly medical men, changed their minds. They noted that a German physician had been killed by a mob and two others barely escaped the same fate; six other physicians were severely beaten on June 26 and 27. “This city is now perfectly tranquil, and the poor deluded people beg for the assistance of the very men whom but a day or two ago they would have torn to pieces.” They attribute much of this change in attitude to Nicholas I’s appearance among the rioters on Haymarket Square, to be discussed below.

In June of 1830, a revolt broke out in Sevastopol in response to an effort to move residents to a quarantine camp. A *babii bunt* involving several hundred women was led by a certain Semenova, who later told an investigator that two of her children had died of starvation during the quarantine. The long wait for cholera in Tambov from August to November had strained people’s nerves, with growing resentment of the inconveniences caused by the quarantine and the indignities of inspection. The police rounded up anyone who looked suspicious and sent them to hospitals, where they were stripped of their clothes, dosed with calomel and opium, thrust into hot baths, and beaten into submission if they resisted. On November 17, a crowd led by the *meshchanin* David I’lin demonstrated outside the building where the city council was meeting. The crowd yelled that those taken to hospitals were being cut up and cooked. The police were powerless as the mob began to break into quarantined houses, and by the following day the mob controlled the streets of Tambov. The governor was besieged in his house and the three hundred man garrison in town was helpless. Troops were brought in to quell the rebellion, with a military occupation maintained in Tambov for the better part of two years.[[79]](#footnote-79)

The most significant cholera riots took place in St. Petersburg and in the military colonies in Novgorod province. Disorder turned to rioting in St. Petersburg on Sunday, June 21. There were many church processions that day, accompanied by prayers to be saved from cholera, and crowds began to assemble that afternoon. A crowd on Haymarket Square stopped a hospital carriage and freed the sick who were inside, destroying the carriage in the process.[[80]](#footnote-80) Something similar happened in the Rozhdestvennskaia Quarter, at the house of the *chinovnitsa* I.I. Slavishchevaia, where a temporary cholera lazaretto was located. Some two thousand people gathered there, surrounding the hospital, breaking windows, and injuring the lazaretto’s barber, Abram Sheikin. The police and a fire brigade drove the crowd to Konnaia Square, where troops had been dispatched. A dozen or so individuals were detained for inciting a riot once the crowd had been dispersed. These events were the calm before the storm, as people from various parts of the city then assembled on Haymarket Square. There are several versions of what prompted the revolt in St. Petersburg, including P.P. Karatygin’s account of a merchant’s coachman who had left his young wife at home healthy, returning to find that she had been brought to the hospital on Haymarket Square where she had died. He was brought in to identify his wife at the morgue, only to find signs of life in her, at which point he grabbed her by the hand and ran out, cursing the hospital and the doctors (she would die a couple of hours later).[[81]](#footnote-81) Nikitenko wrote on June 22 that he was woken at one in the morning with news of the revolt, with troops and artillery laying siege to the square as several physicians were killed, including Zeman, the chief doctor of the hospital there. Disorders spread to other parts of the city, as crowds destroyed the apartments of doctors.[[82]](#footnote-82)

The city’s medical committee met early on the morning of June 23 in the home of P.K. Essen, the general-governor.[[83]](#footnote-83) Essen and the committee members were at a loss as to what to do. The tsar wasn’t in the city, and it would take too long to wait for orders from Peterhof. They would have to act on their own. Essen pulled together a meeting of all those higher administrators he could and called for the use of force to put down the revolt. The troops, however, expressed no desire to take action against the rioters, and were told that the revolt was the result of a provocation by the Poles in order to get them to comply with orders.[[84]](#footnote-84) Nikitenko, in his diary entry from that day, noted “They say that the police have seized several Poles who incited the people to riot. They were disguised in peasant dress, and were distributing money to the people.[[85]](#footnote-85) All available guards were sent to Haymarket Square, and the governor-general and his adjutant headed there in a carriage. Their carriage was surrounded, and not a single person in the crowd removed his cap at their arrival. Essen was no fighter, but there was nowhere for him to go so he stood up in his carriage and addressed the crowd, asking “Why are you here? What do you need*?*”People climbed on to the carriage on all sides, yelling that there was no cholera. An unusual procession was seen coming from the hospital, with the ill carried above the heads of the crowd in hospital gowns and caps, making faces and happily dancing, singing and drinking to the health of the Orthodox. Essen and his adjutant managed to leave the square, and general-adjutant I.V. Vasil’chikov, who commanded the guard troops in the city, led a battalion of the Semenovskii Guard Regiment onto the square, accompanied by the beating of drums.[[86]](#footnote-86) They got the crowd to disperse onto side streets, but they did not calm down as tensions and the threat of an armed clash escalated.

Nicholas I decided to leave Peterhof for St. Petersburg, while ordering that all available troops be readied for battle. A.Kh. Benkendorf described Nicholas’s carriage going into the midst of the crowd on Haymarket Square, with the tsar ordering the crowd to their knees (they immediately complied). He then turned to the Spas na Krovi Church and said that he had come to ask for G-d’s indulgence for their sins. He asked, “Are you Russians? You’re emulating the French and Poles; you have forgotten your obligation of submission to me.”[[87]](#footnote-87) Nicholas said that he would have to answer to G-d for their behavior. His words could be heard from one end of the square to the other and supposedly had a magical effect as the crowd grew silent, lowered their eyes and with tears in their eyes began to cross themselves as did Nicholas himself. He ordered the crowd to go home, and to obey everything that he ordered, as it was for their own good. This scene is one of those depicted on the bas reliefs on the equestrian statue of Nicholas on St. Isaac’s Square erected in 1859, figuring as a significant symbol of Nicholas’ power and authority.

