The Production and Consumption of Medical Knowledge in Seventeenth-Century Russia: The Apothecary Chancery.

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I, Clare Louise Griffin, confirm that the work presented in this thesis is my own. Where information has been derived from other sources, I confirm that this has been indicated in the thesis.
Abstract.

This thesis explores the importance of Western knowledge at the Russian court from the 1620s to the 1700s. After the disorder of the Time of Troubles the Russian court, under pressure from ambitious neighbours, sought to use elements of Western European learning and skill to further reconstruction. Reconstruction developed into an expansion of state powers over Russian life, facilitated by the growing system of courtly departments that were partly staffed by foreign experts. Consequently, this thesis engages with debates concerning how Russians related to Westerners and Western ideas. Here these debates will be reassessed through an examination of the reports and other texts Western experts produced for the court.

Foreign influence was especially significant in shaping medicine: the court medical department – the Apothecary Chancery – was staffed with foreign medical practitioners overseen by Russian officials. The Apothecary Chancery medical practitioners produced reports on a range of subjects linked to medicine: medicaments, patient examinations and autopsies. Reports were commonly linked to the wider concerns of the court, such as autopsies on politically or diplomatically important people. The Apothecary Chancery also produced texts aimed at affecting the lives of Muscovites outside the court, such as reports on witchcraft and the sale of medicines, as well as medical recipe books aimed at educating Russians.

This dissertation examines the production and consumption of these reports and medical recipe books by the Russian court. It studies the intellectual context and sources that guided the foreign medical practitioners in fashioning their reports. It also scrutinises the purposes for which the Russian court commissioned such texts, and the modifications of the medical practitioners’ views to suit their purposes. This thesis shows Russian interaction with Western ideas to have been selective and critical.
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Introduction

During the seventeenth century, foreign medical practitioners working in the court medical department, the Apothecary Chancery, provided medical knowledge to the Russian court on the orders of Muscovite administrators. This knowledge, taken from literate Western European medicine, was produced in the form of written reports addressing specific issues of concern and was consumed by various Russian officials, including the tsar and his counsellors. Later, the department also composed texts aimed at other groups within Russian society, but always according to the aims of the court. Thus Muscovites actively sought Western medical expertise to aid in solving issues then facing the Russian court. This thesis is concerned with the implications of the Apothecary Chancery’s knowledge production for the study of the Muscovite reception of Western knowledge.

The use of Western medical expertise in seventeenth-century Russia can ultimately be traced to developments of the 1480s, when the first recorded court doctors arrived in Russia from Western Europe.1 The medical world into which they arrived was markedly different to that which they had left behind. The majority of medical practitioners in Russia were semi-professional native folk healers who never kept records and about whom we know little. Such illiterate healers were also present elsewhere in Europe, but they existed alongside university-educated physicians and guild-trained surgeons and apothecaries, of which there were none in Russia. Medical texts were also in limited supply in Russia before the seventeenth century, mainly taking the shape of short, practical texts interpolated into other works.2 The sixteenth century saw a growth in the number of such works, as well as the first full-length medical texts, focusing on the medical uses of herbs and plants.3 These works were

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1 See Franz Dörbeck, ‘Origin of Medicine in Russia’, Medical Life, 30 (1923), 223-34 (p. 227); Inna Liubimenko, ‘Vrachebnoe i lekarstvennoe delo v Moskovskom gosudarstve’, Russkii istoricheskii zhurnal, 3-4 (1917), 1-36 (p. 5).
3 The earliest full-length herbal translated into Russian was the 1534 translation Blagoprobokladnyi vertograd. See David Miller, ‘The Lübeckers Bartholomaeus Ghotan and Nicolaus Bülow in Novgorod and Moscow and the Problem of Early Western Influences on Russian Culture’, Viator. Medieval and Renaissance Studies, 9 (1978), 395-412 (p. 404); B. N. Morozov, ‘Travnik iz Postel’noi kazny Ivana Groznogo? Khar’kovskaia rukopis’ 1534g. – novyi pamiatnik knizhnoi masterskoi mitropolita
translations of Western works, commonly imported through Poland via Smolensk.\(^4\) Even before the establishment of the Apothecary Chancery learned, literate, professionalised medicine was in limited supply in Russia, and that which did exist came from Western Europe.

From the late fifteenth century on, Western medical practitioners became increasingly important to the Russian court, resulting in the establishment of a court department to administer them sometime in the 1560s or 1570s.\(^5\) This department, like many others, continued to work for at least part of the Time of Troubles, although it may have been closed in some years.\(^6\) The early history of the department is murky because existing Apothecary Chancery survive only from the late 1620s, hence the start period of this thesis. The Apothecary Chancery was one of the longest surviving of all the seventeenth-century Russian chanceries, remaining sufficiently important to the Russian court for it to continue to exist for over a century.\(^7\) Records for the Apothecary Chancery become patchy for the very late seventeenth century and very early eighteenth century, before the Apothecary Chancery was replaced by the Medical Chancellery in 1714. In the years leading up to 1714 the Apothecary Chancery had already lost much of its powers, as other medical institutions like the army’s and navy’s medical branches,

\(^4\) The relative importance of native medical text production as opposed to translation of existing Western texts has long been a serious historiographical issue. Certainly, a significant proportion of medical texts available in Muscovy were translations of Western works. For surveys of the historiography, see Gruzdev, *Travniki*, 5-17; A. B. Ippolitova, *Ruskie rukopisnye travniki XVII-XVIII vekov. Issledovanie fol’klora i etnobotaniki* (Moscow: Indrik, 2008), pp. 23-49.


and private pharmacies were set up. Thus this thesis finishes in the 1700s, when the Apothecary Chancery was still the dominant official institution in Russian medicine.

During its existence, the Apothecary Chancery was a part of the chancery system, the Russian court administrative organisation, which played a significant role in the seventeenth-century Russian state. Chanceries were departments responsible for different aspects of administration and reporting back to the tsar and his counsellors on significant issues. This system was developed as a way to manage the expanding Muscovite territory. An important feature of the chancery system was the proliferation of administrative documents it created, as literacy facilitated effective governance; these documents demonstrate the inter-connectedness of the chancery system, as departments regularly communicated with each other, and with the tsar and his advisers, through reports and similar documents. Such changes to the administration of Muscovy were not without their problems: frustrations over bureaucracy mediating between the tsar and the people, particularly in the matter of petitions, could even result in a revolt. Despite such setbacks, the chancery system continued to exist and eventually became an essential part of the Muscovite polity.

The reasons for establishing such an extensive bureaucracy lie in Russia’s experiences in the seventeenth century. During this period Russia faced many challenges: reconstructing the country after the Time of Troubles, establishing the legitimacy of a new dynasty, administering an increasingly large territory, and dealing with ambitious Western neighbours who had advanced, modernised armies. Having long been culturally isolationist, divided from much of Europe by the barriers of language and religion, Russia also increased her contacts with Western Europe in the seventeenth century. These contacts took various shapes: intensive diplomatic relations, military clashes, trade, and the employment of Western experts, among them the physicians and other medical practitioners who worked in the Apothecary Chancery. In order to rule such a large state effectively in a period of such challenges, an extensive

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bureaucracy, like the Muscovite chancery system of which the Apothecary Chancery was a part, was essential.

The work of the Apothecary Chancery is preserved in its archive. Many of the Apothecary Chancery records used in this thesis are published in the four-volume collection edited by N. E. Mamonov and published in the 1880s following the rediscovery of the archive in the 1840s. Mamonov’s volume is invaluable to any study of the Apothecary Chancery, although it does have some lacunae. In particular, it includes few of the German- and Latin-language documents, and no documents produced after 1682 (the latest existing archival document dates from 1715). Concerns have also been raised over the accuracy of Mamonov’s transcriptions. Where appropriate, transcription errors have been noted below, but it is the opinion of this author that Mamonov’s errors are minor and do not significantly affect the meaning of the documents.

A second collection of Russian documents on the history of medicine was published by N. Ia. Novombergskii. This work was produced after Mamonov’s, and designed as a complement to it: Novombergskii does include some Apothecary Chancery documents, but this is not the focus of his publication. Instead, individual volumes are devoted to witchcraft and veterinary medicine, and much space is devoted to plague measures. Other documents relating to the Apothecary Chancery can be found in standard document publications, such as Akty istoricheskie, and collections of diplomatic correspondence.

