

Who “Banned” New Medicine in the Ottoman Empire?

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Osmanlı İmparatorluđu’nda Tıbb-ı Cedid’i Kim “Yasakladı”?

Öz ■ Sultan II. Muştafa, 1703 yılında tıpta yeni ilaçların kullanımını ve olası zararları hakkında bir ferman yayınlarak hekim ve cerrahların incelenmesini ve ehil olmayan hekimlerin dükkanlarının kapatılmasını emretmişti. Birçok tarihçi, bugüne kadar, bu belgenin aslı yerine yayınlanmış bir transkripsiyonuna başvurmuştur; fakat, bu versiyonda belgenin tarihi hatalı bir şekilde II. Muştafa’nın halefi olan III. Ahmed’in saltanatına tarihlendirilmiştir. Bu yanlış, kaçınılmaz olarak, belgenin asıl ilan edildiđi bağlamın yanlış değerlendirilmesine yol açmıştır. Dahası, bazı araştırmacılar fermanın yeni ilaçlara ilişkin şüpheli ve olumsuz tonunu Osmanlı İmparatorluđu’nda yeni tıbbın (*tıbb-ı cedid*) topyekûn yasaklandığı şeklinde yorumlamıştır. Bu makalede, ikincil literatürdeki tarihlendirme hatasının izini sürerek, önceki arşivsel çıkarımları yeniden değerlendirmeyi amaçlıyorum. Ayrıca, herhangi bir tıbbî anlayışın takipçilerine yönelik sistematik bir baskı olduğunu destekleyecek bir kanıt bulunmadığını savunarak, dükkânda hizmet sunan hekimin hem bir sağlık uzmanı hem de bir esnaf olarak pazardaki ikili rolünü göstermek amacıyla hekim dükkânını on sekizinci yüzyıl sosyo-ekonomik bağlamına yerleştiriyorum.

Anahtar kelimeler: Osmanlı tıbbı, tıbb-ı cedid, kimyasal tıp, loncalar, gedik, Ahmet Refik Altınay, III. Ahmed.

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In May 1700, Ottoman authorities tallied all the physicians and surgeons offering medical services in their shops in Istanbul. At the end of this general survey and examination (*imtiḥān*), they recorded the names of twenty-five physicians and twenty-eight surgeons who were found competent in an official book along with the location of their shops. Thanks to this state document, for instance, we learn that ‘Acem Aḥmed Efendi, an Ottoman Muslim physician, received his permission certificate (*izin tezkiresi*) to continue his business in Divanyolu, at the heart of the city not far from the palace. There were also some foreign practitioners, such as the Dutch physician Yaço and the Venetian Jewish physician Yasefço, who were granted similar deeds to carry on with their medical services in Galata, another central location for lively commercial activities mostly performed by non-Muslims.¹ The 1700 document does not reveal any information about why and how this survey was conducted. There is also no hint of any particular medical framework or theory approved and endorsed by the state. Were there any complaints about the medical practice applied in these shops? Was there a series of maltreatment cases all over the city? Also, who failed the exam and why? What happened to the unsuccessful ones? Unfortunately, we are left with these and other related questions.² What we know for sure is that the empire’s chief physician, Nūḥ Efendi (d. 1707), oversaw the examination and determined who was eligible for medical practice.³

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- 1 BOA, A.DVNS.MHM.d 111/4-6. For a discussion on this document, see also Halil Sahillioğlu, “1700 Yılında İstanbul’da Muayenehane Açma İzni Olan Tabip ve Cerrahlar,” *Türk Dünyası Tarih Dergisi*, 136 (1998), pp. 10-14. For the facsimile and its transcription, see also Coşkun Yılmaz and Necdet Yılmaz, eds., *Osmanlılarda Sağlık=Health in the Ottomans, II* (İstanbul: Biofarma, 2006), pp. 232-34. These medical professionals were recorded in a *mühimme* book (register of important affairs). A *mühimme* is the copy of an order decreed as the result of deliberations at the imperial council (*dīvān*). For more on *mühimme*, see Mübahat Kütükoğlu, “Mühimme Defteri,” *Türkiye Diyanet Vakfı İslâm Ansiklopedisi (DİA)*, 2006, XXXI, pp. 520-23.
 - 2 There are four physicians and one surgeon recorded without any information regarding their shops. This might indicate that they worked with some of the authorized medical practitioners in the same shop. However, there is no clear information besides the list provided in the document.
 - 3 For earlier attempts to bring order to medical practice or “healing arts,” see Nükhet Varlık’s discussion that focuses on the sixteenth-century regulations concerning the “bodies” of the Ottoman subjects, which went hand in hand with new territorial expansions and new forms of bureaucratization in the empire: Nükhet Varlık, *Plague and Empire in the Early Modern Mediterranean World: The Ottoman Experience, 1347-1600* (New York, NY: Cambridge University Press, 2015), especially “Chapter 8: The State of the Plague Politics of Bodies in the Making of the Ottoman State”; Nükhet Varlık, “Shall Do No Harm to the

In another deed dated 1703, only three years after this city-wide survey, we find Nūḥ Efendi, this time investigating whether a physician, apparently a European convert to Islam, who had prescribed novel remedies adhering to the teachings of “new medicine” was responsible for the demise of a palace scribe in Edirne. The verdict was “guilty,” followed by a comprehensive imperial order regarding public health and medical practice in the Ottoman Empire. Again, the main issue was the practitioner’s medical competency, yet it also included some negative or at least suspicious expressions about European physicians and new medical practices they brought with them. Did the state’s attitude change completely toward European physicians and their innovative methods in three years?

In this article, I concentrate on this 1703 imperial dictum that expresses doubts about new medical applications in physician’s shops, which has often been used in secondary literature as a testimony of the Ottoman state’s resistance to any novelty in science and knowledge production. My intervention is twofold. First, I correct the dating of this oft-cited document. Since historians have used a transcription of the document with the wrong date (i.e., 1704) that was published in a compilation of Ottoman state documents, the mistake persisted for a long time in previous works. For some authors, the ban mentioned in the document allegedly acted as a blow to Western medical approaches in the Ottoman Empire altogether and helped misguided (e.g., Orientalist) interpretations to flourish regarding early modern Ottoman/Middle Eastern history. Even though the original document was from the last months of Sultan Muṣṭafa II’s (r. 1695-1703; d. 1703) reign, its erroneous dating corresponded to the reign of Sultan Aḥmed III (r. 1703-30; d. 1736). This mishap challenged even some scholars who regarded the reign of Aḥmed III as a period of reforms and innovations on many grounds and Ottomans’ gradual turn towards Europe in arts and sciences. Second, I argue that the artisanal character of these physicians and surgeons has been neglected in the previous literature, which hindered a fuller understanding of the edict in question and similar ones. Early modern Ottoman decision-makers viewed medical shops as constituents of the marketplace and medical practitioners as just another group of shop-owners, not ignoring the fact that they offered services that also concerned

Health of the Muslims: Healers and the State in Early Modern Ottoman Society,” ed. Nükhet Varlık, *Journal of Turkish Studies = Türklük Bilgisi Araştırmaları. Edebiyattan Tıp Tarihine Uzun İnce Bir Yol. Festschrift in Honor of Nuran Yıldırım I*, 55 (2021), pp. 327-47; Nükhet Varlık, “New Methods for Governing Death in Istanbul: Early Modern Ottoman Necropolitics,” *Comparative Studies of South Asia, Africa and the Middle East*, 42/1 (2022), pp. 146-62.

public health. Hence, these shops were directly affected by regulations on the marketplace. In other words, most edicts about these medical shops were primarily socioeconomic in nature, rather than aiming to impose a specific medical doctrine (e.g., Galenic discourse) or opposing a particular medical school of thought.

After introducing the notion of “new medicine” along with the decree in question, I will look at extant literature that utilized this document until today. Then, I will discuss the place of physician’s and surgeon’s shops in the early modern Ottoman socioeconomic domain. I will also present a later decree promulgated in 1729 to better understand attempts to regulate the medical marketplace in this period.