However, as Sherikh points out, there are other versions of what transpired on Haymarket Square that day. In her memoirs, M.P. Frederiks wrote that Nicholas drank a phial of mercury, used to treat cholera and thought to be poisonous, in front of the angry crowd. A medic ran up to tell the tsar he might lose his teeth, to which Nicholas replied “then you can make me dentures.” Sherikh notes, however, that mercury wasn’t used to treat cholera (in fact it was), and that Frederiks was born only in 1832, and thus could not have witnessed the events described. The writer N.A. Leikin cited his father, a prominent merchant, who said the tsar calmed the crowd by swearing at them. An account similar to that of Benkendorf’s, but offering greater detail, was published by the *Obshchestvo istorii i drevnostei rossiiskikh*, which quoted Nicholas I as telling the crowd, “don’t bow to me, but fall on your knees, bow down to the Lord G-d” and ask for forgiveness.” He added, “I am responsible for you, for all of you, by force of my oath, to answer the Tsar of Tsars.” The crowd in response cried out, “We have sinned before G-d, but we’ll happily die for the Tsar, for Our Father!” In Grunwald’s telling, Nicholas set off to “bear the brunt of all this,” with the empress offering her blessing in spite of her anxiety. The tsar threw off his cloak and pointed to the Church of the Savior, commanding “hats off, and down on your knees!” He then harangued the kneeling crowd of some eight to ten thousand, telling them to ask for G-d’s pardon. “With tears in his eyes and arms outstretched to expose his breast he ended his harangue by crying – like a real actor – ‘Come – if you wish to kill me with grief!”[[88]](#footnote-88) Nikitenko remarked on these varying accounts, “You can’t make sense out of the newsmongers’ reports; each one gives a different version of the emperor’s words. All we do know is that measures have been taken to restore order.”[[89]](#footnote-89) Sherikh, in his book on cholera in St. Petersburg, writes that differences in reporting what Nicholas said on Haymarket Square may be due to the fact that he gave more than one address that day. A.M. Gribovskii, a former secretary of Catherine II, wrote in his diary that Nicholas had spoken on both Haymarket Square and Gostinnyi Dvor. Gribovskii said that Nicholas, with tears in his eyes, referred to the death of his own brother from cholera, and while assuring the people that the government was acting on his orders for their own good, that those resisting government orders would be severely punished. In spite of the assertion that Nicholas I’s presence in the city restored calm, disorders continued in the days that followed. Infantry and cavalry troops went around the streets and squares of the city, ordering people to disperse, with the governor-general declaring a curfew between eleven at night and five in the morning and armed patrols detaining any groups of more than five people as disrupters of the peace. Moreover, an investigative commission was created, led by Benkendorf, following the disorders in St. Petersburg. One hundred and seventy-two suspects were brought to the Peter and Paul Fortress between June 23 and 26, with more held in other locations.[[90]](#footnote-90) Many of those detained would later be released without punishment.

Over three hundred people would perish in the revolt in the Novgorod military colonies. In 1831, these military colonies encompassed eight thousand square versts with around 20,000 homes and more than 120,000 people.[[91]](#footnote-91) In the last days of December 1830, unusually bright northern lights lasting for several hours were taken as a premonition of evil to come.[[92]](#footnote-92) The winter had been harsh, and the summer of 1831 brought fires and dust storms. Rumors that cholera was a poisoning conspiracy spread in the colonies, with the illness also believed to take the form of a white woman wandering the streets at night, knocking at the doors of homes where people would subsequently die. Some would put signs on their doors saying “no one is home” or “entry to outsiders is forbidden.” Benkendorf asserted that “cholera and rumors about poisoning served only as a pretense” for revolt, with the talk of dealing with all nobles. Count Stroganov, who was dispatched to the region, reported to the tsar on July 19 that the cholera outbreak served as an opportunity to strike out at the hated order of the military colonies. The military command, like the government, failed to take effective measures against the epidemic, limited in some areas to digging graves in anticipation of cholera deaths.[[93]](#footnote-93) Gessen, in a Soviet account of the cholera revolts, asserted that the clergy weren’t of much help either, as most were completely uneducated, illiterate and given to drink.