Despite these several efforts to publish documents relating to Russian medical history, a large number of Apothecary Chancery documents remain unpublished. The majority of these files, along with those texts published by Mamonov, are kept in the Russian State Archive of Ancient Documents [Rossiiskii Gosudarstvennyi Arkhiv Drevnikh Aktov, RGADA]. A further 80 unpublished Apothecary Chancery

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11 N. E. Mamonov, Materialy dlia istorii meditsiny v Rossii, 4 vols (St Petersburg: M. M. Stasiulevich, 1881).
14 Akty Istoricheskie, sobrannye iz izdannye Arkheograficheskoiu komissieiu, 5 vols (St Petersburg: Tipografiia Ekspeditsii zagotovleniiia Gosudarstvennykh bumag, 1841-42); Iu. V. Tolstoi, Pervye sorok let snoshenii mezhdu Rossieiu i Angliieiu, 1553-1593 [Hereafter Snosheni] (St Petersburg: Tipografiia A. Transhelia, 1875).
15 Where a published version exists, I cite both the manuscript and the publication.
documents are held by the Russian National Library in St Petersburg. This thesis also relies upon medical books linked to the Apothecary Chancery and its staff. Of those texts, only Afanasii of Kholmogory’s book has been published, in two separate versions. Other medical books linked to the Apothecary Chancery have been accessed in manuscripts held by the Russian State Library and State Historical Museum in Moscow, and the Russian National Library and Library of the Academy of Sciences in St Petersburg. This thesis is thus based both on published collections of documents and on the RGADA files, as well as published and unpublished copies of Afanasii of Kholmogory’s recipe book, and unpublished manuscripts of the other medical books linked to the Apothecary Chancery.

A number of works have been devoted to the Apothecary Chancery since the rediscovery of its archive. The medical staff of the Apothecary Chancery has received particular attention from historians. This historiographical strand has focused on the value of foreign medical practitioners to Muscovy, a debate which was long polarised between historians viewing them as bearers of civilisation and historians who saw them as immoral adventurers. Recent works by Maria Unkovskaya and Sabine Dumschat investigating aspects of these men's life and work in Russia have modified this debate, demonstrating that the motivations, qualifications, and activities of foreign medical practitioners in seventeenth-century Muscovy were varied, and that one explanation cannot account for all their experiences. Attention has also been devoted to the institutional development of the Apothecary Chancery, specifically its evolving remit of duties. The central issue of these works is whether the Apothecary Chancery was solely concerned with the court, or whether it had a wider remit; most works see its scope as limited.

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16 Rossiiskaia natsional ’naia biblioteka [RNB], f. 532 (Osnovnoe sobr. russkikh aktov i granot).
18 The Apothecary Chancery also, unsurprisingly, recieves significant attention in general works on the history of medicine in Russia. See for example M. B. Mirskii, Meditsina Rossii X-XX vekov. Ocherki istorii (Moscow: ROSSPEN, 2005), pp. 66-106.
This thesis builds on these previous studies of medical practitioners and institutional developments by investigating the role of the Apothecary Chancery in providing expert medical knowledge to the court. Medical knowledge is here defined as a set of ideas about the human body and its relationship to the surrounding world that are accepted as true both by a group identifying themselves as medical experts and by their patrons and patients. This definition draws upon social constructionist approaches to the history of medicine, particularly the work of Ludmilla Jordanova.21 Broadly defined, the social constructionist approach to medical knowledge focuses on how social actors and structures shaped that knowledge. Jordanova states that ‘knowledge’ involves both including and excluding certain ideas, a process which can be influenced by both experts and laypersons, especially patrons.22 The latter point, the ability of patrons to influence knowledge and knowledge production, is of particular importance here, as it highlights the importance of the role Russians played in the Apothecary Chancery’s production of knowledge.

Study of the Apothecary Chancery’s knowledge production is important in the context of the on-going debate about the reception of foreign knowledge in pre-modern Russia. The debate was initiated by the famous essay of Georges Florovsky about ‘intellectual silence’. In 1962 Florovsky proposed a grand interpretation of Old Russian (pre-Petrine) culture in which Russia had been ‘dazzled’ by Byzantine achievements, accepting only Byzantium’s accomplishments and not her intellectual curiosity, resulting in what Florovsky dubbed the ‘intellectual silence’ of Old Russia. In the seventeenth century, according to Florovsky, this lack of intellectual engagement led to an inability to formulate solutions to Russia’s crises. Russia’s intellectual silence also affected the reception of Western ideas. Different groups of Russian society either uncritically accepted Western culture or totally rejected it, missing an opportunity to adapt that culture to Russia.23

Though Florovsky’s views on knowledge in Russia proved to be very influential, they have been questioned in modern scholarship. William Veder has taken a sceptical view of ‘intellectual silence’, specifically criticising Florovsky and his supporter Francis Thompson for applying a Western criterion for success – the existence of high scholasticism – to Russia. Veder examines various medieval East Slavic religious miscellanies, concluding that the apparent chaotic lack of organisation could be interpreted as a deliberate method of exposing the reader to texts without the composer’s guidance. Veder thus shows how borrowing and the production of composite texts was in itself a form of intellectual activity.

More recently, Robert Romanchuk has also challenged Florovsky’s approach to Russian intellectual culture through an examination of the Kirillo-Belozerskii monastic library in the fourteenth and fifteenth centuries. Like Veder, Romanchuk questions Thompson’s ‘great man’ approach to the history of ideas typified by his rhetorical question: where is the Russian Peter Abelard? For Thomson, the lack of a Russian figure similar to the twelfth-century French scholastic philosopher and theologian symbolises the absence of intellectual culture in Russia. Romanchuk offers an alternative approach to Russian intellectualism by treating the Kirillo-Belozerskii monastery as an intellectual community. Romanchuk demonstrates that the Kirillo-Belozerskii monastic community interpreted and glossed texts to facilitate teaching,

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thereby gradually introducing novitiates to increasingly advanced theological ideas.\footnote{Robert Romanchuk, \textit{Byzantine Hermeneutics and Pedagogy in the Russian North. Monks and Masters at the Kirillo-Belozerskii Monastery, 1397-1501} (Toronto, Buffalo, NY and London: University of Toronto Press, 2007), pp. 3-9.}

Romanchuk’s work thus highlights the importance of the community, rather than just the individual, as an agent engaging in intellectual activity.

Romanchuk and Veder’s criticisms of Florovsky and Thompson focus on attitudes to writings from the point of view of Orthodox culture. In the seventeenth century the problem of knowledge in Russia also had another important aspect, Western influence and Russia’s reaction to it. Russia’s engagement with the West started long before the seventeenth century. Ivan III (1462-1505) took a greater interest in Europe than his predecessors, entering into allegiances, inviting some foreign experts to court, and even marrying a Byzantine princess, who came to Moscow from Rome. Contacts with the West were developed further under his son, Vasiliii III (1505-1533) and especially under his grandson, Ivan IV (1533-1584). The late-sixteenth- early seventeenth-century crisis known as the Time of Troubles intensified Russia’s exposure to the West due to the involvement of Western political actors and military forces in Russian affairs. Tsars of the Romanov dynasty, established in 1613, also relied upon foreign advisers and experts, who were utilised in several fields, such as mining, the military, and medicine.