New Medicine

Born and raised in Aleppo, the physician Ibn Sellūm (d. 1670) was brought to the capital in 1654 by İbşîr Muştafâ Pasha (d. 1655), when the latter was appointed as the grand vizier, following his governorship in Aleppo.⁴ After serving at the imperial hospital built by Mehmed II (r. 1444-46, 1451-81; d. 1481) as part of his mosque complex, Ibn Sellūm shortly after became one of the court physicians and consequently the chief physician (*hekîmbaşı*), the highest medical authority in the empire. His book in Arabic entitled *New (Al)chemical Medicine* (*Kitâb al-Ṭıbb al-Jadîd al-Kimyâ’î*) included (al)chemical remedies that were relatively new for the Ottoman medical audience, who were broadly following herbal-based Galenic treatments.⁵ One of the main influences in this work was

4 Kasım Kırbıyık, “Sâlih b. Nasrullah,” *Türkiye Diyanet Vakfı İslâm Ansiklopedisi (DİA)*, 2009, XXXVI, pp. 41-43.

5 In the recent literature on early modern science and medicine, one can find the use of the term “chymistry” (and “chymical”) as an attempt to distinguish it from modern chemistry and to emphasize the unique characteristics and perspectives of alchemical practices before the nineteenth century. Similarly, I prefer to use “(al)chemical” to indicate this significant period in early modern scholarship, while translating the term “*kîmyâ’î*”. Furthermore, since the same word (*al-kîmyâ*) is used for both alchemy and modern chemistry, translation preferences can sometimes indicate whether the author is referring to a “futile” pre-modern discipline or a modern scientific field, ignoring the contributions of alchemy to early modern knowledge production and the fact that there was no clear separation between alchemy and chemistry for every scholar before the nineteenth century. See William Newman and Lawrence Principe, “Alchemy vs. Chemistry: The Etymological Origins of a Historiographic Mistake,” *Early Science and Medicine*, 3 (1998), 32–65; Lawrence Principe, *The Aspiring Adept: Robert Boyle and His Alchemical Quest* (Princeton, N.J.: Princeton University Press, 1998), 8–10; Ku-ming Chang, “Alchemy As Studies of Life and Matter: Reconsidering

the Swiss physician and alchemist Paracelsus (d. 1541) and a few of his followers. They offered a medical theory imbued with an alchemical understanding of the universe as well as the human body. Rejecting the Galenic four humors, Paracelsian (al)chemical medicine or iatrochemistry offered a new framework placing salt, sulfur, and mercury at the core of all substances and a new set of remedies relying on a myriad of chemical techniques. The proliferation of (al)chemical recipes in the medical literature and the level of interest in copying Ibn Sellūm's book along with similar ones in the following years could be viewed as evidence for the adoption and incorporation of these new medical solutions.⁶ However, as many historians have indicated, this enthusiasm for iatrochemistry never led to a complete paradigm shift in Ottoman medical understanding of the period.⁷

the Place of Vitalism in Early Modern Chymistry," *Isis*, 102/2 (2011): 322–329; William Newman, "From Alchemy to 'Chymistry,'" in *The Cambridge History of Science Vol 3: Early Modern Science*, ed. Katharine Park and Lorraine Daston (Cambridge: Cambridge University Press, 2006), 497–517; Lawrence M. Principe, *Chymists and Chymistry: Studies in the History of Alchemy and Early Modern Chemistry* (Sagamore Beach, MA: Science History Publications, 2007); William R. Newman, *Alchemy Tried in the Fire: Starkey, Boyle, and the Fate of Helmontian Chymistry* (Chicago: University of Chicago Press, 2002); Evan Ragland, "Chymistry and Taste in the Seventeenth Century: Franciscus Dele Boë Sylvius as a Chymical Physician between Galenism and Cartesianism," *Ambix*, 59/1 (2012): 1–21; Anna Marie Eleanor Roos, *The Salt of the Earth: Natural Philosophy, Medicine, and Chymistry in England, 1650-1750* (Leiden; Boston: Brill, 2007); Hiro Hirai, "Daniel Sennert, Chymistry, and Theological Debates," *Ambix*, 68/2–3 (2021): 198–213.

6 Nil Sari and M. Bedizel Zülfişkar, "The Paracelsusian Influence on Ottoman Medicine in the Seventeenth and Eighteenth Centuries," in *Transfer of Modern Science & Technology to the Muslim World. Proceedings of the International Symposium on "Modern Sciences and the Muslim World" (İstanbul 2-4 September 1987)*, ed. Ekmeleddin İhsanoğlu (İstanbul: Research Centre for Islamic History, Art and Culture, 1992), pp. 157-79; Talat Dinar, "Tıbb-ı Cedid Yazmaları Üzerine Bazı Tespitler," *Journal of Turkish Studies*, 7/4 (2012), pp. 1541-46.

7 About this point and more on new medicine (*tıbb-ı cedid*), see Miri Shefer, "An Ottoman Physician and His Social and Intellectual Milieu: The Case of Salih Bin Nasrallah Ibn Sallūm," *Studia Islamica*, 106/1 (2011), pp. 102-23; Natalia Bachour, *Oswaldus Crollius und Daniel Sennert im frühneuzeitlichen Istanbul: Studien zur Rezeption des Paracelsismus im Werk des osmanischen Arztes Şālih b. Naşrullāh Ibn Sallūm al-Ḥalabī* (Freiburg: Centaurus Verlag & Media, 2012); Natalia Bachour, "Iatrochemistry and Paracelsism in the Ottoman Empire in the Sixteenth and Seventeenth Centuries," *Intellectual History of the Islamicate World*, 6 (2018), pp. 82-116; Ebru Boyar, "Medicine in Practice: European Influences on the Ottoman Medical Habitat," *Turkish Historical Review*, 9/3 (2018), pp. 213-41; Harun Küçük, *Science without Leisure: Practical Naturalism in Istanbul, 1660-1732* (Pittsburgh, Pa.: University of Pittsburgh Press, 2020).

Ibn Sellūm’s work became the first among many other books that would promise medical novelties, either in its title or content in the early modern Ottoman world. Even though “new medicine” (*ṭıbb-ı cedīd*) was associated with the medical applications of alchemy or iatrochemistry in the beginning, the term began to accommodate the works and applications of those physicians, who were interested in translating, compiling, and experimenting with the new medical ideas of their contemporaries or moderns (*müte’ahḥirūn*) as much as (and sometimes more than) the ancients (*müteḥaddimūn*). The path introduced by Ibn Sellūm was later followed by many other influential Ottoman physicians, such as ‘Ömer Şifā’ī (d. 1746) and his student ‘Alī Münşī (d. 1733), with their emphases on hands-on practice and experimentation.⁸

The 1703 Edict

As “new medicine” was gradually becoming vogue among Ottoman scholars especially in big cities such as Istanbul and Bursa, an incident in Edirne, where the imperial court was temporarily located, caused suspicion and even alarm among the authorities. In 1703, the following imperial edict was apparently issued against these new remedies, which were then becoming popular and widespread:

I order the municipal governor (*kā’im-makām*), the judge (*mollā*), and the head of the police (*sekbānbaşı*) of Istanbul: Some pseudo-doctors among Europeans have abandoned the path of the ancient physicians and caused harm with their use of common drugs under the name of “new medicine.” Among the European physicians of this sort, Meḥmed the Convert, and his associate, as well as another European physician who had opened a shop in Edirne were exiled from the city. I have issued an imperial order (*ḥatt-ı hümayūn*) that requires Istanbul and its vicinity to be inspected and European physicians of this sort to be exiled. As soon as my imperial order arrives, these issues shall be observed closely. Formerly, when my sublime court (*devlet-i ‘alīyyem*) was in Istanbul, physicians both in the city and its surroundings were investigated. Those found to be incompetent were eliminated and their shops were closed. Those whose skills and merit (*ḥazākat ve istihkāk*) were apparent were given a certified permission (*membūr temessük*) by the most learned among the contemporary scholars, Nūḥ Efendī—may God Almighty sustain his virtues—, [who is] the chief physician with the rank of military judgeship of Rūmili (*Rūmili ḳādī’askerligi pāyesiyle*). Except for those

8 Akif Ercihan Yerlioğlu, “Paracelsus Goes East: Ottoman ‘New Medicine’ and its Afterlife” (doctoral dissertation), Harvard University, 2020, especially “Chapter 1: What is *Ṭıbb-ı Cedīd* (“New Medicine”)?” pp. 14-69.

with permission from the aforementioned scholar, Europeans of the sort who, by some means, arrived and opened a physician's shop shall be forced to close their shops. Those who are examined and given permission (*temessük*) shall remain in their shops with only one apprentice. They shall be warned not to have any person, associates or others, in the shop. After establishing order in this way, you shall report the situation to my center of greatness ... The last days of *Muḥarrem* [1]115 (Early days of June 1703).⁹