The revolt in Staraia Russa began on July 11, with the colonists joined by groups of *meshchane*. General Moves, the most senior officer in the town, tried to calm the crowd but was literally torn apart by it, as was the chief of police. The crowds destroyed police headquarters, the pharmacy and other places, while leaving the taverns untouched. Gessen rejects the contention of Nicholas I and others that the rebels engaged in widespread pillaging. The rebels in Staraia Russa sent people to neighboring areas both to seize those officers who had fled and to encourage others to revolt.[[94]](#footnote-94) Between July 12 and 14 all eight districts in Staraia Russa were swept up in the revolt. The rebels killed particularly hated commanders, landlords and physicians. Lack of leadership and clear goals, however, decided the fate of the revolt. “The enthusiasm, the heated uplift experienced by the colonists in the first days of the unrest, searched for some sort of concrete application, for some sort of defined goal. And there was none such.”[[95]](#footnote-95) Gessen here noted that even the proletariat in his time, regardless of their class consciousness, requires leadership. Troops were readied against the disturbances in Staraia Russa, with General-Adjutant Count A.F. Orlov (sent to the region as the tsar’s plenipotentiary), Count Stroganov and Prince Dolgorukii dispatched to trouble spots.[[96]](#footnote-96) At Izhora, Nicholas gave an audience to sixty colonists, a delegation vetted by Orlov. As they knelt before him, he berated them for their behavior. Nicholas rejected the bread and salt brought to him, ordered a memorial service and delivered a thunderous speech. When he got to the point of asking for the colonists to hand over those responsible for the revolt, he was met with dead silence. As with the depiction of his appearance on Senate Square during the Decembrist Revolt, Nicholas was presented as an Olympian g-d, a hero of antique tragedy.[[97]](#footnote-97) Orlov informed Panaev that the tsar wanted the colonists brought to repentance, so Panaev used the approaching Uspenskii fast to order daily church services and arrange for confession. The monks sent to hear confessions informed the government as to those who were guilty. An investigative commission was set up in Staraia Russa to carry out interrogations, with a military-judicial commission established in Novgorod. The units considered most responsible were marched to St. Petersburg, where they were subjected to public and ferocious punishment with birches, rods and the knout. More than 2500 were beaten, with 129 dying as a result of their punishment. Within half a year, the military colonies were converted into regions of plowing [*pakhotnye*] soldiers.

The cholera epidemic also became imbricated in the Polish revolt, as touched upon earlier in describing events in St. Petersburg. Although it appears that cholera spread westward through trade networks, the Polish revolt also played some part. Chateaubriand claimed that French children playing at cholera called it “Nicholas Morbus” because it came from Russia.[[98]](#footnote-98) From April to June of 1831, cholera deeply affected Russian troops active in the Polish territories. “Conditions in the Russian encampments were abysmal, and the soldiers lived in the midst of mud, squalor, and devastation. Sanitary facilities were primitive, and the Russian command made little effort to combat the hygiene problem.”[[99]](#footnote-99) The number of cholera patients in military hospitals jumped from 682 in March to 8720 in April, with 2800 deaths. On June 11, Dibich, the commander of Russian forces in the Polish territories, died of cholera, and Nicholas I’s brother Constantine, the ruler of the Polish territories, died of the same cause a few days later.[[100]](#footnote-100) Some contemporaries believed that Dibich had committed suicide as a result of Russian reverses in fighting the Polish insurrectionists, while another story had it that after the battle of Ostrolenka, Dibich shut himself up in his camp “and sank into a profound and painful melancholy.”[[101]](#footnote-101) “He drowned his chagrin in constant intoxication” and died suddenly, perhaps at the hands of Count Orlov, Smucker hazarded, who had poisoned Dibich. A circular of June 1 from the insurrectionist Polish government opened by averring that “Europe is no longer ignorant of the ally [referring to cholera] which the Russian emperor has called to his assistance for the purpose of consummating the work of exterminating the Polish people.”[[102]](#footnote-102) The Polish rebels called upon the European powers to intervene in the conflict with Russia in order to prevent the spread of cholera further westward.[[103]](#footnote-103)

In 1851, representatives of twelve countries gathered in Paris at the International Sanitary Convention to address how to prevent future epidemics. Twenty such conferences were held between 1851 and 1951, although until 1892 the decisions emerging from these conferences had no binding force. The international response to cholera was also shaped by the bacteriological revolution. The British, French and Germans all sent teams to Egypt at the time of the cholera outbreak of 1883, with Robert Koch’s team moving from Egypt, where the outbreak was ending, to India to confirm their findings. Koch presented his discovery of the *vibrio cholerae* bacillus to two conferences in Berlin in 1884 and 1885. Bacteriological discoveries led to a renewed emphasis on quarantine measures that had been largely rejected in the wake of the first cholera epidemic.

Evans argues that modern police forces, administrative centralization, rapid communication in the form of railways, and increased state resources all meant that governmental measures against epidemics were much more effective in the 1890s than they had been sixty years earlier, and that medicine and public health had become political issues in much of western and central Europe.[[104]](#footnote-104) It’s not clear that these changes would hold true for late imperial Russia, and such was reflected in the severity of the 1892 cholera epidemic there. Russia would also experience a prolonged cholera outbreak stretching from the Russo-Japanese War through the famine of 1921 and into the mid-twenties. In total, there were fifty-five “cholera years” between 1823 and 1925, with approximately 5.5 million people contracting cholera and some 2.3 million of these people dying. But while cholera persisted in Russia for decades after its disappearance from the West, the response of the Russian government and the medical profession did change over time. The zemstvo and municipal reforms brought an increased if still sorely inadequate provisioning of medical care to the localities, along with the development of a Russian medical profession. Nancy Frieden, in her work on physicians’ professional identity and status, notes that there were often tensions between the zemstvo authorities and the medical personnel they employed, reflected in disagreements over preventive medicine, with physicians arguing for greater hygiene education and sanitary regulations. Zemstvo medicine in “most areas progressed slowly, but in a few provinces such as Moscow and Kherson, the zemstvo developed outstanding medical organizations.”[[105]](#footnote-105) Moscow’s zemstvo medical system served as a model, although only a third of zemstvos had medical bureaus by 1889.