Views of Western knowledge in seventeenth century Russia have also been reassessed since Florovsky’s article. In stark contrast to Florovsky’s view of late Muscovy as stagnant and incapable of solving its problems, Lindsey Hughes has propounded a view of seventeenth-century Muscovy as an ‘age of transition’, when the fundamentally isolationist, medieval culture of Muscovy met the Western European.\footnote{See for example Lindsey Hughes, ‘Western European Graphic Material as a Source for Moscow Baroque Architecture’, \textit{The Slavonic and East European Review}, 55 (1977), 433-43 (pp. 433-34).}

Such an attitude is also present in the work of other scholars. Nikolaos Chrissidis has studied Western astronomy in the Slavo-Greco-Latin Academy, seeing the astrological view of the cosmos taught there as an alternative to the theological view otherwise prevalent in Muscovy. Like Romanchuk, Chrissidis draws attention to education and pedagogy as vital areas of study in understanding attitudes to knowledge in Muscovy.\footnote{Nikolaos A. Chrissidis, ‘A Jesuit Aristotle in Seventeenth-Century Russia: Cosmology and the Planetary System in the Slavo-Greco-Latin Academy’, in \textit{Modernizing Muscovy}, ed. Jarmo Kotilaine and Marshall Poe, 391–416.}

Thompson’s focus on high philosophy in assessing intellectual culture has been undermined in works by Lindsey Hughes and Claudia Jensen. Hughes has written on
the textbook of art production proposed by the great Russian icon painter Simeon Ushakov. Similarly, Claudia Jensen has recently drawn attention to the Kievan Choral master Nikolai Diletskii, who produced a textbook of music theory to help musicians at the Russian court understand and compose music. By focusing on practical and artisanal types of knowledge like art and music, Hughes and Jensen have revealed a significantly different picture to that constructed from the perspective of ‘high’ intellectual texts: although there was an absence of a strong native tradition of philosophy and theology, Russians were deeply engaged with practical, artisanal knowledge.

Hughes’ and Jensen’s emphasis on practical knowledge acquisition as intellectual endeavour works well with the views of those historians of science and medicine who stress the significance of artisanal knowledge. Pamela Smith has examined the role of artisans in the Scientific Revolution, concluding that they were briefly able to assert themselves as experts in both the materials with which they worked and nature more generally, developing an ‘artisanal epistemology’. The Scientific Revolution was a collection of early modern trends in investigating nature which prioritised prediction and control of nature over understanding, direct experience of nature over book learning, and favored the reconfiguration of intellectual boundaries, with medieval natural philosophy becoming much more closely linked to mathematical and practical approaches. Due to these shifts in how the investigation of nature was to be conducted, artisans could be seen as acquiring knowledge through manual engagement with their medium. ‘Artisans’ should here be conceived rather widely: according to Smith, medical practitioners such as Paracelsus, the foremost proponent of chemical medicine, were also involved in promoting such an epistemology. These medical practitioners were to gain certain knowledge of disease through direct, bodily

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engagement with nature, here the patient’s body, rather than primarily relying upon authoritative texts of medical theory; for Paracelsus, theory should come from nature. Applicable to the Russian situation is Smith’s insistence on artisanal production as a form of intellectual endeavour. Here we can see a parallel between Smith’s ideas and Hughes’ and Jensen’s interpretations of seventeenth-century texts on art and music.

In recent years attention has also been devoted to the circulation of knowledge. Susan Gross Solomon notes that movement of ideas from Western Europe to Russia has been studied primarily from the perspective of the centre-periphery interaction, an established paradigm in the history of science. Much less work has been directed towards the circulation of ideas within Russia. Solomon also discusses the divergent tendencies of the Anglo-Saxon and French schools: English and American historians have focused on the localism of scientific ideas; French historians have concentrated on how the transmission of knowledge has shaped that knowledge. The state has also been a focus of studies on the circulation of knowledge; work on Russia has focused more on how the Russian state has constrained science rather than how it has aided it.³³

Although Solomon’s work focuses on the transmission of ideas to and circulation of knowledge within Russia from the eighteenth century on, her conclusions are also relevant to the seventeenth century. As medical ideas entered Russia from Western Europe, they were incorporated into texts that were circulated amongst specific sections of the Muscovite literate elite. Those texts provide an opportunity to investigate how transmission and, most importantly, translation, shaped medical ideas in Muscovy. All the Apothecary Chancery’s work was state-sanctioned and state-directed, and so a closer analysis of the specific relationship between politics and statecraft and the production of knowledge is essential. Solomon’s analysis points towards a need for a study of intra-Russian circulation of ideas alongside Russia-West relations, and a more balanced view of state-science relations.

In the early modern period science and medicine were more likely to be directed by an individual patron than by a bureaucratic state. Essays in collections edited by Bruce Moran and Vivian Nutton, and R. J. W. Evan’s monograph on Rudolf II have all emphasised the central role courts and courtly patrons played in shaping knowledge production.³⁴ Involved patrons like Rudolf II, and also Maurice of Hesse-Kassel (1572-

1632), whose activities are discussed by Moran, gave their expert employees specific tasks, including conducting particular experiments. The work of Nutton and Moran tackles the problem of intervention in knowledge production by influential non-experts, reaching a similar conclusion to that of Solomon: the production of knowledge was shaped by influential laypersons as well as by experts, a process here approached through the Apothecary Chancery documents.

This thesis examines both the context and the content of medical knowledge production at the Russian court through addressing three issues. Firstly, the structure of production is examined, from the institutional development of the Apothecary Chancery and its duties in the seventeenth century, to the Russian administrators and foreign medical experts. Secondly, the bureaucratic procedures which defined the production of knowledge and their impact on that knowledge are also addressed. Thirdly, I look at how the Apothecary Chancery expertise was used both at the court and in some other sections of Muscovite society.

Chapter One considers what Apothecary Chancery document production can reveal about that department’s place within the chancery system. All chanceries produced reports, which were typically composed by Russian administrators; only the Apothecary Chancery relied upon foreigners and foreign, professionalised medical expertise to produce those reports. Thanks to the extensive use of foreigners and foreign knowledge in producing Apothecary Chancery reports, that department became a vital site for the entrance of Western knowledge into Russia.

Chapter Two looks at the Apothecary Chancery boyar directors and their role in that department. It will demonstrate that alongside considerations of power politics and security, administrative experience was a significant selection criterion for the Apothecary Chancery director. The emphasis on such experience suggests that the boyar directors were expected to take an active role in the administration of the department, which included ordering and disseminating reports. The director linked the Apothecary Chancery to the rest of the chancery system and to the court, a connection that was vital to how reports were disseminated throughout the court and chancery system. This chapter thus establishes the boyar director of the Apothecary Chancery as a significant figure in report production and dissemination.

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The focus on Apothecary Chancery personnel continues in Chapter Three, which looks at the experts who generated medical knowledge for the Russian court. In particular, attention is devoted to the recruitment of medical experts. It will look at whom and on the basis of what criteria was chosen as an Apothecary Chancery medical expert to help produce knowledge at the Russian court. Significantly, the Apothecary Chancery appears to have recruited practitioners from rival schools of medical thought; as the department insisted on unanimity in their reports, the existence of such conflicts may have militated against the use of theory in reports to avoid disputes. Recruitment fundamentally shaped the community of medical experts who produced reports, possibly contributing to the lack of theory in those documents.

Chapter Four deals with the Apothecary Chancery’s report production process. The contents of reports composed by foreign medical practitioners had to be rendered into Russian, and in a form compliant with the strict standards of chancery documentation; this meant a significant role for the scribes in shaping the final form of Apothecary Chancery reports. By studying this process we can reassess Russia’s alleged ‘backwardness’ in the process of borrowing from the West; ‘backwardness’ has often meant passivity, but here attention is drawn to the active manner in which Russians engaged with Western knowledge.

Medical books and their intended audiences produced by the Apothecary Chancery are the subjects of Chapter Five. Devoting attention to the intended audiences of this text addresses the issue of dissemination of Western knowledge. The chapter shows how the Apothecary Chancery facilitated the distribution of Western knowledge among different groups of Muscovite society beyond the royal court.