Even though many scholars have interpreted the order as targeting “new medicine”—and it does to some extent—I believe there is more to discuss and enough room for more layered inferences, especially when it is evaluated in its socioeconomic context. As the document makes it clear, it was not the first time that investigations about the competency of medical practitioners took place. Addressees of the document are reminded that recently Istanbul and its vicinity had been examined to check whether all the physicians were up to imperial standards. Those who met the necessary conditions received authorization that time and, hence, the imperial decree targeted the unauthorized ones of any kind, although the disturbance began with some European “pseudo-physicians.” When we look at the history of similar city-wide surveys of medical practitioners in early modern Ottoman Empire, it becomes apparent that the main criteria were capability (*ḥazâkat*) and qualification (*ehliyet*), not irrevocable devotion to ancient medical viewpoints.¹⁰

Another important feature of the document is that it does not directly say anything about physicians who were Ottoman subjects. Rather it seems to be strictly about Europeans, more specifically, those who opened shops having transgressed the regulations (i.e., “European physicians of this sort” “Europeans of this sort”). Here, one should bear in mind that European physicians residing in the Ottoman Empire have raised the eyebrows of the authorities to some extent since they could enter the most intimate circles, including those of the decision-makers,

9 BOA, A.DVNS.MHM.d 114/730. See Appendix for the full transcription and facsimile of the document. For an earlier translation of the same document with some differences, see also Küçük, *Science without Leisure*, pp. 274-75.

10 The 1700 survey briefly mentioned in the beginning is also another example for city-wide surveys that took place in the capital. However, it was not the sole investigation executed to check the standards for medical practice in shops. For other examples, see Yılmaz and Yılmaz, *Osmanlılarda Sağlık II*, pp. 62-64; Ahmet Refik [Altınay], *Hicrî on ikinci asırda İstanbul hayatı (1100-1200)* (İstanbul: Enderun Kitabevi, 1930), pp. 214-15.

and could extract a lot of information that would be useful for the adversaries of these very important patients. Indeed, some physicians acted as spies for some states in the premodern world. Ottoman sultans suspected that physicians, especially the itinerant ones, might have harmful agendas.¹¹

Regarding how the document became a topic of discussion among historians, one should give the greatest credit to Ahmed Refik Altınay (d. 1937), the first historian who brought this document into light by including it in his four-volume series, *Istanbul Life (İstanbul Hayatı)*, a selection of Ottoman state documents in transcription into Latin alphabet that covers almost four centuries of social and economic life in the empire. The first volume reported on imperial decisions from the *hijri* years 961 to 1000, the second volume from 1000 to 1100, the third volume from 1100 to 1200, and the fourth volume from 1200 to 1255.¹² Altınay’s work became—and still is—an essential reference for Ottoman historians especially at a time when access to archival materials was quite limited.¹³

11 For instance, see BOA, C. DH. 133/6602; BOA, HAT. 34/1724; BOA, TSMA No: 2380/277 (520/27); BOA, TSMA 2380/8 (516/8); BOA, TSMA 2380/18 (516/17). That is not to say that no Europeans were allowed in the palace or the dwellings of the ruling elite. G. A. Russell, “Physicians at the Ottoman Court,” *Medical History*, 34/3 (1990), pp. 243-67. On the contrary, there are many accounts demonstrating that European medical experts were sometimes summoned when physicians of the court failed to find a useful cure for the members of the ruling dynasty. See, for instance, Cristóbal de Villalón, *Türkiye seyabati: Kanuni Sultan Süleyman devrinde İstanbul, 1557 yılında bir el yazması, Osmanlılara esir düşen İspanyol Pedro'nun anıları*, trans. Yeliz Demirören (İstanbul: Erko, 2011); Regina Salomea Pilsztynowa, *The Istanbul Memories in Salomea Pilsztynowa's Diary "Echo of the Journey and Adventures of My Life" (1760)*, ed. Paulina D. Dominik (Bonn: Max Weber Stiftung, 2017). Even though physicians and other medical practitioners (e.g., surgeons, ophthalmologists) could also see patients at their bedside—especially those patients with means—, let us keep in mind that the decree in question has to do with the physicians who primarily offered service in a shop in the marketplace without a permission.

12 See Ahmet Refik Altınay, *Onuncu asr-ı hicrîde İstanbul hayatı; 961-1000 [1553-1591]* (İstanbul: Matbaa-i Orhaniye, 1917); *Hicri on birinci asrda İstanbul hayatı, 1000-1100* (İstanbul: Devlet Matbaası, 1931); *Hicri on ikinci asrda İstanbul hayatı (1100-1200)* (İstanbul: Devlet Matbaası, 1930); *Hicri on üçüncü asrda İstanbul hayatı, 1200-1255* (İstanbul: Matbaacılık ve Neşriyat TAŞ, 1932).

13 For more on Ahmet Refik Altınay, see Muzaffer Gökman, *Taribi Sevdiren Adam Ahmed Refik Altınay: Hayatı ve Eserleri* (İstanbul: Türkiye İş Bankası Kültür Yayınları, 1978); Abdülkadir Özcan, “Ahmed Refik Altınay,” *Türkiye Diyanet Vakfı İslâm Ansiklopedisi (DİA)*, 1989, II, pp. 120-21.

A Latinized transcription of the document in question was first published in 1930 with the wrong date (i.e., *hijri* 1116 or 1704 AD) by Ahmed Refik Altınay in the third volume of *Istanbul Life*. Correct dating of the document is of utmost importance because the actual date corresponds to a time just a few months before a very important sociopolitical event, the 1703 rebellion, whereas the mistaken date is after that bloody episode. The rebellion marked the end of Sultan Muṣṭafâ II's reign when a coalition among different groups of dissenters including Istanbul armorers (*cebeciler*), members of the religio-judicial bureaucracy (*'ilmîye*), and merchants in the capital marched to Edirne to force the sultan to step down. Researchers relying on Altınay's *Istanbul Life* viewed the 1703 order as belonging to the reign of Sultan Aḥmed III (even though the decision was actually taken by his predecessor Sultan Muṣṭafâ II), as if the imperial council (*dīvân*) and the center of power were in Istanbul (whereas they were, in fact, in Edirne at the time) (See Table 1 for further clarification).

Table 1

The Original Document (BOA, A.DVNS.MHM.d 114/730)	Ahmed Refik Altınay's transcription in <i>Istanbul Life</i>
Last days of <i>Muḥarrem</i> 1115 (Early days of June 1703).	Last days of <i>Muḥarrem</i> 1116 (Last days of May 1704).
Sultan Muṣṭafâ II's reign.	Sultan Aḥmed III's reign.
The throne is in Edirne.	The throne is in Istanbul.
Nûḥ Efendi is the chief physician.	Nûḥ Efendi is the chief physician.

What Altınay (or the editor of the book) committed was seemingly a minor error. It could have happened even during the typesetting phase of the book.¹⁴ What is more crucial is how this mistake was readily accepted and replicated without leading to any question or doubt regarding the decision taken by Ottoman

¹⁴ Altınay provided the decree with the following summary: "On prohibiting Frankish physicians from using new drugs and shutting down of shops owned by incompetent physicians in the vicinity of Istanbul." ("*Firenk tabiblerin yeni ilâç kullanmamalarına ve İstanbul civarındaki na ehil tabiblerin dükkânları kapatılmasına dair.*") Since later edition of the work in 1988 preserved the same text, it perpetuated the date of the order, repeating the same mistake. See Ahmet Refik Altınay, *Hicrî on ikinci asırda İstanbul hayatı (1100-1200)* (İstanbul: Enderun Kitabevi, 1930/1988), pp. 37-38.

authorities. Even historians who portrayed Aḥmed III as a reformer, or—with a teleological interpretation—an antecedent to Westernization, did not have any issues coining him as the sultan who aimed to put an absolute end to medical innovations of any kind, or “new medicine” whatsoever. Moreover, as it will be discussed in detail in the next chapter, this imperial decision provided a sought-after historical artifact, or solid evidence, for those who wanted to demonstrate that there was an inherent resistance against novelties and progress among the Ottomans, sometimes attributed to the ruling class, or at times to Ottoman/Islamic culture as a whole—presenting it as a problem of mentality. I believe this readiness to take Altınay’s transcription for granted stems from the long shadow cast by Ottoman history-writing by using dichotomies (e.g., enlightened vs. reactive; Eastern vs. Western; traditional vs. modern). For instance, although the Tulip Era (1718-1730), which was viewed as an epoch of artistic flourishing and experimentation with novelties, including Western ones, in many fields of arts and sciences, was within the reign of Aḥmed III (and the influential grand vizier İbrāhim Pasha was in office), it was still regarded as a “temporary” enlightenment in Ottoman history.¹⁵ Hence, in secondary literature, a pre-Tulip Era document such as the 1703 decree, which had a negative tone about new medical methods, could easily be interpreted as a reaction to premature medical development and a wholesale imperial ban on innovations in medicine.