Cholera returned to Russia in May of 1892, travelling from Meshed in Persia to Ashkabad in the Transcaspian region with Shiite Muslims making pilgrimage to the tomb of the holy imam Riza.[[106]](#footnote-106) Frank Clemow’s account gives some sense of many Westerners’ longstanding association of cholera with barbarism and the Asiatic, as he remarks that “the fatalism of Mohammedans is proverbial and must have had much to do with the spread of cholera in a country where nearly half the population are followers of the prophet.”[[107]](#footnote-107) In his account of the 1892 outbreak, however, he also notes that “scarcely less fatalistic than the Mohammedan is the Russian sectarian.” On June 9, the Ministry of Internal Affairs issued orders for local authorities at the district level to form sanitary commissions, composed of medical men, which would be responsible for disinfection, the creation of hospital facilities, and the provisioning of medical assistance, particularly to the poorer classes “In carrying out all the measures here laid down, it is necessary as far as possible to avoid anything that may arouse excitement and dissatisfaction among the people; and it is particularly important to instill into all classes the conviction that the authorities are laboring to fulfill their task with the utmost consideration and zeal, and that their endeavors are directed solely to the common weal.”[[108]](#footnote-108) The government’s long experience with the resistance that might be engendered among the populace by the imposition of anti-cholera measures clearly had not been forgotten in 1892. A cholera conference was called for, with the governor of each province asked to send one or two physicians with experience of the disease. Over three hundred people attended the weeklong conference in December, recommending improvements in sanitation and arguing for local sanitary commissions to remain permanently in force. However, “the principle and practice of quarantine were condemned unanimously and in no halting terms by the Conference.”[[109]](#footnote-109) Quarantines were seen as causing undue annoyance and losses without attaining their end in preventing the spread of the disease. The conference therefore recommended that quarantines be replaced by a system of inspection, isolation and disinfection. The conference attendees further maintained that “it is quite unnecessary to forbid the holding of fairs, pilgrimages and bazaars, or to close places of entertainment during an epidemic.”[[110]](#footnote-110) They concluded that there was no specific means of curing cholera or cutting it short, in spite of the discovery of the cholera bacillus, and therefore they would not issue any *ex cathedra* pronouncements on treatment, adding only that “care should be taken that the form of treatment is not wrongly interpreted by the peasantry, and does not arouse their antipathy.”[[111]](#footnote-111) The epidemic again travelled into European Russia by means of the Volga, as well as westward from the Caucasus to Ukraine, with its greatest intensity in the southeast and the Caucasus.

Frieden argues that the 1892 cholera epidemic contributed to the development of physicians’ corporate consciousness and professional authority. Yet, in spite of the growth of the medical profession in the preceding decades, popular suspicion of doctors persisted. Cholera barracks and medical personnel were again attacked during the 1892 epidemic. For instance, five days of rioting in Astrakhan beginning on June 21 claimed over three hundred lives.[[112]](#footnote-112) In Saratov, a student who tried to reason with an angry crowd was killed, the cholera patients were dragged out onto the street and the cholera barracks were burned. Crowds raided the homes of six physicians, the police chief, a city council member, and a music teacher suspected of sheltering a physician. In Khvalynsk on June 30, A.M. Molchanov, employed as a cholera physician, was beaten to death on the street by an angry mob. Popular revolt in response to the epidemic persisted, akin to that seen in the first pandemic, with rumors that the epidemic was produced by the government to kill the poor, as the tsarist government continued to have recourse to coercive measures. Decrees that limited large religious gatherings and hazardous burial practices infringed upon traditions and challenged popular beliefs, with bodies often buried wrapped only in a lime soaked sheet, without the services of a priest. “Force, arbitrariness, and harsh treatment – these were the government’s methods.” Compulsory hospitalization, seizure of the victims’ possessions, and disinfection of their homes provoked severe reactions. Cholera riots were suppressed by troops, with mass arrests, death sentences and hard labor. “The chaos and suffering of the famine and epidemic years created massive problems for the state, shocked the numerous volunteers who assisted the poor, sick and starving, and left the countryside demoralized and enervated.”[[113]](#footnote-113)

The 1892 cholera epidemic also highlighted tensions within the medical community in the wake of the bacteriological discoveries of Koch and others. Russian physicians and scientists participated in the larger international scientific community’s debate between adherents of Koch (and Pasteur) and Max von Pettenkofer. The Pirogov Society of Russian Physicians, established in 1883, was intended to bring together academics and practitioners interested in the improvement of medical education, the progress of public health, and the general enlightenment of the Russian people.[[114]](#footnote-114) One of its founders and leading spirits was Friedrich F. Erismann, professor of public hygiene at Moscow University and a devoted student of Pettenkofer, who expressed concern that the laboratory science associated with the bacteriological revolution might undermine physicians’ social engagement. “What galled Erismann and his followers was that the ‘fanatics’ seemed to forget that the human hosts of their microbes lived in particular social conditions which had themselves been linked to the prevalence of disease.”[[115]](#footnote-115) Sanitary reformers feared that bacteriology would undermine the physicians’ mission to raise the moral and material level of the people through the promotion of improved hygiene. At the Second Congress of the Pirogov Society, held in Moscow in 1887, Erismann praised the work of Pasteur and Koch but warned that Mechnikov’s call for an exclusively bacteriological focus in zemstvo and urban sanitation would be a death sentence for their work.[[116]](#footnote-116)