While the previous chapters examine different aspects of medical production in the form of various texts aimed at the literate Russian elite, Chapter Six deals the impact of Western knowledge on the illiterate by looking at the regulation of harmful substances used in medicines or in witchcraft. Thanks to increasing central interference in trials, which lead to Apothecary Chancery involvement, ideas generated by the Apothecary Chancery were disseminated more widely than medical works, as many defendants were illiterate. By examining these trials, it is possible to reconsider the extent of the dissemination of Western expertise; the illiterate majority of Muscovites did have some, limited contact with Western knowledge.
Chapter 1: The Place of the Apothecary Chancery within the Muscovite Administrative System

The outstanding feature of the organisation of Western medicine in seventeenth-century Russia was its subordination to the Muscovite administrative structure known as the chancery system [prikanzaia sistema]. Eve Levin, Maria Unkovskaya and a number of historians of the chancery system think that the Apothecary Chancery was a court institution.¹ This view is particularly dependent upon the patient treatment of the Apothecary Chancery: most patients were members of court; therefore the Apothecary Chancery was a court institution. Other scholars of the Apothecary Chancery have seen it as having a wider purview: M. B. Mirskii believed the Apothecary Chancery had some responsibility for the health of Muscovites outside of court circles and the army; M. K. Sokolovskii described the department as acting in several capacities, including as an ‘Academy of Sciences’, referring to both its library and the production of reports.² Such approaches are in line with the views of K. A. Nevolin, who suggested that the Apothecary Chancery was defined by its function, medicine, not by its relationship to the court.³ This split in the historiography raises the question of what place the Apothecary Chancery did occupy in the late Muscovite chancery system.

One feature of the Apothecary Chancery that displays a notable difference from other chanceries is report production. Reports were a common type of chancery document, acting to transmit information between branches of the Muscovite administration; usually these documents were composed in Russian by a Russian official, and concerned domestic issues. However, in the Apothecary Chancery reports were also composed by foreigners, and moreover concerned disease, medicines and medical practice, topics which necessitated the use of foreign medical knowledge. It is this reliance upon foreigners and foreign knowledge that constituted the Apothecary Chancery’s special role within the chancery system. Here the Apothecary Chancery’s production of reports will be considered in the light of wider chancery document

production, in order to establish this department’s importance for bringing foreign medical ideas into Russia.

_The Apothecary Chancery and the Structure of the Chancery System_

By the seventeenth century, the Muscovite administrative structure known as the chancery system had developed into a complex network of departments, each having their own individual features, but also fundamentally bound together by certain general procedures and structures. Long-lived chanceries typically expanded into areas related to their initial duties, becoming both larger and more complex. Such was the case with the Apothecary Chancery.

The earliest Apothecary Chancery documents provide a picture of that institution at the beginning of the seventeenth century. Based in a building in the Moscow Kremlin, the Apothecary Chancery was administered by Russian bureaucrats, who oversaw the work of Western European physicians, surgeons and apothecaries, as they examined (primarily courtly) patients, prepared medicines, and provided medical supplies and field surgeons to the army. In addition, the Apothecary Chancery liaised with other central departments, and with other parts of the Muscovite administrative system, from provincial governors to the tsar and his counsellors.

The earliest change to this institution’s way of working affected how it supplied the army. In 1654 it began to train medical practitioners for the first time: field surgeons, to supply medical care wherever the army was; and apothecaries, to prepare the medicines the field surgeons, and the department’s other patients would need. It should be noted that 1654 saw the start of the Russo-Polish war (1654-67), as well as an outbreak of plague in many parts of central Russia, factors that may have influenced the decision to expand the Apothecary Chancery.

Some attempts were also made to extend the purview of the Apothecary Chancery outside of Moscow. In 1666/7 Doctors Pontanus and van der Hulst were sent to Vologda, a key trade centre, in order to establish an apothecary shop there, an attempt which failed, apparently due to the incompetence of their translator. The Apothecary Chancery was more successful in setting up centres in Novgorod and Kiev, as well as a

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5 Unkovskaya, ‘Foreign Mysteries’, p. 33; Mamonov, _Materialy_, iii, pp. 899-901.
warehouse in Rzhev. Little is known about the activities of these regional centres, but their location on major trade routes and near borders over which Russia fought in the seventeenth century would seem to indicate an intended role in the acquisition and storage of medicines and their distribution to the army.

In 1673 the Apothecary Chancery was split into two branches. The newly created New Pharmacy [Novaia apteka] dealt with ordinary Muscovites, providing them with officially approved medicine. The rest of the Apothecary Chancery, now called the Old Pharmacy [Staraiia apteka] or Upper Pharmacy [Verkhniaia apteka], dealt with the needs of the court, treating high-ranking patients and providing advice. Such an occurrence was entirely normal for chancery development: the larger a chancery became and the more numerous its duties, the more complex its internal structure became. In the largest chanceries, separate desks [pl. stoly, stol sing. or povyt’e sing, povyti’ia pl.] were assigned a specific area of competence. Although the Apothecary Chancery’s expansion did not use the same nomenclature, it should nevertheless be seen as the same process. The two new Pharmacies had different purviews, but they remained linked, with staff members being moved between them according to need, as in January 1690, when Doctor Andrei Kellerman, who worked in the Old Pharmacy, was ordered to report to the New Pharmacy to inspect the production of medicines there (Rosenberg was sent in his place). The Apothecary Chancery continued to operate in this new, bi-cameral, iteration until the end of the seventeenth century. Across the seventeenth century the Apothecary Chancery continuously expanded, most notably further extending its services beyond the court.

Central to how the Apothecary Chancery, and indeed the rest of the chancery system worked was the hierarchy of servitors who performed each department’s duties. Within each chancery there was a chain of command, at the head of which was the chancery director [sud’ia sng., sud’i pl], a role most commonly filled in the seventeenth century by a boyar. As head of the department, the director was responsible for seeing that the department’s duties were completed, as well as liaising with other parts of the Muscovite administration.

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6 Levin, ‘Administration’, p. 357; Documents of the 10th Nov and 1st Dec 1654 concerning the storage of Apothecary Chancery medicines arrived from Novgorod or the German lands in Rzhev, RGADA f. 143, op. 2, ed. khr. 129.
8 RGADA f. 143, op. 3, ed. khr. 314.
9 On the takeover of the chancery system by the boyars see Chapter Two, pp. 48-51.
The seventeenth-century chancery system was composed of around 60 chanceries. Not all these departments were permanent fixtures, with some only lasting a matter of years, and yet the number of departments remained relatively constant across the century. Departments were created to deal with all significant areas of Muscovite life: finances and tax-collection; military affairs; administration of regions, especially those recently acquired; court life; and Church affairs. Where chanceries shared similar duties, close cooperation was necessary. For example, there were different chanceries responsible for general military and service activities, new formation regiments, and foreign mercenaries, all of whom had to cooperate to allow the Muscovite armed forces to function effectively. Alongside these central chanceries, Muscovy was also administered through the use of provincial governors, who communicated with the central chanceries on a number of issues. Conducting correspondence with these other branches of the Muscovite governmental system was a vital part of the directors’ duties.

As the chancery system became more important to the administration of the realm, the heads of these departments, whether boyars or secretaries, had to report back to the tsar, thus becoming involved in this system of consultation. Chancery directors, especially those of the most important financial and military chanceries, as well as the Apothecary Chancery, thus acted as advisers to the tsar. Consultation between the tsar and leading boyars was the traditional manner of political decision-making in Muscovy, and one to which necessary importance was attached. This system of consultation is usually referred to as the Boyar Duma [boyarskaia duma], a term coined by the hugely influential Russian historian N. M. Karamzin, who saw it as a formal institution. Karamzin was rather overstepping his sources in creating the term Boyar Duma, as no contemporary document mentions it. In fact, the existence of a number of different phrases relating to the boyars and Muscovite political organization has been a key factor in fuelling the ongoing debate over the exact nature of Muscovite political consultation. Given the lack of evidence for formal, legally defined institutions, political consultation in Muscovy seems to have been organised according to tradition,

with the most important members of the Russian elite having a key role in advising the tsar.

Directors were expected to take their own decisions in minor matters, but the chancery system was also intended to relay important cases to the tsar and his counsellors, who would then take a decision. Equally, the tsar and his advisers would entrust certain tasks and duties to the chanceries by sending instructions to the director. The chancery director thus was a vital link in how each department related to others, and to the top-level of decision-making in Muscovy.

The chancery director was aided in his work within the department by a committee of junior directors [sud’i pl., sud’ia sg.], usually career administrators known as secretaries [d’iaki pl., d’iak sng], who would advise the head director how to proceed. Under this committee of directors worked a number of other secretaries and under-secretaries [pod’iachie pl., pod’iachii sng], professional administrators and scribes whose job it was to perform the basic tasks of the chancery, to record its business in the record-books, to draft correspondence with other departments, and to report on significant matters to the directors.\(^\text{13}\) Still lower on the hierarchy was the auxiliary staff: stokers, watchmen and similar who kept the buildings warm and secure.