Tracing Altınay’s Version of the 1703 Edict in Previous Scholarship

One of the reasons why the dating error persisted in previous literature for a long time is partly because the mistaken reference to Altınay’s rendering has been there even in the first works that provided information on Ottoman medicine.¹⁶

15 For more information about the Tulip Era, see Can Erimtan, *Ottomans Looking West? The Origins of the Tulip Age and Its Development in Modern Turkey* (London: I.B. Tauris, 2008); Dana Sajdi, ed., *Ottoman Tulips, Ottoman Coffee: Leisure and Lifestyle in the Eighteenth Century* (London; New York: Tauris Academic Studies, 2007); Abdülkadir Özcan, “Lâle Devri” *Türkiye Diyanet Vakfı İslâm Ansiklopedisi (DİA)*, 2006, XXVII, pp. 81-84.

16 It is worthwhile to note that a work by Coşkun Yılmaz and Necdet Yılmaz that brought together numerous state documents related to Ottoman medicine and public health provided the correct date of the imperial deed. However, because of Altınay’s prominent position in the scholarship, some scholars still consulted his version. See also Yılmaz and Yılmaz, *Osmanlılarda Sağlık*, p. 238. Here, I only included those authors who used Altınay’s incorrect rendering in their works. Otherwise, there are some recent works which consulted either the original document or the accurate version of it in *Osmanlılarda Sağlık (Health in*

During his exile in France, physician, politician, and historian Abdülhak Adnan Adıvar (d. 1955) composed one of the first comprehensive works on the history of science and medicine in the Ottoman Empire, entitled *La science chez les Turcs ottomans*. The book was first published in French in 1939 and then in Turkish in 1943. Adıvar's study set an example in the scholarship for the next generations and has been cited extensively. In his discussion on new applications of medicine, Adıvar mentions that Ottoman authorities were disturbed by potentially harmful medical applications performed by "ignorant" (*cahil*) physicians. In contrast to these physicians, Adıvar portrays Nüh Efendi (d. 1707) as the chief physician who safeguarded public health in the context of unknown remedies and doubtful medical practices. However, he begins his discussion with an error by stating that Nüh became the chief physician during Sultan Aḥmed III's time, even though he had already been in the office since 1695, during Muṣṭafâ II's reign.¹⁷ Then, Adıvar inserts the imperial order from Altınay's book by noting that (al)chemical approaches developed by Paracelsus had caused a lot of controversy in Europe and were met with opposition from many physicians. According to Adıvar, since this new therapeutic method was "superficially recorded in [Ottoman] books, who knows how bad its applications resulted at the hands of ignorant [European] physicians who came running to our country [i.e., Ottoman lands] from their own, hoping to find some adventure."¹⁸

During his years in France, one of Adıvar's students was the historian and Orientalist Bernard Lewis.¹⁹ Lewis showed his admiration and respect for his teacher and colleague by dedicating his now controversial work *The Muslim Discovery of*

the Ottomans) by Yılmaz and Yılmaz. For instance, see Boyar, "Medicine in Practice"; Feza Günergün, "Convergences in and around Bursa: Sufism, Alchemy, Iatrochemistry in Turkey, 1500-1750," in *Entangled Itineraries: Materials, Practices, and Knowledges across Eurasia*, ed. Pamela H. Smith (Pittsburgh: University of Pittsburgh Press, 2019), pp. 227-57. Although Günergün cited Altınay's *Istanbul Life*, she correctly gave the edict's date as 1703 (See notes on page 324).

17 Ali Haydar Bayat, *Osmanlı Devleti'nde Hekimbaşılık Kurumu ve Hekimbaşlar* (Ankara: Atatürk Kültür Merkezi Başkanlığı Yayınları, 1999), pp. 84-88.

18 Abdülhak Adnan Adıvar, *Osmanlı Türklerinde İlim* (İstanbul: Remzi Kitabevi, 1982), p. 164: "... Türkiye'de bu tedavi usulü, yarım yamalak bir surette kitaplara geçtiği gibi kim bilir memleketlerinden, sergüzeşt peşinde koşup, memleketimize gelen cahil hekimler elinde ne kadar kötü sonuçlar vermiştir."

19 Also see Bernard Lewis, *Notes on a Century: Reflections of a Middle East Historian* (New York: Viking, 2012), p. 35.

Europe to Adnan Adivar, among others. It goes without saying that Lewis often consulted Adivar’s works on issues concerning Ottoman science and knowledge production. In *The Muslim Discovery*, Lewis indicated that the early years of the eighteenth century witnessed new works in science and medicine. For the latter, he specifically mentioned three physicians: ‘Ömer Şifâ’î, Nûḥ Efendi, and Şâbân Şifâ’î (d. 1705). Lewis associated these scholars with novel medical practices and theories of the period, though Adivar did not mention Şâbân Şifâ’î in this manner.²⁰ An even more problematic aspect of Lewis’ narrative is that he deplored that the novel applications were suppressed by Ottoman authorities, though one of those people who had a major say in this decision was the chief physician of the time, no one but Nûḥ Efendi himself. That is to say, Lewis was contradicting his own argument by claiming that Nûḥ put an end to innovative ideas and practices he adopted and cherished himself. While concluding this section, Lewis wrote, “[t]his did not stop Ömer Şifai from continuing his work and writing a treatise in eight volumes on the so-called new medicine.”²¹ He did not provide the title of this work, but there is no extant eight-volume work produced by ‘Ömer Şifâ’î mentioned in the available bibliographical sources and library catalogues. Still, this information, along with Lewis’ other claims, was further repeated in later works.²²

Roughly around the same time as Lewis’ book, Nil Akdeniz[-Sarı]’s dissertation in Turkish on Ottoman physicians and their moral and ethical code also relied on Altınay’s *Istanbul Life*. Hence, the author interpreted the order as evidence that Sultan Aḥmed III wanted to take some precautions with the help of the chief physician Nûḥ Efendi against some European pseudo-physicians who were allegedly causing harm to the public.²³ She further held onto this point in an oft-cited article co-authored with Bedizel Zülfikar.²⁴

20 See Adivar, *Osmanlı Türklerinde İlim*, p. 161.

21 Bernard Lewis, *The Muslim Discovery of Europe* (New York: W.W. Norton, 1982), pp. 230-31.

22 See, for instance, Hosam Elkhadem, “Du latin à l’arabe: introduction de la doctrine médico-chimique de Paracelse en Orient au XVIIe siècle,” *Civilisations*, 38/1 (1988), pp. 53–73.