An examination of cholera epidemics in Russia in the century after the first appearance of the disease in the 1820s provides an opportunity to explore the nature of the relationship between state and society, and (often frustrated) expectations regarding the state’s role in protecting the population and promoting public health. Certainly, over time the Russian government developed greater means to address the threat of epidemics, yet their provisioning of medical care, safe water and sufficient sanitation clearly remained woefully inadequate, particularly when compared to the advances made Western Europe (this disparity is reflected in the virtual disappearance of cholera from the West in contrast to its long term persistence and high costs in Russia). In spite of vacillation regarding the nature of cholera and the efficacy of quarantines in preventing its transmission, the imperial government continued to have recourse to the use of force, which exacerbated popular suspicions of and resistance to the authorities as well as physicians. The history of cholera epidemics in Russia also contributes to an understanding of the emergence and development of the medical profession and the scientific community in Russia, and the ways in which these communities positioned themselves vis a vis the government and the population. This projected study will close with an examination of the early Soviet regime’s response to the cholera epidemic that accompanied war and revolution, with a renegotiation of the relationship between state and society and the embrace of science as a means of securing progress.

1. A.S. Pushkin, *Polnoe sobranie sochinenii* volume 10: *Pis’ma* (Moscow: Izdatel’stvo “Nauka,” 1966): 305. [↑](#footnote-ref-1)
2. Ibid., 306. [↑](#footnote-ref-2)
3. Ibid., 357-359. [↑](#footnote-ref-3)
4. This was one of Pushkin’s *Little Tragedies*, and was later set to music by Cesar Cui. [↑](#footnote-ref-4)
5. Sonia Shah, *Pandemic: Tracking Contagions, from Cholera to Ebola and beyond* (New York: Sarah Crichton Books/Farrar, Strauss and Giroux, 2016): 41. [↑](#footnote-ref-5)
6. Aleksandr Nikitenko, *The Diary of a Russian Censor* (Amherst: The University of Massachusetts Press, 1975): 29. [↑](#footnote-ref-6)
7. Ibid., 33. [↑](#footnote-ref-7)
8. Ibid., 34. [↑](#footnote-ref-8)
9. Ibid., 353. [↑](#footnote-ref-9)
10. Christopher Hamlin, *Cholera the Biography* (Oxford: Oxford University Press, 2009):19. [↑](#footnote-ref-10)
11. Ibid., 20. [↑](#footnote-ref-11)
12. D.I. Drankin, *Kholera, proshloe i nastoiashchee* (Saratov: 1973):52-53. [↑](#footnote-ref-12)
13. Christopher Hamlin, *Cholera the Biography* (Oxford: Oxford University Press, 2009): 21-22. [↑](#footnote-ref-13)
14. Amanda J. Thomas, *Cholera the Victorian Plague* (Barnsley: Pen & Sword History, 2015): 28-29. [↑](#footnote-ref-14)
15. R.J. Morris, *Cholera, 1832: The Social Response to an Epidemic* (New York: Holmes & Meier Publishers, 1976): 15. [↑](#footnote-ref-15)
16. Christopher Hamlin, *Cholera the Biography* (Oxford: Oxford University Press, 2009): 281. [↑](#footnote-ref-16)
17. Sonia Shah, *Pandemic: Tracking Contagions, from Cholera to Ebola and beyond* (New York: Sarah Crichton Books/Farrar, Strauss and Giroux, 2016): 141. [↑](#footnote-ref-17)
18. Christopher Hamlin, *Cholera the Biography* (Oxford: Oxford University Press, 2009): 2. [↑](#footnote-ref-18)
19. Ibid., 41. [↑](#footnote-ref-19)
20. A.A. Genritsi, *Vospominaniia o perezhitykh mnoiu kholernykh epidemiiakh: Kholernye epidemii v Finliandii* (Moscow: 2002): 15. [↑](#footnote-ref-20)
21. E. Pelikan, *Neskol’ko voprosov otnositelʹno epidemicheskoi kholery i dalʹneishiia svedeniia o destviiakh eia v Sanktpeterburge v 1848-m godu* (St. Petersburg: 1848): 32. [↑](#footnote-ref-21)
22. Catherine Jean Kudlick, *Cholera in Post-Revolutionary Paris : A Cultural History* (Berkeley: University of California Press, 1996): 1. [↑](#footnote-ref-22)
23. Ibid., 7. [↑](#footnote-ref-23)
24. Roderick E. McGrew, *Russia and the Cholera, 1823-1832* (Madison: University of Wisconsin Press, 1965): 11. [↑](#footnote-ref-24)
25. Asa Briggs, “Cholera and Society in the Nineteenth Century,” *Past & Present* no.19 (1961): 76. [↑](#footnote-ref-25)