In addition to the directors, secretaries, and auxiliary staff employed by every chancery, some departments also had specialist staff: for example, the Ambassadorial Chancery [Posol’skii prikaz] heavily relied upon its corps of translators and interpreters to conduct its business. This department was responsible for maintaining contacts with foreign governments, and also dealing with the foreigners resident in Moscow, both of which duties always required translating staff.\(^\text{14}\) According to D. V. Liseitsev, during the Time of Troubles the Ambassadorial Chancery in fact had more translating staff, both translators and interpreters, than it had under-secretaries: there were between 16 and 18 under-secretaries employed by the Ambassadorial Chancery in the period 1598 to 1619, but 31 translating staff in 1604, rising to 37 by 1622.\(^\text{15}\) The nationalities of these translators are often hard to determine, as foreign names are commonly Russified in Muscovite documents. Especially after the establishment of the Slavo-Greco-Latin Academy in 1685, many translators were Russians, but foreigners also continued to be employed by the Ambassadorial Chancery.

\(^\text{13}\) See Chapter Two, pp. 44-45.
\(^\text{15}\) D. V. Liseitsev, Posol’skii prikaz v epokhu smuty (Moscow: RAN, 2003), pp. 149-59.
Similarly, the Apothecary Chancery also relied upon specialist staff: like the Ambassadorial Chancery it employed some translators, but the majority of Apothecary Chancery staff members were medical practitioners. Until the establishment of the Apothecary Chancery school for surgeons and apothecaries in 1654, all these medical practitioners were foreigners, immigrants or prisoners of war from the West. Even after 1654, the vast majority of Apothecary Chancery medical staff was recruited from abroad. The Apothecary Chancery and the Ambassadorial Chancery differed from most chanceries, as they both relied heavily upon specialists and foreigners, rather than exclusively upon Russian administrators, to perform their duties.

Across the course of the seventeenth century there were significant changes in chancery staffing: N. F. Demidova has shown that the overall number of secretaries rose dramatically across the seventeenth century. In the 1640s, there were 837 secretaries in central chanceries; by the 1680s, this number had risen to 2,739. The growth in numbers was not equally distributed across the different classes of secretary. The number of counsellor secretaries, the highest rank of secretary, remained almost the same, only rising from four to five. The numbers of chancery secretaries, a slightly lower rank, rose more significantly, from 51 to 86. But it was the under-secretaries (including the signatory secretaries), the lowest grade of Russian administrator, that made the most significant gains, going from 782 to 2,648.

The growth in secretary numbers identified by Demidova is consistent with the figures that Grigorii Karpovich Kotoshikhin (c.1630-1667), a former chancery secretary who defected to Poland and later Sweden and author of the only contemporary Russian account of the chancery system, provides. For the 1660s, Kotoshikhin puts the numbers of secretaries at 100 (although he includes in this number the regional military governors, voevodas), and the number of undersecretaries at 1000; consideration of his numbers would suggest that the numbers of under-secretaries rose most precipitously between the 1660s and the 1680s. The number of secretaries needed by the chancery system rose significantly across the seventeenth century, with that demand apparently accelerating in the later seventeenth century.

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16 Types of medical practitioner and how they were recruited are dealt with in Chapter Three.
17 Court ranks are outlined in Chapter Two, pp. 44-45.
The picture of secretary numbers is somewhat different when one considers the individual chanceries. One criticism made of Demidova’s analysis in her monograph is that she does not provide tables that break her figures down into individual chanceries, though she does provide one such table in an earlier article. Peter B. Brown also supplies some statistics, including tables listing the staff numbers by chancery for the years 1627/8, 1668/9, and 1686/7 (the last he takes from Demidova). The only table that includes the Apothecary Chancery is 1668/9. In this year the Apothecary Chancery came last, with only two secretaries. Only the Auditing Chancery [Prikaz schetnykh del] shared the same number of secretaries. Such a figure was much lower than many of the other chanceries: in 1668/9 the Service Land Chancery [Pomestnyi prikaz] had a total of 130 secretaries, bested only by the Chancery of the Grand Court [Prikaz bol’shogo dvortsa], which had 164. Put in the context of the huge staffs in certain other chanceries, the Apothecary Chancery looks inconsequential.

However, numbers of secretaries may misrepresent of the place of the Apothecary Chancery within the chancery system for two reasons. Firstly, the number of staff employed there was not directly related to the importance of a chancery. The Ambassadorial Chancery [Posolskii prikaz], a key institution, had only 25 secretaries in 1668/9. Secondly, Demidova’s and Brown’s tables do not reveal that different chanceries used their staff for different purposes. It was the nature of the secretaries’ role within each chancery that determined the numbers of secretaries required. For example, in the Service Land Chancery the secretaries were engaged in the central activities of the chancery: the apportionment and tracking of service land. Thus it was essential to have large numbers of such secretaries. In stark contrast, the most important work of the Apothecary Chancery was carried out by medical practitioners. The Apothecary Chancery had significantly fewer secretaries than the Service Land Chancery because it needed fewer administrative staff than the Service Land Chancery. Moreover, if other types of staff, such as medical practitioners, were included in the tables the Apothecary Chancery would appear much higher in the table. In 1668/9 the Apothecary Chancery employed fifteen medical staff. Adding the medical staff to the

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24 Statistics compiled by me on the basis of the information in Unkovskaya’s Brief Lives.
secretaries (and excluding auxiliary staff like watchmen and stokers, as Brown and Demidova do) gives a total of 17, the same number of secretaries listed for the Chancery of the Grand Revenue [Prikaz bolshogo prikhoda], and more than for the Chancery of the Grand Treasury [Prikaz bol’shoi kazny]. Considering the secretary numbers alone gives a false picture of the scale of the Apothecary Chancery; medical staff, although a different type of servitor, must also be taken into account.

The important role of medical staff is corroborated by the fact that their numbers, like numbers of secretaries, rose dramatically throughout the seventeenth century. Figures compiled by Sabine Dumschat give the overall number of Apothecary Chancery medical staff in the period 1600-1620 as 17; by 1680-1696 there were 112.25 Interestingly, like the secretaries, this growth was most significant for the lower ranks of medical practitioner: there were 8 physicians in 1600-1620, and 10 in 1680-1696, meaning their numbers remained relatively stable. In stark contrast, the number of surgeons rose from only 4 in 1600-1620 to 69 in 1680-1696. Growth for the apothecaries was less dramatic but still significant, as they numbered just 3 in 1600-1620, rising to 16 in 1680-1696.26 The Apothecary Chancery thus follows the general trend of chancery system expansion across the course of the seventeenth century, and its own particular contribution to the Muscovite administration – the provision of foreign medical experts – expanded along with it.

**Document Production in the Seventeenth-Century Chancery System**

The expansion of the chancery system across the sixteenth and seventeenth centuries necessitated and drove an institutionalised form of literacy. Literacy in seventeenth-century Russia was very low, and written works were limited both in number and in type.27 The chancery system, as it required the transmission of orders and information, heavily relied upon written documentation to perform its duties, leading to a proliferation of administrative documents. As departments communicated with one another, or with other government agents in Russia or abroad, written documents were

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27 Literacy is here taken to mean some basic competence in the technical skills of reading and writing. Often it is unknown if an individual was literate, and in such cases it will be assumed that their literacy was that typical for their station in life, i.e., secretaries will be assumed to have been literate, whereas peasants will be treated as illiterate. On the problems of defining literacy, see Simon Franklin, *Writing, Society, and Culture in Early Rus*, c. 950-1300 (Cambridge: Cambridge University Press, 2002), pp. 3-5. See also Chapter Five.
used to ensure accurate transmission and record of those communications. Chancery Russian, the language of chancery documents, which was closer to the vernacular than Church Slavonic, was used to communicate a variety of ideas, often rendering speech into writing. A central feature of the chancery system was thus its production of documents.

Typically, all documents pertaining to one incident or affair were kept together in a single file, meaning that multiple document types can be found together. All these types of document were written on scrolls, which were long, narrow strips of paper. In order to group them together, individual documents were glued end-to-end, with a secretary signing the back of each join to ensure that the documents were kept in their correct order. Signing the join also acted as a security measure, making it difficult for false documents to be inserted into a file. To further track documents, departments kept books documenting the work undertaken by the department, and even recording who referred to older documents. This attention to how documents were preserved and used underlines the great significance ascribed to literate documentation.