23 Nil Akdeniz, “Osmanlılarda hekim ve hekimlik ahlâkı” (doctoral dissertation), İstanbul University, 1977, pp. 149-50.

24 Sarı and Zülfikar, “The Paracelsusian Influence”, pp. 168-69.

In a work which shed light on the events that took place before the legislation of the imperial decree in question, Markus Köhbach also consulted Altınay's transcription. Despite its importance in providing the background of the 1703 decree, it seems that Köhbach's article did not attract the attention it deserved.²⁵ In an anonymous Ottoman chronicle housed at the Berlin State Library (*Staatsbibliothek zu Berlin*), Köhbach found sections strictly related to events that led to the 1703 imperial decree. In the same year, a palace scribe with the pen name Şināsî apparently sought medical help from one of those physicians in Edirne who adopted new therapeutic methods.²⁶ According to the chronicle, the scribe died shortly after using the prescribed drugs. A certain physician named Meḥmed, reportedly a convert, and his associate were summoned to the palace to explain the treatment they had applied for Şināsî's illness. Moreover, they were examined by the chief physician for their medical competency—a common procedure in malpractice allegations.²⁷ The physicians were eventually found guilty and exiled from Edirne. The detailed account in the chronicle conveys that authorities forced

25 Markus Köhbach, "Europäische Ärzte im Osmanischen Reich am Beginn des 18. Jahrhunderts — der Fall Şināsî," *Sudhoffs Archiv*, 64/1 (1980), pp. 79-85. Here are some of the works that consulted Köhbach's article: B. Harun Küçük, "Early Enlightenment in Istanbul" (doctoral dissertation), University of California, San Diego, 2012; B. Harun Küçük, "Impact of the Scientific Revolution and Western Science," in *The Oxford Encyclopedia of Philosophy, Science, and Technology in Islam*, ed. Ibrahim Kalin (Oxford, New York: Oxford University Press, 2014), pp. 375-82; B. Harun Küçük, "New Medicine and the Hikmet-i Tabî'iyye Problematic in Eighteenth-Century Istanbul," in *Texts in Transit in the Medieval Mediterranean*, ed. Y. Tzvi Langermann and Robert G. Morrison (University Park, Pennsylvania: The Pennsylvania State University Press, 2016), pp. 222-42; Küçük, *Science without Leisure*; Marlene Kurz, "Modernisation in the Ottoman Empire between the Treaty of Karlowitz (1699) and the Reign of Mahmud II (1808–1839): A Process of Cultural Transfer," in *Empires and Peninsulas: Southeastern Europe between Karlowitz and the Peace of Adrianople, 1699-1829*, ed. Plamen Mitev et al. (Berlin; Münster: Lit, 2010), pp. 163-70; Ruth I. Meserve, "Western Medical Reports on Central Eurasia," in *Historical and linguistic interaction between Inner-Asia and Europe: proceedings of the 39th Permanent International Altaistic Conference (PIAC) Szeged, Hungary: June 16-21, 1996*, ed. Árpád Berta and Edina Horváth (Szeged: University of Szeged, 1997), pp. 179-93.

26 On Şināsî, see Şeyhî Mehmed Efendi, *Vekâyi'ül-Fuzalâ: Şeyhî'nin Şakâ'ik Zeyli*, ed. Ramazan Ekinci (İstanbul: Türkiye Yazma Eserler Kurumu Başkanlığı, 2018), pp. 2313-18; İsmail Belig, *Nubbetü'l-Âsâr Li-Zeyli Zübdeti'l-Eş'âr*, ed. Abdülkerim Abdulkadiroğlu (Ankara: Gazi Üniversitesi Yayınları, 1985), pp. 228-34.

27 About examinations in other sciences, see Khaled El-Rouayheb, *Islamic Intellectual History in the Seventeenth Century: Scholarly Currents in the Ottoman Empire and the Maghreb* (New York, NY: Cambridge University Press, 2015), 125-28.

Meḥmed the Physician to consume some of the drugs he had given to the late scribe, probably as a punishment, yet no harmful reaction was observed. Even though Köhbach found this rare account from 1703 and established its connection with the imperial decree on suspicious activities of incompetent physicians, he still consulted Altınay’s rendering of the imperial decision and claimed that Şināsī’s death made the authorities more skeptical about “new medicine” to the extent that they produced the proscriptive decree, interestingly enough, not immediately, but rather almost a year later, in 1704 (*hijri* 1116)—the date that Altınay provided.²⁸

Further information about the exile of the physician in question comes from the Ottoman State Archives, where we can find an imperial decree stating that he was expelled to Sivas, a city in Central Anatolia. The document informs the governor-general (*beglerbegi*) of Sivas and the warden of the Sivas Fortress that the physician was sent there to stay confined in the fortress.²⁹ Recorded in the same book (*Bâb-ı Âşafî Dîvân-ı Hümâyûn Sicilleri Mühimme Defterleri*) with the aforementioned copy of the 1703 decree, this document of expulsion is also from the “last days of *Muḥarrem* 1115,” corresponding to the first days of June 1703.³⁰ That is to say, first, the imperial council decided on Meḥmed’s exile and notified the authorities in Sivas. Then, they wanted to investigate whether there were more cases of incompetence in Istanbul and its vicinities, leading to the decree in question that addressed the municipal governor, the judge, and the head of the police of Istanbul.

28 Köhbach, “Europäische Ärzte im Osmanischen Reich”. The label on the original chronicle reads “*kitâb-ı tevârîḥ-i sultân süleymân biñ toḵsân toḵuz senesinden biñ yüz on senesinden söyler.*” and the manuscript is registered as *Geschichte des osmanischen Reiches von 1687-1704*, Staatsbibliothek zu Berlin, Diez A. quart. 75.

29 BOA, A.DVNS.MHM.d. 114/62.

30 In his biographical work, Şeyhî Mehmed Efendi gave the year of Şināsī’s death as *hijri* 1114 without providing information about the month and the day. Yet, it is highly probable that Şināsī passed away towards the end of the year. Hence, the interrogation and the eventual punishment of the physician took place in the first month (i.e., *Muḥarrem*) of 1115, according to both the narrative of the Berlin manuscript and the document about the physician’s exile to Sivas. See Şeyhî Mehmed Efendi, *Vekâyi’ül-Fuzalâ: Şeyhî’nin Şakâ’ik Zeyli*, ed. Ramazan Ekinci (İstanbul: Türkiye Yazma Eserler Kurumu Başkanlığı, 2018), pp. 2313-18; *Geschichte des osmanischen Reiches von 1687-1704*, Staatsbibliothek zu Berlin, Diez A. quart. 75, 223b-224b.

Another work that consulted Altınay's book is Ali Haydar Bayat's important reference book, *The Office of the Chief Physician and Chief Physicians in the Ottoman Empire (Osmanlı Devleti'nde Hekimbaşılık Kurumu ve Hekimbaşılar)*, published in 1999. As the title suggests, it is a study of Ottoman chief physicians from the office's inception in the fifteenth century to the nineteenth century. In the section on Nūḥ Efendi, Bayat also used Altınay's *Istanbul Life* and copied the imperial decree from the book as it is.³¹ Since Bayat's *The Office of the Chief Physician* is a text that Ottoman medical historians consulted frequently, the belief that the document was decreed in 1704 (*b.* 1116) was further bolstered.

Recently Harun Küçük turned to Altınay's rendering in his works, first by providing its English translation in his dissertation and then by continually referring to it in his other works on early modern Ottoman medicine. In *Science without Leisure: Practical Naturalism in Istanbul, 1660-1732*, Küçük states that "Ahmed III and his chief physician, Nuh, banned new medicine in 1703, following a major rebellion that put Ahmed on the throne."³² The author seems to be confused about when the imperial order was actually enacted. Although he cites Altınay's *Istanbul Life* and mentions the related document as "[t]he edict of 1704" in the endnotes, he dates the alleged "ban" to 1703 and attributes it to Sultan Ahmed III in the text.³³ Küçük continues, "[w]ithin a year Nuh's ban would lead to a shakeup of medical shops in Istanbul."³⁴ Neither does he provide any evidence regarding that "shakeup," nor can we confirm that such systematic persecution took place, especially in that particular year, in light of available evidence. Roughly a month after the actual promulgation of the decree by Muştafâ II, a *political* shakeup did happen with the Edirne Incident or the 1703 rebellion and the palace would settle back in Istanbul with the enthronement of a new sultan, Ahmed III. As a matter of fact, one may even question whether this imperial order about physicians practicing in shops was put into action within a short amount of time while a big storm was already brewing.³⁵

31 Bayat, *Osmanlı Devleti'nde Hekimbaşılık*, pp. 84-88.

32 Küçük, *Science without Leisure*, p. 167.

33 Küçük, *Science without Leisure*, pp. 274-75.

34 Küçük, *Science without Leisure*, p. 168.

35 For more information on the 1703 rebellion or the Edirne Incident, see Rifa'at Ali Abou-El-Haj, *The 1703 Rebellion and the Structure of Ottoman Politics* (Leiden: Nederlands Historisch-Archaeologisch Instituut te Istanbul, 1984); Abdülkadir Özcan, "Edirne Vak'ası," *Türkiye Diyanet Vakfı İslâm Ansiklopedisi (DİA)*, 1994, X, 445-46.