26. Richard J. Evans, “Epidemics and Revolutions: Cholera in Nineteenth-Century Europe,” *Past and Present* no.120 (August 1988): 123-146. [↑](#footnote-ref-26)
27. Ibid., 128. [↑](#footnote-ref-27)
28. Peter Baldwin, *Contagion and the State in Europe, 1830-1930* (Cambridge: Cambridge University Press, 1999): 1. [↑](#footnote-ref-28)
29. Ibid., 12-13. [↑](#footnote-ref-29)
30. Christopher Hamlin, *Cholera the Biography* (Oxford: Oxford University Press, 2009): 105-106. [↑](#footnote-ref-30)
31. Frank G. Clemow, *The Cholera Epidemic of 1892 in the Russian Empire: With Notes upon Treatment and Methods of Disinfection in Cholera, and a Short Account of the Conference on Cholera Held in St. Petersburg in December, 1892* (St. Petersburg: 1893): 44. [↑](#footnote-ref-31)
32. D.I. Drankin, *Kholera, proshloe i nastoiashchee* (Saratov: 1973): 9. [↑](#footnote-ref-32)
33. Nancy M. Frieden, “The Russian Cholera Epidemic, 1892-93, and Medical Professionalization.” *Journal of Social History* vol.10 no. 4 (Summer 1977); Theodore H. Friedgut, “Labor Violence and Regime Brutality in Tsarist Russia: The Iuzovka Cholera Riots of 1892.” *Slavic Review* vol.46 no. 2 (Summer 1987). [↑](#footnote-ref-33)
34. Roderick E. McGrew, *Russia and the Cholera, 1823-1832* (Madison: University of Wisconsin Press, 1965): 23-24 [↑](#footnote-ref-34)
35. Ibid., 42-43. [↑](#footnote-ref-35)
36. Anna Afanasyeva, “Quarantines and Copper Amulets: The Struggle against Cholera in the Kazakh Steppe in the Nineteenth Century,” *Jahrbücher für Geschichte Osteuropas* vol.61 no.4 (November 2013): 492-492. [↑](#footnote-ref-36)
37. Roderick E. McGrew, *Russia and the Cholera, 1823-1832* (Madison: University of Wisconsin Press, 1965): 52. [↑](#footnote-ref-37)
38. D.I. Drankin, *Kholera, proshloe i nastoiashchee* (Saratov: 1973): 11. [↑](#footnote-ref-38)
39. L.S. Zykova, “Iz istori bor’by s epidemiiami kholery v Povolzh’e v pervoi polovine XIX veka.” *Sovetskoe zdravookhranenie* vol.30 no.4 (1971): 71. [↑](#footnote-ref-39)
40. Anna Afanasyeva, “Quarantines and Copper Amulets: The Struggle against Cholera in the Kazakh Steppe in the Nineteenth Century,” *Jahrbücher für Geschichte Osteuropas* vol.61 no.4 (November 2013): 494. [↑](#footnote-ref-40)
41. Roderick E. McGrew, *Russia and the Cholera, 1823-1832* (Madison: University of Wisconsin Press, 1965): 48. [↑](#footnote-ref-41)
42. Ibid., 63. [↑](#footnote-ref-42)
43. Ibid., 55-57. [↑](#footnote-ref-43)
44. Ibid., 59. [↑](#footnote-ref-44)
45. V.P. Brevnov, “M.Ia. Mudrov v bor’be s kholernoi epidemiei v Rossii (1830-1831 gg.),” *Fel’dsher i akusherka* vol.46 no.11 (1981): 54-56. [↑](#footnote-ref-45)
46. *Traktat o poval’no-zarazitel’noi bolezni kholere, byvshei v Rossii v 1830 i 1831 godu* (St. Petersburg: 1831): 147. [↑](#footnote-ref-46)
47. Submissions were invited not just from Russia, but from Germany, Hungary, England, Sweden, Denmark and Italy. D.Iu. Sherikh, *Agoniziruiushchaia stolitsa: Kak Peterburg protivostoial semi strashneishim epidemiiam kholery* (Moscow/St. Petersburg: Tsentrpoligraf, 2014): 15-16. [↑](#footnote-ref-47)
48. James Keir, *A Treatise on Cholera, Containing the Author’s Experience of the Epidemic Known by that Name as it Prevailed in the City of Moscow in Autumn 1830, and Winter 1831* (Edinburgh: Adam Black, 1832): 74. [↑](#footnote-ref-48)
49. Francis Bisset Hawkins, *History of the Epidemic Spasmodic Cholera of Russia; Including a Copious Account of the Disease Which Has Prevailed in India, and Which Has Travelled, under That Name, from Asia into Europe. Illustrated by Numerous Official and Other Documents, Explanatory of the Nature, Treatment, and Prevention of the Malady* (London: 1831): 214-215. [↑](#footnote-ref-49)
50. Roderick E. McGrew, *Russia and the Cholera, 1823-1832* (Madison: University of Wisconsin Press, 1965): 76. [↑](#footnote-ref-50)
51. Ibid., 77. [↑](#footnote-ref-51)
52. Francis Bisset Hawkins, *History of the Epidemic Spasmodic Cholera of Russia; Including a Copious Account of the Disease Which Has Prevailed in India, and Which Has Travelled, under That Name, from Asia into Europe. Illustrated by Numerous Official and Other Documents, Explanatory of the Nature, Treatment, and Prevention of the Malady* (London: 1831): 124. [↑](#footnote-ref-52)