Many of these documents record interactions between Russian officials, or between ordinary Muscovites and officials. Petitions [chelobitnye gramoty pl, chelobitnaia gramota sg.], complaints or requests for help produced by individuals or groups of Muscovites, were traditionally directed to the tsar himself, and continued to be composed in such a manner even when the documents were dealt with by officials. Although formally ‘authored’ by the petitioner, the standardised manners of expression, neat handwriting, and attention to formalities indicates that they were likely written by professional scribes. Petitions were an important part of the Muscovite administrative process, to the extent that there was a separate chancery to deal with them [Petitions Chancery, Chelobitnyi prikaz], but petitions could also be sent directly to the chancery concerned. Through petitions Muscovites not in chancery service could nevertheless interact with the chancery bureaucracy. In Apothecary Chancery files, petitions initiated a chain of action that could lead to the production of reports, and so petitions are regarded in this study as a part of the report production process.

Several document types were used for effective communication between chancery officials. Orders from the tsar [pl. ukazy, sg. ukaz] made up a significant group of

28 Shmidt and Kniaz’kov, Dokumenty, pp. 21-27.
documents; these could be general policy directives or answers to specific requests or problems. In either case, the order relayed the tsar’s will to his officials. Similarly, orders could be given by the tsar’s advisers, in which case the document would be called a prigovor [sg., prigovory pl]. The chancery director could also send orders to his staff. Typically, such documents would form the start of a file, with records of how the order was fulfilled and reported on to the tsar or his counsellors following it. Documents were also exchanged between officials of equal status in order to relate significant information; such documents were called pamiati [pl., pamiat’ sg.]. These documents were the primary form of correspondence between chanceries, facilitating inter-departmental cooperation and communication. Finally, underlings would also send documents to their superiors, outlining how they had carried out an order, or relating significant affairs for consideration; these documents were called otpiski [pl., otpiska sg.].\footnote{Shmidt and Kniaz’kov, \textit{Dokumenty}, pp. 27-47.} As with the orders, such memoranda could be internal, or could be addressed to the tsar or boyars from a chancery director; all such correspondence documents are found in the Apothecary Chancery records. Documents thus facilitated the smooth operation of the chancery system by allowing transmission of information, orders and requests between staff and departments.

Alongside correspondence documents, trial records also made up a significant minority of chancery documentation. All chanceries, including the Apothecary Chancery, could hold trials, usually those concerning their staff, as chancery staff had the right to be tried in their home department; such proceedings produced trial documents such as interrogative records [rassprosnye rechi pl., rassprosnaia rech’ sng.]. Typically, interrogation records contained testimony from witnesses, such as village elders attesting the established boundaries of land under dispute (a common subject of Muscovite civil court cases). Torture interrogations [pytochnye rechi pl., pytochnaia rech’ sng.] were records of questioning under torture, typically of the accused, but Muscovite treason cases also mandated that the accuser be questioned under torture.\footnote{On treason and the use of torture see Chapter Six, p. 184.} In both cases, these records contain both the questions put to witnesses by investigators, and their responses.\footnote{S. P. Orlenko, \textit{Vykhodtsy iz zapadnoi Evropy v Rossii XVII veka. Pravovoi status i real’noe polozenie} (Moscow: Drevlekhranilishche, 2004), pp. 64-69.}

Other types of document were devoted to conveying information; these were typically appended to the correspondence documents, providing extra information as required. The most important of these were the reports, which were called skazki [pl.,
skazka sg.], as they often recorded oral testimony. Commonly, bureaucrats composed such reports on the subject of an investigation [obysk]; merchants also gave reports on trade and enterprises; in the Apothecary Chancery they were primarily composed by physicians. There is some disagreement about the relationship of the reports as a document type to similar documents, such as the interrogative records detailed above: O. F. Kozlov et al. state that reports were used for both non-judicial and judicial purposes, and in the latter context were similar to the interrogative speeches. In direct contrast, S. O. Shmidt and S. E. Kniaz’kov state that reports were only ever used in a non-judicial context. The term skazka does seem to have been used in judicial contexts, particularly in describing the testimony of the Apothecary Chancery, as in a case from March 1679. Thus Kozlov’s view that reports could be used in both judicial and non-judicial contexts is upheld by the Apothecary Chancery documents.

In either context, reports gathered together significant pieces of information in a concise way, laying out salient details to aid senior officials in their decision-making process. To return to Jordanova’s ideas about medical knowledge, knowledge is created by the inclusion of certain ideas and the exclusion of others. Reports, being summaries of salient details, thus presented knowledge of their subject. As such, these documents can be regarded as a form of knowledge production. Central to the chancery system was the circulation of information and orders; thus knowledge production by officials in the form of reports was vital to how Muscovy was governed.

Some chanceries also produced more unusual documents. One such type of document was the Vesti-Kuranty, a modern term for Russian translations of foreign newspapers, especially German papers, and other records of important events, such as peace accords. Like the reports, the Vesti-Kuranty were a group of chancery documents providing knowledge to the Russian court. These texts began being produced by the Ambassadorial Chancery in the early seventeenth century, using their staff of

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35 Kozlov et al., Gosudarstvennost’ Rossii, vi, part 2, p. 271.
36 Shmidt and Kniaz’kov, Dokumenty, p. 40.
37 RGADA f. 143, op. 2, ed. khr. 1251; Mamonov, Materialy, iv, pp. 1110-11.
translators. These texts were not simple translations of the foreign originals; where appropriate, translators would add in additional details, such as a description of the location of events, or summarise or entirely exclude events of less interest to the Russian court. Typically, international events would be included in the *Vesti-Kuranty* more often than the domestic affairs of other European countries; the court was also commonly sent information describing Russian diplomatic activities, demonstrating the court’s interest in tracking Russia’s perception in the West. As such, the *Vesti-Kuranty* were essentially compilations and adaptations, rather than *verbatim* translations of discrete texts. According to notes in the manuscripts themselves, the Russian texts were then read aloud to the Tsar and his advisers, thus fulfilling the same function of transmitting relevant information up the administrative hierarchy as the reports did.  

Several chanceries, including the Apothecary Chancery, produced knowledge in the form of books. Chanceries commonly had libraries containing a number of practical works on their area of interest. Daniel Waugh notes that Aleksei Mikhailovich’s Privy Chancery library included a wide range of books, mostly on practical subjects. Such texts were primarily acquired from Western Europe. Acquisition of practical texts for the court and chancery administration increased under Peter, with Petr Postnikov sending multiple volumes back to Russia from his foreign assignment in 1702, including works on European law, and military handbooks. As well as simply acquiring foreign works, chancery men translated them: the Ambassadorial Chancery produced a large number of translations particularly in the 1670s, like Maciej

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Stryjkowski’s Polish Chronicle. Some chancery servitors composed their own texts: Simeon Ushakov, who worked in the Armoury (Oruzheinyi prikaz), proposed (although never completed) a manual on icon painting. The seventeenth-century chancery system thus produced a wide range of documents to aid the administration of Russia; many of those documents were concerned with transmitting orders, but others also produced knowledge.

**Apothecary Chancery Document Production**

As was the case with all chanceries, the Apothecary Chancery kept a detailed record of its activities, making use of the same categories of documents and procedures described above. As prescribing medicines was a central part of the Apothecary Chancery’s duties, extensive records of prescriptions were kept. These were not recorded on the same type of scrolls used for all other chancery documentation, but on small sections of paper, the original in Latin by the prescribing physician, accompanied by a Russian translation; later they were stuck together end-to-end in the same manner as for standard scrolls. As with standard scrolls, this method was partly a security measure, ensuring what had been prescribed to whom and by whom could be accurately established. The prescription records also provided a reference material. It is common to find a note in these records that the prescription was delivered to the client; it is less common to find a note that a prescription produced earlier is to be repeated. However, the existence of such notes, rare as they are, does demonstrate that the Apothecary Chancery used these records not only to track medicines from prescription to delivery, but also filed them so that they could be referred back to later if necessary. Prescription records thus served two purposes: security and administration.