Medical Shops in the Marketplace

Patients in early modern Istanbul had more than one option for medical care. First, in Islamic societies, including the Ottoman Empire, hospitals were important nodes in large philanthropic networks that provided free treatment and medicine to the sick.³⁶ Physicians could be summoned to a patient's home as well and perform diagnostic and therapeutic procedures at the bedside, if the patient could afford such care.³⁷ At a time when there were no clear boundaries between medical professions, we should also remember that there were other specialists, such as apothecaries, barbers, and circumcisers, who also offered some therapeutic solutions. Midwives also provided important medical services and advice in the world of women, although they left fewer traces in archival documents than men.³⁸ Another therapeutic option was the physician's shop, which is the subject of the present discussion.

It seems that the importance of medical shops did not only stem from the fact that they met the medical needs of early modern Ottoman society, but also because at least some of them provided medical training there. Adnan Adıvar was one of the first to make the connection between the growing number of physician's shops and the acquisition of knowledge on medical theory and practice in these venues. The author noted the following observation in his comprehensive work on the history of science in the Ottoman Empire: "It can be inferred that at the beginning of the eighteenth century, medical learning did not usually rely on regular university or hospital training. On the contrary, it was achieved by way of learning from a master and working for free in shops."³⁹ Although Adıvar had

36 Nil Sarı, *Tarihi sağlık kurumlarımız: Darüşşifalar = Darüşşifas: historical health institutes* (İstanbul: Sanovel İlaç San ve Tic AŞ, 2010); Miri Shefer-Mossensohn, *Ottoman medicine: healing and medical institutions, 1500-1700* (Albany: SUNY Press, 2009), especially pp. 145-80.

37 Ayten Altıntaş and Hanzade Doğan, "Osmanlıda Serbest Hekimlik Yapan Esnaf Tabip," in *Osmanlılarda Sağlık*, ed. Coşkun Yılmaz and Necdet Yılmaz, vol. 1 (İstanbul: Biofarma, 2006), 265-73.

38 Nil Sarı, "Osmanlı Sağlık Hayatında Kadının Yeri", *Yeni tıp tarihi araştırmaları = The new history of medicine studies*, 2-3 (1996/97), pp. 11-64; Avner Giladi, *Muslim Midwives: The Craft of Birthing in the Premodern Middle East* (New York: Cambridge University Press, 2015).

39 See Adıvar, *Osmanlı Türklerinde İlim*, pp. 165-66: "XVIII. yüzyıl başlarında, tıbbın genellikle, muntazam bir medrese veya hastane tahsiline bağlı olmadığı, tersine usta-çırak usulüyle ve dükkanlarda parasız çalışma yoluyla, öğrenildiği anlaşılıyor."

a negative tone in his comparison of this new form of education to those of the *medreses* (universities), it is worthwhile to note that he still noticed something that needs to be examined thoroughly.

Medical shops had existed for centuries, especially as a training ground for novice physicians, along with hospitals and bedside visitations of patients. On the other hand, physician's and surgeon's shops were also among the significant sites of the early modern marketplace, though this aspect has been disregarded in the previous literature. Because of this artisanal aspect of medical practitioners, the Ottoman palace intended to apply the same regulatory measures utilized for all the other shops and craftsmen of Istanbul to inspect the quality of services of the physicians and surgeons in the marketplace, albeit with necessary modifications. It is apparent that the Ottoman authorities regarded these shop-owner medical professionals as "artisans of the market" (or *eşnâf*) and aimed to keep physicians and surgeons in check. For others, especially itinerant ones, who provided various forms of medical services (e.g., bone-setting, circumcision, etc.), the palace got involved only if there was a complaint about the treatment. All in all, the primary aim of the Ottoman state was to regulate the medical shops in the marketplace, those that could be registered and monitored easily, not to implement policies based on a specific medical doctrine that they would compel professionals to abide.

If we look at the history of the marketplace regulations in Islamicate societies, norms seem to have been maintained via the institution of *hisba*. The market inspector *muhtasib* (Arabic) / *muhtesib* (Ottoman Turkish) oversaw whether everything was in order in the market and every craftsman, including some medical practitioners (e.g., barber-surgeons, blood-letters, etc.), was following the desired standards. Even though it had a more religious connotation in its beginnings, *hisba* began to refer to a set of ethical standards more or less stripped from its religious meaning. Similarly, the Ottoman Empire employed *ihtisab* (from the same Arabic root with *hisba*) regulations to establish control among the dealings of the people in crafts and trade. One finds the first Ottoman *ihtisab* regulations during the reign of Bâyezîd II (r. 1481-1512; d. 1512), followed by successive sultans in a similar fashion.⁴⁰ These precepts demonstrate that the state viewed physicians and surgeons as craftsmen (*eşnâf*). In the book of laws (*kanunnâme*) decreed by

40 Cl. Cahen, M. Talbi, R. Mantran, A.K.S. Lambton, A.K.S. and A.S. Bazmee Ansari, "Hisba", in *Encyclopaedia of Islam, Second Edition*, ed. P. Bearman, Th. Bianquis, C.E. Bosworth, E. van Donzel, W.P. Heinrichs (Brill Online, 2012); (Accessed July 25, 2022), http://dx.doi.org.ezp-prod1.hul.harvard.edu/10.1163/1573-3912_islam_COM_0293

Selīm I (r. 1512-20; d. 1520), and Süleymān the Magnificent (r. 1520-66; d. 1566), for instance, medical practitioners were counted among the artisans of the marketplace.⁴¹ This practice seems to have continued during the seventeenth century as well.⁴² More specifically, in Hezārfenn Hüseyn’s *Summary of Explanation* (*Telhîsü’l-Beyân*), a work that covers the institutions and law codes of the Ottoman state, physicians and surgeons were mentioned among shop-owner artisans (*dekākin-i erbāb-ı hîref*).⁴³ The consistency of the state practice in classifying medical professionals as members of the marketplace—as much as sherbet-makers, apothecaries, and bakers were—is further revealed by similar phrases in these law books regarding what inspectors should examine carefully about the practices of physicians and surgeons.⁴⁴

To further envisage the place of physicians and surgeons of Istanbul in the eighteenth-century Ottoman socioeconomic structure, we should consider the parallels and distinctions between these medical professionals and other craftspeople who worked in the same context. All of the arts and crafts in the marketplace had similar patterns in their training programs, which are reflected in the vocabulary used to describe the stages of expertise. Great examples can be found among the complaints registered in the Ottoman court records regarding newcomers who, without necessary qualifications and lack of guild masters’ approval, made every attempt to offer service to the public against the rules and regulations of the related guild. That is to say, anyone with a claim to expertise in any craft who had not “served a master” (*üstāda hizmet itmek / üstāda varmak*) was considered as gravely deficient in their learning process.⁴⁵

41 Selami Pulaha and Yaşar Yücel, eds., *Le Code (Kānūnnāme) de Selim Ier (1512-1520) et certaines autres lois de la deuxième moitié du XVIIe siècle = I. Selim Kānūnnāmesi (1512-1520) ve XVI. yüzyılın ikinci yarısının kimi kanunları* (Ankara: Türk Tarih Kurumu, 1988), pp. 34-40; Ahmed Akgündüz, ed., *Osmanlı Kanunnameleri ve Hukuki Tablilleri, 4. Kitap, Kanunî Devri Kanunnameleri, I. Kısım Merkezi ve Umumi Kanunnameler* (İstanbul: FEY Vakfı, 1992), p. 329.

42 Ahmed Akgündüz, ed., *Osmanlı Kanunnameleri ve Hukuki Tablilleri, 9. Kitap, I. Ahmed, I. Mustafa ve II. Osman Devirleri Kanunnameleri (1012/1063 – 1031/1622)* (İstanbul: Osmanlı Araştırmaları Vakfı, 1996), p. 532.

43 Hezarfen Hüseyn Efendi, *Telhîsü’l-beyân fî kavânin-i Âl-i Osmân*, ed. Sevim İlgürel (Ankara: Türk Tarih Kurumu Basımevi, 1998), p. 53.