53. Ibid., 216-218. [↑](#footnote-ref-53)
54. Roderick E. McGrew, *Russia and the Cholera, 1823-1832* (Madison: University of Wisconsin Press, 1965): 79. [↑](#footnote-ref-54)
55. Ibid., 80-81. [↑](#footnote-ref-55)
56. Ibid., 83. [↑](#footnote-ref-56)
57. Ibid., 98-99. [↑](#footnote-ref-57)
58. Sandra Hempel, *The Strange Case of the Broad Street Pump: John Snow and the Mystery of Cholera* (Berkeley: University of California Press, 2007): 13. [↑](#footnote-ref-58)
59. *Official Reports Made to Government by Drs. Russell & Barry on the Disease Called Cholera Spasmodica as Observed by Them during their Mission to Russia in 1831* (London: Winchester and Varnham, Strand, 1832): 116. [↑](#footnote-ref-59)
60. S.Ia. Gessen, *“Kholernye bunty” (1830-1832 gg.)* (Moscow: Izdatel’stvo vsesouiznogo. obshchestva politkatorzhan i ssylʹno-poselentsev, 1932): 22. [↑](#footnote-ref-60)
61. Sherikh: 38. [↑](#footnote-ref-61)
62. Sandra Hempel, *The Strange Case of the Broad Street Pump: John Snow and the Mystery of Cholera* (Berkeley: University of California Press, 2007): 16. [↑](#footnote-ref-62)
63. Peter Baldwin, *Contagion and the State in Europe, 1830-1930* (Cambridge: Cambridge University Press, 1999): 65-67. [↑](#footnote-ref-63)
64. D.I. Drankin, *Kholera, proshloe i nastoiashchee* (Saratov: 1973): 24. [↑](#footnote-ref-64)
65. Roderick E. McGrew, *Russia and the Cholera, 1823-1832* (Madison: University of Wisconsin Press, 1965): 127. [↑](#footnote-ref-65)
66. Norman Howard-Jones, “Cholera Therapy in the Nineteenth Century,” *Journal of the History of Medicine & Allied Sciences* vol.27 no. 4 (October 1972): 373. [↑](#footnote-ref-66)
67. Keir: 40-41. [↑](#footnote-ref-67)
68. Sandra Hempel, *The Strange Case of the Broad Street Pump: John Snow and the Mystery of Cholera* (Berkeley: University of California Press, 2007): 42-47. [↑](#footnote-ref-68)
69. *Official Reports Made to Government by Drs. Russell & Barry on the Disease Called Cholera Spasmodica as Observed by Them during their Mission to Russia in 1831* (London: Winchester and Varnham, Strand, 1832): 108. [↑](#footnote-ref-69)
70. Ibid., 26. [↑](#footnote-ref-70)
71. Francis Bisset Hawkins, *History of the Epidemic Spasmodic Cholera of Russia; Including a Copious Account of the Disease Which Has Prevailed in India, and Which Has Travelled, under That Name, from Asia into Europe. Illustrated by Numerous Official and Other Documents, Explanatory of the Nature, Treatment, and Prevention of the Malady* (London: 1831): 4-7. [↑](#footnote-ref-71)
72. Peter Baldwin, *Contagion and the State in Europe, 1830-1930* (Cambridge: Cambridge University Press, 1999): 53. [↑](#footnote-ref-72)
73. Keir: 106. [↑](#footnote-ref-73)
74. *Official Reports Made to Government by Drs. Russell & Barry on the Disease Called Cholera Spasmodica as Observed by Them during their Mission to Russia in 1831* (London: Winchester and Varnham, Strand, 1832): 22. [↑](#footnote-ref-74)
75. Ibid., 76-77. [↑](#footnote-ref-75)
76. Quoted in S.Ia. Gessen, *“Kholernye bunty” (1830-1832 gg.)* (Moscow: Izdatel’stvo vsesouiznogo. obshchestva politkatorzhan i ssylʹno-poselentsev, 1932): 6. [↑](#footnote-ref-76)
77. D.Iu. Sherikh, *Agoniziruiushchaia stolitsa: Kak Peterburg protivostoial semi strashneishim epidemiiam kholery* (Moscow/St. Petersburg: Tsentrpoligraf, 2014): 41. [↑](#footnote-ref-77)
78. Ibid., 42. [↑](#footnote-ref-78)
79. Roderick E. McGrew, *Russia and the Cholera, 1823-1832* (Madison: University of Wisconsin Press, 1965): 69-72. [↑](#footnote-ref-79)
80. D.Iu. Sherikh, *Agoniziruiushchaia stolitsa: Kak Peterburg protivostoial semi strashneishim epidemiiam kholery* (Moscow/St. Petersburg: Tsentrpoligraf, 2014): 44. [↑](#footnote-ref-80)
81. One of the characteristics of cholera that encouraged popular fears was the fact that victims of the disease might be mistaken for dead given the difficulty in discerning a pulse and the lowering of body temperature. [↑](#footnote-ref-81)
82. Ibid., 45. [↑](#footnote-ref-82)
83. Ibid., 47. [↑](#footnote-ref-83)
84. S.Ia. Gessen, *“Kholernye bunty” (1830-1832 gg.)* (Moscow: Izdatel’stvo vsesouiznogo. obshchestva politkatorzhan i ssylʹno-poselentsev, 1932): 26. [↑](#footnote-ref-84)