The Apothecary Chancery also received petitions on a range of subjects; one unusual petition requested that the Apothecary Chancery provide expert testimony at the defendant’s trial for witchcraft. More commonly, petitions directed to the Apothecary Chancery ask for medical treatment. Foreign visitors to Russia could request treatment

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43 Hughes, ‘Moscow Armory’.

44 See for example the 1674 order to repeat a previous prescription, RGADA f. 143, op. 2, ed. khr. 1093, l. 45; 1666 prescription for I. D. Miloslavskii from earlier prescription by Dr Engelhardt, RGADA f. 143, op. 2, ed. khr. 743, l. 46.

or medicines, as did a contingent of Crimean messengers in 1645, Count Valdemar of Denmark in 1645, a Dutch diplomatic delegation in 1648 and a Georgian princess in 1666.\textsuperscript{46} Russian servitors also commonly petitioned for treatment, like the soldier Stepan [Stepashko] Bogdanov, who petitioned for treatment in 1647 after he was injured in battle and then suffered further as a prisoner of war.\textsuperscript{47} Such petitions were fairly common. Interestingly, several such petitioners, including Bogdanov, frame their request in terms of service, juxtaposing their injuries with their service.\textsuperscript{48} Bogdanov states

\begin{quote}
grant me your slave [medical treatment] for my service and for [my] injury and for [my] patient incarceration.\textsuperscript{49}
\end{quote}

In some cases servitors even petitioned for the treatment of their families. In 1647 Pavel Vasil’evich Budaev, the tsar’s master of the hounds, petitioned for his wife to be treated. He had recently been away on business with the tsar, during which time his wife had been seriously injured by bandits, who had stabbed her as they ransacked the house.\textsuperscript{50} Even though Budaev did not directly invoke service as the reason his wife should be treated, framing his request in terms of his absence due to his duties demonstrates a conception of the mutual responsibilities of lord and servitor. The idea that treatment should be provided for wounds received during service meant that the social background of patients treated by the staff of the Apothecary Chancery ranged from relatively low-level servitors to courtiers and foreign dignitaries.

The Apothecary Chancery also received petitions from members of its own staff: frequently, such petitions concerned pay, permission to travel abroad, permission to send their family abroad for study, or work to be given to a relative.\textsuperscript{51} Other such internal petitions concern medical practice. Apothecary Chancery staff were permitted

\begin{footnotes}
47 RGADA f. 143, op. 2, ed. khr. 27; Mamonov, \textit{Materialy}, iii, p. 599.
48 For other petitions mentioning service, see Mamonov, \textit{Materialy}, iii, pp. 605, 719, 744-45, 745-46.
49 ‘пожалуй меня холопа своего за мое службишко и за увечье и за полонское терпение’, RGADA f. 143, op. 2, ed. khr. 27; Mamonov, \textit{Materialy}, iii, p. 599.
50 RGADA f. 143, op. 2, ed. khr. 100; Mamonov, \textit{Materialy}, iii, p. 604.
51 On foreign study and petitions for work, see Chapter Three, pp. 86-88, 98.
\end{footnotes}
to take up limited private practice in Moscow, which could lead to difficulties: in 1674 the surgeon Nikolai Grek petitioned to take Sila Potemkin to court, because the latter had not paid his medical bill.\textsuperscript{52} Alongside the officially sanctioned practice of Apothecary Chancery staff, Muscovites could also turn to irregular practitioners, whom The Apothecary Chancery staff disliked.\textsuperscript{53} In 1642 surgeon Andrei Ivanov petitioned for action to be taken against the irregular practitioner Dmitrii Selunskii.\textsuperscript{54} As well as recording interactions of the Apothecary Chancery with foreign dignitaries, Muscovite servitors and its own staff, petitions also reveal the department’s dealings with the wider medical world of Muscovy.

As well as the petitions, the Apothecary Chancery records contain a variety of orders. Some come directly from the tsar, such as an order of 1679 to examine the corpse of boyar Ivan Andreevich Vorotynskii for any indication of a contagious disease.\textsuperscript{55} More general orders were also received, such as an order of 1686 demanding that the Apothecary Chancery keep better control of its budget and not order excess medicaments.\textsuperscript{56} There were also internal orders: prescriptions typically were sent from a senior medical practitioner (a physician) to a junior medical practitioner (an apothecary) to be prepared, and so such documents can be seen as a specialised form of order.\textsuperscript{57}

Similarly, from at least 1630 Apothecary Chancery officials ordered herb collectors [travnik\textsuperscript{\textsc{pl.}}, travnik\textsuperscript{sg.}] out into the fields and forests to collect specific herbs, roots, berries and seeds to be used in medicines.\textsuperscript{58} Apothecary Chancery officials also sent orders to provincial authorities, in particular requiring governors to provide quantities of certain berries or herbs needed by the department.\textsuperscript{59}

More evidence for the Apothecary Chancery’s interactions comes from pamiati and otpiski detailing its collaboration with other departments. One particularly important link was with the Military Chancery [Razriadnyi prikaz], whom the

\textsuperscript{52} RGADA f. 143, op. 2, ed. khr. 1078; Mamonov, Materialy, ii, pp. 526-30.
\textsuperscript{53} The term ‘irregular (medical) practitioner’ is here used to mean unlicensed healer, following Margaret Pelling. See Margaret Pelling with Francis White, Medical Conflicts in Early Modern London. Patronage, Physicians and Irregular Practitioners, 1550-1640 (Oxford: Clarendon Press, 2003), p. 10.
\textsuperscript{54} RGADA f. 143, op. 3, ed. khr. 3.
\textsuperscript{55} RGADA f. 143, op. 2, ed. khr. 1294; Mamonov, Materialy, iv, pp. 1198-99.
\textsuperscript{56} RGADA f. 143, op. 3, ed. khr. 220. 3 July – 7 September 1686. Orders to make sure that excess medicaments are not purchased.
\textsuperscript{57} On the hierarchy of medical staff, see Chapter Three, pp. 77-80. See for example prescriptions for Tsar Aleksei Mikhailovich, 1663-64, compiled by doctors Engelhardt and von Gaden but made up by the apothecaries, RGADA f. 143, op. 2, ed. khr. 706.
\textsuperscript{58} RGADA f. 143, op. 1, ed. khr. 25; Mamonov, Materialy, i, pp. 4-5.
\textsuperscript{59} See for example Mamonov, Materialy, i, p. 133.
Apothecary Chancery provided with medicines and field surgeons for the army from at least 1632. Just as important was the Apothecary Chancery’s ability to assess servitors for fitness, a particularly present concern for military servitors. In such cases the Apothecary Chancery dealt with all the military chanceries, as in 1666 when the Musketeers Chancery [Streletskii prikaz] sent two injured soldiers for examination. Records also show the Apothecary Chancery sending otpiski, memorandums, to their superiors. Chief among such documents are texts detailing proposed treatments for the tsar, which would be written out by the physicians to be approved by the tsar personally before the medicines were prepared. Other such documents include Dr Johann Belau’s defence of his treatment of a patient, sent to the Apothecary Chancery director. These documents to and from the Apothecary Chancery demonstrate that the department took part in the active and constant communication of the Muscovite administration.