44 Altıntaş and Doğan, “Osmanlıda Serbest Hekimlik Yapan Esnaf Tabip,” pp. 265-73.

45 For examples in medicine and surgery, see, for instance, Yılmaz and Yılmaz, *Osmanlılarda Sağlık*, p. 92, 315, 320, 350. For detailed information on the training process of novices

Another similarity between medical professionals and other artisans is the issuing of licenses or diplomas (*berāts*) along with the allocation of slots (*gediks*) for shops. However, what stands out as a fundamental difference is that the *gediks* of the physicians could not be transferred to their successors after their death, as was done for other artisanal shops. In the eighteenth century, we see the beginning of a waiting list—as will be discussed shortly—for physicians and surgeons to obtain a workplace in the market. According to this procedure, when a practitioner passed away, his position was received by the first person on the list bestowed with the imperial permit. It was common practice in all other guilds to transfer the *gedik* to the deceased artisan's son or, in the absence of a son, to his assistant (*kalfa*). The primary objective of this was to deter “outsiders” with dubious qualifications from infiltrating the guild, which would probably lead to the production of goods with poor quality or offering of bad service.⁴⁶ In the same fashion, to prevent maltreatment and to establish medical standards, the chief physician allotted *gediks*, provided diplomas, and managed the positioning of physicians and surgeons in Istanbul on the waiting list. Hence, medical professionals were part of this socio-economic system in the eighteenth century, with minor modifications for their respective professions.

One important difference between medical practitioners and other artisans is that the relationship between the palace and the health professionals was more direct than that of other artisans. This indicates that the palace exercised more direct control over physicians and surgeons. In the case of a conflict between the authorities and a guild, the steward (*kethüdā*) (and/or the *yigıtbaşı*) represented the guild in front of a judge (*kādī*) in court and defended his people to discuss a settlement with the palace.⁴⁷ Other than these encounters, most of their dealings were handled within the guild, which rendered the organization highly autonomous. On the other hand, the case was different for medical professionals in the marketplace. It seems that their body lacked a representative-supervisor as one

in guilds, see Eunjeong Yi, *Guild Dynamics in Seventeenth-Century Istanbul: Fluidity and Leverage* (Leiden; Boston: Brill, 2004), pp. 44-57.

46 See, for instance, the case about the jewelers in 1751, in Ahmet Kal'a, ed., *İstanbul Külliyyatı I, İstanbul Ahkâm Defterleri, İstanbul Esnaf Taribi 1* (İstanbul: İstanbul Araştırmaları Merkezi, 1997), pp. 69-70 (İstanbul Hüküm 3/116/443): “*ecānibden şäkird alınduğda tek-mil-i şan'at itmēdin āhar mahalde yedlerinde alçağ ve redī zuhūr idüb*”

47 Mübahat Kütükoğlu, “Osmanlı Esnaf Örgütlerinde Oto-Kontrol Müessesesi,” in *Ahilik ve Esnaf: Konferanslar ve Seminer Metinler Tartışmalar* (İstanbul: İstanbul Esnaf ve Sanatkarlar Derneği Yayınları, 1986), pp. 56-64; Yi, *Guild Dynamics*, pp. 70-87.

finds in other guilds. Additionally, whilst a patient or his/her family made a complaint about the treatment of a physician or surgeon offering service in his shop, the chief physician personally conducted an investigation into the case.

Physicians and surgeons in the marketplace remained in their liminal position (i.e., being an artisan of the marketplace and a health professional at the same time) for quite some time until steps toward full-blown medical professionalization were taken after the foundation of the modern medical school in 1827.⁴⁸ Prior to these nineteenth-century reforms, concern for public health arose periodically. At these times, the chief physician adapted some of the marketplace regulations for physicians and surgeons providing service in shops. An important milestone among these regulations would come in 1729 by utilizing the *gedik* (slot) system to have more control over medical shops in Istanbul.

A New Edict

Throughout the politically turbulent transition in 1703, Nūḥ Efendi retained his position during the reign of the new sultan Aḥmed III. After Nūḥ's death in 1707, Yeñibahçeli Meḥmed Efendi (d. 1723), 'Ömer Efendi (d. 1724), and Ḥayātizāde Muṣṭafā Feyzī (d. 1738) served the empire, respectively, as the chief physician. A later edict decreed in 1729, during the reign of Sultan Aḥmed III, did not mention *ṭıbb-ı cedīd* (new medicine) at all, but stressed the importance of inspecting the competency of medical practitioners—like the concerns expressed in almost all earlier orders. Harun Küçük interpreted this later imperial order as an official pardon for the iatrochemists, the physicians who had once experimented with novel and pernicious (al)chemical methods and had allegedly been proscribed from working in the capital because of that. Nevertheless, this seems to be an overinterpretation with no substantial evidence.⁴⁹

48 Ceren Gülser İlikan-Rasimoğlu, “The Foundation of a Professional Group: Physicians in the Nineteenth Century Modernizing Ottoman Empire (1839-1908)” (doctoral dissertation), Boğaziçi University, 2012.

49 Küçük, *Science without Leisure*, p. 45: “Between 1700 and 1732 Istanbul continued to be the main producer of drug-related knowledge. A total of eleven drug-related texts came out of Istanbul. Bursa was more productive by a small margin because iatrochemists banned from practicing in Istanbul regrouped there between 1703 and 1729. Ömer Şifai (d. 1742) and Ali Münşi (d. 1734) account for almost all of Bursa's drug-related literature. Nevertheless, the two geographically close cities also had strong connections. Ömer Şifai practiced in Istanbul before 1703. Ali Münşi's case histories reveal that he saw patients in Istanbul between 1703 and 1729, but probably did not keep a shop there. He returned to Istanbul

Even if we are to rely solely on the 1703 edict, we should remember that it primarily targeted “Europeans” (*Frenk tã’ifesi*) who were incompetent. If one could find proof of the oppression of “physicians of new medicine” altogether, then, it would be plausible to assume that some Ottoman practitioners also eschewed from offering services in Istanbul for over two decades. However, it is too much of a stretch to claim without any proof that a particular group of physicians—Europeans and Ottomans together—deserted the capital in the year 1703 due to an imperial decision concerning public health, only to return almost twenty-six years later.

In the 1729 decree, there are important references to the quantification and limitation of physician’s shops in Istanbul and how the process would continue if any of the physicians operated outside of the system. To better understand the decree, one should take into account the state’s regulatory attempts regarding Istanbul’s markets in general. In the first half of the eighteenth century, we see constant negotiations between the palace and various guilds of Istanbul about putting a quota on the number of artisans in a specific domain of production and commerce. *Gedik* (slot) appears in state documents of this period as an attempt to prevent the proliferation of new shops (e.g., of bakers, shoemakers) without the approval of respective guilds.⁵⁰ I contend that the reason for using the same terminology for medical shops in the 1729 decree is by no means coincidental.

after the sultan and chief physician lifted the ban in 1729.” However, Küçük’s only support for this very important and strong claim regarding the “ban on new medicine” and “re-grouping of iatrochemists” is a previous article authored by him (See note 48, p. 256). See Küçük, “New Medicine,” pp. 222-42.

50 The evolution of meanings attributed to *gedik* is beyond the scope of this paper. Suffice it to say that, originally meaning a gap or breach, *gedik* gradually adopted the meaning of allotted place in a specific duty or process. In the guild context in the eighteenth-century, it also began to include the tools of a particular craft, or a place where that craft was performed. Toward the end of the century, it obtained collateral function. For more on *gedik*, see Mehmed Şidkî, *Gedikler* (Dersa’adet: Tanin Matba’ası, 1909); Engin Deniz Akarlı, “Gedik: A Bundle of Rights and Obligations for Istanbul Artisans and Traders, 1750–1840,” in *Law, Anthropology, and the Constitution of the Social: Making Persons and Things*, ed. Alain Pottage and Martha Mundy (Cambridge: Cambridge University Press, 2004), pp. 166-200; Onur Yıldırım, “Ottoman Guilds in the Early Modern Era,” *International Review of Social History*, 53, Supplement 16 (2008), pp. 73-93; Onur Yıldırım and Seven Ağır, “Gedik: What’s in a Name?,” in *Bread from the Lion’s Mouth: Artisans Struggling for a Livelihood in Ottoman Cities*, ed. Suraiya Faroqhi (New York and Oxford: Berghahn, 2015), pp. 217-36; Seven Ağır, “The Rise and Demise of Gedik Markets in Istanbul, 1750–1860,” *Economic History Review*, 71/1 (2018), pp. 133-56.

The document indicates that a “five-person waiting list” (*beş nefer mülâzım*) shall be created so that the first physician on the list could fill the *gedik* (slot) if a physician dies or leaves his position for any reason.⁵¹ That is to say, a physician’s shop was also subject to the regulations regarding all other shops in the marketplace.