85. Aleksandr Nikitenko, *The Diary of a Russian Censor* (Amherst: The University of Massachusetts Press, 1975): 35. [↑](#footnote-ref-85)
86. D.Iu. Sherikh, *Agoniziruiushchaia stolitsa: Kak Peterburg protivostoial semi strashneishim epidemiiam kholery* (Moscow/St. Petersburg: Tsentrpoligraf, 2014): 50. [↑](#footnote-ref-86)
87. Ibid., 52-53. [↑](#footnote-ref-87)
88. Constantine de Grunwald, *Tsar Nicholas I* (New York: Macmillan, 1955): 55. [↑](#footnote-ref-88)
89. D.Iu. Sherikh, *Agoniziruiushchaia stolitsa: Kak Peterburg protivostoial semi strashneishim epidemiiam kholery* (Moscow/St. Petersburg: Tsentrpoligraf, 2014): 35. [↑](#footnote-ref-89)
90. Ibid., 59-61. [↑](#footnote-ref-90)
91. S.Ia. Gessen, *“Kholernye bunty” (1830-1832 gg.)* (Moscow: Izdatel’stvo vsesouiznogo. obshchestva politkatorzhan i ssylʹno-poselentsev, 1932): 36. [↑](#footnote-ref-91)
92. Ibid., 42. [↑](#footnote-ref-92)
93. Ibid., 41-42. [↑](#footnote-ref-93)
94. S.Ia. Gessen, *“Kholernye bunty” (1830-1832 gg.)* (Moscow: Izdatel’stvo vsesouiznogo. obshchestva politkatorzhan i ssylʹno-poselentsev, 1932): 44-45. [↑](#footnote-ref-94)
95. Ibid., 51. [↑](#footnote-ref-95)
96. Roderick E. McGrew, *Russia and the Cholera, 1823-1832* (Madison: University of Wisconsin Press, 1965): 120-121. [↑](#footnote-ref-96)
97. S.Ia. Gessen, *“Kholernye bunty” (1830-1832 gg.)* (Moscow: Izdatel’stvo vsesouiznogo. obshchestva politkatorzhan i ssylʹno-poselentsev, 1932): 53. [↑](#footnote-ref-97)
98. Catherine Jean Kudlick, *Cholera in Post-Revolutionary Paris : A Cultural History* (Berkeley: University of California Press, 1996): 58. [↑](#footnote-ref-98)
99. Roderick E. McGrew, *Russia and the Cholera, 1823-1832* (Madison: University of Wisconsin Press, 1965): 102-103. [↑](#footnote-ref-99)
100. Constantine de Grunwald, *Tsar Nicholas I* (New York: Macmillan, 1955): 120. [↑](#footnote-ref-100)
101. Samuel M. Smucker, *The Life and Reign of Nicholas the First, Emperor of Russia* (Philadelphia: J.W. Bradley, 1856): 148-149. [↑](#footnote-ref-101)
102. Francis Bisset Hawkins, *History of the Epidemic Spasmodic Cholera of Russia; Including a Copious Account of the Disease Which Has Prevailed in India, and Which Has Travelled, under That Name, from Asia into Europe. Illustrated by Numerous Official and Other Documents, Explanatory of the Nature, Treatment, and Prevention of the Malady* (London: 1831): 273. [↑](#footnote-ref-102)
103. Ibid., 274-275. [↑](#footnote-ref-103)
104. Richard J. Evans, “Epidemics and Revolutions: Cholera in Nineteenth-Century Europe,” *Past and Present* no.120 (August 1988): 146. [↑](#footnote-ref-104)
105. Nancy M. Frieden, “The Russian Cholera Epidemic, 1892-93, and Medical Professionalization.” *Journal of Social History* vol.10 no. 4 (Summer 1977): 542. [↑](#footnote-ref-105)
106. Frank G. Clemow, *The Cholera Epidemic of 1892 in the Russian Empire: With Notes upon Treatment and Methods of Disinfection in Cholera, and a Short Account of the Conference on Cholera Held in St. Petersburg in December, 1892* (St. Petersburg: 1893): 2. [↑](#footnote-ref-106)
107. Ibid., 23. [↑](#footnote-ref-107)
108. Quoted in Frank G. Clemow, *The Cholera Epidemic of 1892 in the Russian Empire: With Notes upon Treatment and Methods of Disinfection in Cholera, and a Short Account of the Conference on Cholera Held in St. Petersburg in December, 1892* (St. Petersburg: 1893): 76. [↑](#footnote-ref-108)
109. Ibid., 103-106. [↑](#footnote-ref-109)
110. Ibid., 108. [↑](#footnote-ref-110)
111. Ibid., 111. [↑](#footnote-ref-111)
112. Frank G. Clemow, *The Cholera Epidemic of 1892 in the Russian Empire: With Notes upon Treatment and Methods of Disinfection in Cholera, and a Short Account of the Conference on Cholera Held in St. Petersburg in December, 1892* (St. Petersburg: 1893): 49. [↑](#footnote-ref-112)
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115. Ibid., 429-430. [↑](#footnote-ref-115)
116. V.D. Beliakov, “Diskussiia I.I. Mechnikova s F.F. Erismanom – otrazhenie epokhi v meditsinskoi nauke i obshchestvennom zdravookhranenii vtoroi poloviny XIX veka,” *Zhurnal mikrobiologii* 1995 no.3: 6. [↑](#footnote-ref-116)