All in all, the 1729 edict could be viewed as a regulatory document for the health professionals of the marketplace, rather than a lift of the so-called ban on “new medicine.”⁵² Even though Küçük regarded the 1703 decree as reflecting the fierce competition among “practical naturalists” and their opponents, he still viewed it as a comprehensive prohibition of “new medicine” for a particular period.⁵³ To be sure, he was not alone in this perspective. Some scholars have even interpreted this edict as a severe rupture in the development of Ottoman medicine. For instance, Osman Şevki Uludağ (d. 1964) lamented that it was a blow to new medicine, “which was following more of a scientific path.” It is worthwhile to note that Uludağ assumed that this new set of medical ideas could have also brought the development of modern science. According to the author, there were probably pseudo-physicians coming from all over Europe and the Middle East and claiming expertise in new methods of medicine. Even though one cannot deny the harm that the pseudo-physicians might have caused, Uludağ claimed, the edict also included the prohibition of “new medicine.” Viewing the decree as an example of throwing out the baby with the bath water, the author therefore argued that it would have been more favorable for the development of Ottoman science as a whole if only Europeans had been dismissed, but not the medical novelties they had brought.⁵⁴

Although Uludağ saw the inception of new medicine as the beginning of a new “scientific” era, which was interrupted prematurely, his almost counterfactual thinking also entertains the idea of what could have happened if there was no such

51 BOA, A.DVNS.MHM.d 135/1225. See also [Altınay], *Hicri on ikinci asırda*, pp. 106-7.

52 See also another decree, again without any reference to “new medicine,” promulgated a few months after the document in question, BOA, A.DVNS.MHM.d. 135/1584.

53 Küçük, *Science without Leisure*, pp. 167-82.

54 Osman Şevki Uludağ, *‘Osmânlı Tabâbeti Târîhi* (İstanbul: Hilal Matbaası, 1916), pp. 205-6: “*Bu fermân memleketimizde tabâbet-i cedîdeye mühim bir darbe indirmiş oldu. Frenk tabîblerinden birçokları tabâbeti menfû’atlerine vesile ‘add ederek birçok canlar yakmış olabilirler, fakat fermân yalnız memleketden frenk tabîbleri koğmakla kalmıyor, tabâbet-i cedîdenin ya’nî, daha fennî esâslar dâ’iresinde yürüyen yeni ‘ilmiñ de memleketden tardı u iclâsını emr ediyordu. Yalnız frenk tabîbleriniñ tardı emr idilse idi ve kendi tabîblerimize tabâbet-i cedîdeyi hakîkiyle tedkîke imkân virilmiş idi herhâlde ‘ilm nâmına daha eyi bir iş yapılmış olurdu.*”

“ban.” However, it would be an exaggeration to regard what Ibn Sellūm introduced in the field of medicine as the complete elimination of the old framework, namely Galenic medicine. The seventeenth-century physician and many Ottoman physicians after him were, in fact, interested in bringing together humoral understanding with new remedies offered by the (al)chemical medicine.

Conclusion

In this article, I have shown that an oft-cited *mühimme* document copied in Ahmet Refik Altınay’s compilation *Istanbul Life* was erroneously dated, which puts into question how it has been used in the previous literature and whether the alleged ban on new medicine mentioned in the document was even enacted amid the 1703 rebellion. Previous works have used this document as evidence of the reactionary Ottoman approach (by the palace or the society) against novelties in medicine and knowledge production in general, even though it was allegedly promulgated by—according to some—a “reformist” and “visionary” sultan.

How the Ottoman state dealt with malpractice cases had revolved first and foremost around the question of the physician’s competence, which was almost always resolved via an examination before the chief physician. Less often, it also brought about a city-wide survey. In these instances, physicians and surgeons who practiced in shops were at the center of Ottoman authorities’ attention, since they were easier to track down than itinerant physicians and their numbers could be regulated by quotas. Quantitative control over health professionals was achieved via the *gedik* (slot) system, which became almost a standard practice for all the shops in the marketplace in the 1720s, around the same time when Ottoman officials began referring to a waiting list with fixed numbers of practitioners in official documents regarding medical shops. Although the number of physicians was regulated, as far as available evidence shows, it is difficult to detect imperial imposition of a particular medical doctrine or prevention of others as a state policy either in the capital or across the empire. Hence, the negative attitude in the 1703 decree may be interpreted as a short-term alarm phase in the face of unfamiliar treatments and novel drugs.

Even though I focused on the socioeconomic side of the issue along with the state’s public health concerns, I wish to make one last point about the policies of Sultan Muṣṭafâ II which might also lead to new questions for future works. Recent research on Muṣṭafâ II’s reign has shown that the sultan and his influential chief judge (*şeyhülislām*) were occupied with social disciplining by way of investigating

imams and preachers of the empire.⁵⁵ The main emphasis of all the related imperial orders of the time was to distinguish the competent from the incompetent, quite similar to the purpose of the investigations we have discussed here concerning medical professionals of the capital. Hence, it might be useful to think of these comprehensive surveys in relation to the spirit of the times.

To sum up, we need compelling evidence to accept that “new medicine,” or a particular medical framework, was banned or suppressed systematically in the eighteenth century. However, if I may revisit the question in the title of this article—who “banned” new medicine?— the answer is none of the sultans banned new medicine. On the other hand, it was Sultan Muṣṭafâ II, not Aḥmed III, who promulgated the 1703 order that regarded particular novel medical practices as suspicious and required a city-wide survey of medical professionals of Istanbul to assess their proficiencies.



Working on perplexing sources of the early Ottoman Empire, historian Rudi Lindner once concluded one of his elaborate analyses with the following lines:

I have examined the sources and the situation with a view to teasing out a sensible picture hiding behind the later layers of paint. I believe that in so doing, not only do we give the sources the respect (if not full agreement) that they deserve, but we recover some insights into the Ottoman past.⁵⁶

Although not as enigmatic as the sources of the Ottoman foundational period, particular documents such as the 1703 edict discussed in this article shall be exposed to historiographical re-evaluation, since they shape today’s discussions on Ottoman approaches to novelties, science, and modernity and even seem to have sealed some conclusions for good. At least in this particular case, some level of *unlearning* is needed in scholarship to prevent the circulation of incorrect information and biased interpretations of key sources.⁵⁷

55 See Abou-El-Haj, *The 1703 Rebellion*; Nir Shafir, “Moral Revolutions: The Politics of Piety in the Ottoman Empire Reimagined,” *Comparative Studies in Society and History*, 61/3 (2019): 595–623; Hüseyin Göcen, “An Attempt at Confessionalization and Social Disciplining in the Reign of Mustafa II (1695-1703)” (master’s thesis), Boğaziçi University, 2020.

56 Rudi Paul Lindner, *Explorations in Ottoman Prehistory* (Ann Arbor: University of Michigan Press, 2007), p. 80.

57 A great example is how some Ottoman sultans were credited with banning the printing

Who “Banned” New Medicine in the Ottoman Empire?

Abstract ■ Ottoman Sultan Muştafâ II issued an imperial order on the use of new medical drugs and their probable harmful effects in 1703, which dictated an investigation of medical practitioners and the closure of the shops of incompetent physicians. Many historians have consulted the transcription of the document (rather than the original), which has been erroneously dated to the reign of Muştafâ II’s successor, Ahmed III. This fallacy inevitably led to misguided evaluations of the context in which it was actually promulgated. Furthermore, some scholars interpreted the suspicious tone of the decree regarding novel drugs as a total ban on “new medicine” (*ıbb-ı cedîd*) in the Ottoman Empire. In this article, I trace the dating error in the secondary literature and re-evaluate previous archival inferences. Arguing that there is no extant evidence supporting systematic oppression of the adherents of a particular medical framework, I also place the physician’s shop in its eighteenth-century socio-economic context in an attempt to demonstrate the twofold role of the physician in the marketplace as both a health professional and a shopkeeper/artisan.

Keywords: Ottoman medicine, new medicine, chemical medicine, guilds, gedik, Ahmet Refik Altınay, Ahmed III.

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press without any convincing evidence. Even though this “information” is still circulating in the scholarship, see Kathryn Schwartz’s thorough investigation of this claim. See Kathryn A. Schwartz, “Did Ottoman Sultans Ban Print?,” *Book History*, 20/1 (2017), pp. 1-39.

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