Like all chanceries, the Apothecary Chancery also had some judicial competencies. When foreigners came to trial in seventeenth-century Muscovy they were usually judged in either the Foreigners Chancery [Inozemskii prikaz] or, in the case of merchants, the Ambassadorial Chancery. When the foreigner in question was employed by another chancery, they could request their case be transferred to their ‘home’ institution, and so cases involving foreign physicians were typically tried in the Apothecary Chancery, even if they did not concern medical practice. The Apothecary Chancery physician Andreas Engelhardt twice brought such non-medical cases before the department, once against his servant for impregnating a maid, and once against a fellow Apothecary Chancery medical practitioner, Stefan von Gaden, alleging that Gaden had been preaching Judaism to Russian children. The Apothecary Chancery also conducted internal investigations into medical practice, such as cases from 1685 and 1703 concerning the correct preparation of medicines. Alongside these internal investigations, the Apothecary Chancery also became involved in other judicial proceedings and investigations, particularly those directed against the market trade in herbal medicines in the 1680s, 1690s and 1700s, and a number of witchcraft cases from

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60 RGADA f. 143, op. 1, ed. khr. 114.
61 RGADA f. 143, op. 2, ed. khr. 768.
62 See for example an extended record of the treatment of Mikhail in 1644, RGADA f. 143, op. 1, ed. khr. 206; Mamonov, Materialy, i, pp. 120-23.
63 RGADA f. 143, op. 1, ed. khr. 127; Mamonov, Materialy, i, pp. 39-40.
64 Orlenko, Vykhodtsy, pp. 64-69.
65 Unkovskaya, Brief Lives, pp. 22-23.
66 RGADA f. 143, op. 3, ed. khr. 155; RGADA f. 143, op. 2, ed. khr. 1622.
the 1620s on. Like all chanceries, the Apothecary Chancery heard its own cases; unlike most chanceries, it also became involved in cases tried elsewhere, underlining the importance of interdepartmental cooperation and communication to the Apothecary Chancery’s duties.

Even more unusually, the Apothecary Chancery also conducted correspondence with foreigners. Many of the ingredients used in Apothecary Chancery medicines were acquired from abroad; the physicians brought some items when they arrived to serve the Russian court, but significant quantities were also ordered from foreign merchants. Typically, a list would be made of the types and quantities of items required, and sent to a merchant, who would make the purchases on behalf of the Russian court, often in London or Amsterdam, important ports through which many different substances passed. Indeed, the presence in Muscovy of certain exotic substances such as Sarsaparilla, a North American vine used in the early modern period primarily as a treatment for syphilis, would seem to indicate that the court made significant use of European markets to obtain medicaments not indigenous to Russia. It was forbidden to bring medicine into Muscovy from abroad without the sanction of the Apothecary Chancery, which meant all such exotic substances had to be obtained by the Apothecary Chancery through the department’s foreign contacts.


68 See for example, a list of medicaments sent from London in 1662, RGADA f. 143, op. 2, ed. khr. 572; Mamonov, *Materialy*, iii, pp. 210-11.

69 See for example RGADA f. 143, op. 2, ed. khr. 572; Mamonov, *Materialy*, ii, pp. 210-11. Mamonov does not reproduce the Latin section of this document.


71 In 1648 medicines were confiscated from a Dutch diplomatic delegation on the Russian border and they had to petition for replacements from the Apothecary Chancery.
The Apothecary Chancery also maintained contact with Europeans other than merchants. One Apothecary Chancery head, Il’ia Danilovich Miloslavskii, was permitted to conduct a correspondence with the former Apothecary Chancery physician Johann Belau, when the latter was then living in Lübeck.\textsuperscript{72} Through Belau, the department was able to procure a unicorn horn and some new medical practitioners, as well as securing Belau’s own return to Russia. Communication with foreigners, especially by servitors, was severely restricted in Muscovy, and was in fact a treasonous offence. Indeed, in 1656 the Apothecary Chancery physician Andreas Engelhardt and his servant were investigated, as Englehardt had used his servant to send a letter to the Swedish Ambassador. Engelhardt was eventually cleared, as he successfully pleaded ignorance to the strict rules involving contact with foreign governments, being then a newcomer to Russia (he had arrived in December 1655).\textsuperscript{73} In this respect the privilege of the Apothecary Chancery to maintain foreign correspondence singled out that department from most other chanceries (except, of course the Ambassadorial Chancery). Correspondence documents further emphasis the Apothecary Chancery’s role in providing a link to Europe.

\textit{Apothecary Chancery Document Making as a Form of Knowledge Production}

Accompanying many of these correspondence documents were reports; indeed the Apothecary Chancery was often called upon specifically to provide knowledge in the form of reports to other parts of the Muscovite administration. Unsurprisingly, many of these reports were produced during courses of patient treatment. Documents produced for the tsar commonly included these longer characterisations of proposed or ongoing treatments, as with Mikhail Fedorovich in 1645, or Samuel Collins’s advice on obesity written for Aleksei Mikhailovich, written in 1665.\textsuperscript{74} Such opinions were also requested in the case of unexpected delays or complications, as when Dr Johann Belau’s treatment of Grigorii Gorikhvostov for worms took longer than expected Belau gave a statement once they reached Moscow. RGADA f. 143, op. 2, ed. khr. 80; Mamonov, \textit{Materialy}, ii, pp. 610-11.


defending his treatment. Such texts present knowledge about medicines and the human body to which physicians and other medical practitioners had special access.

Similarly, examinations of soldiers for their fitness to serve were, fundamentally, documents producing knowledge about the human body. Apothecary Chancery physicians provided that information, for which purpose they were tasked with three questions. Firstly, was the servitor genuinely sick, injured, or otherwise incapacitated? Next, the physicians were to state if the ailment could be treated. Finally, they physicians had to give an opinion on whether, once treatment was completed, the service person in question would be able to return to his duties. For example, in 1666 the Musketeers Chancery had a group of their servitors examined, with the Apothecary Chancery report detailing the bodily state of each man and how it related to their ability to serve, as for Fedor Filipov:

Musketeer Fedor [Fed'ka] Filipov has a wound on the side of his right leg, and that wound goes to the bone; and on the same leg the vein [behind the] knee has come away, [consequently] the leg has shrivelled up and so it is not possible to heal him and [for him to] serve the Tsar.

Filipov’s examination is typical: in all such cases the medical facts were stated alongside the possibility for future service, demonstrating the use of the former to determine the latter.

Other cases also include knowledge about the human body. For example, inquiries concerning medical practice could also require the production of reports about the human body, as in the 1674 Grek vs Potemkin case, where the patient Potemkin was examined to assess his claim that Grek had not in fact cured him, an accusation Grek’s colleagues refuted. In other cases, the context of the report is unclear, as with Graman and Belau’s 1643 report on angina, in which they gave a characteristic of the disease

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75 RGADA f. 143, op. 1, ed. khr. 127; Mamonov, Materialy, i, pp. 39-40.
77 ‘у стрелца у Федки Филипова на правой ноге на берцы раны, и теми ранами идут у него кости; да у той же ноги, под коленомъ жилы свело, и та нога высохла и лечить ево и Государевы службы служить не мочь’, Mamonov, Materialy, ii, pp. 311-12, quote on p. 312.
78 RGADA f. 143, op. 2, ed. khr. 1078; Mamonov, Materialy, ii, pp. 526-30.
and its effect on the human body.\textsuperscript{79} Similarly, Apothecary Chancery post-mortem reports also present knowledge about the human body. These documents describe the wound or disease and identify and explain the cause of illness or injury. Commonly, the central concern was that the individual had died because of the plague, as in cases from 1658, 1677 and 1679.\textsuperscript{80} Only infrequently did the Apothecary Chancery provide information about the cause of death in violent cases, such as their report on the death of a member of Count Valdemar’s retinue in 1644, or to confirm the cause of death as natural, as with the death of Charlotte Christine of Brunswick-Lüneburg, Tsarevich Aleksei’s wife, in 1715.\textsuperscript{81} Also infrequent was the call to examine persons thought to have died from malpractice, as with the death of Fedor Neledinskii in 1682.\textsuperscript{82}

In all these cases, knowledge about the human body and its ailments was primarily composed by foreigners (although the text was then rendered into Russian by a Russian translator). Such a process was highly unusual, if not unique, for the Muscovite chancery report production process; typically, such texts were produced by the secretaries, all of whom were Russian. Moreover, this foreigner-produced knowledge was widely available to Russians in chancery service, especially the reports on the fitness of service persons, which were provided to a number of the military service chanceries over much of the seventeenth century. One special feature of the Apothecary Chancery’s knowledge production was thus this unusual level of reliance upon foreigners.

It is significant that these foreigners were all trained medical professionals. Again, there is a contrast with usual report production. Most reports were written by Muscovite secretaries, who were commonly moved from department to department across the course of their careers. Such varied career experience made it unlikely that any secretary would have developed significant expertise in any one area of Muscovite governance. They were experts in the forms of document production, but not the subject

\textsuperscript{79} 1643 report on angina, RGADA f. 143, op. 1, ed. kh. 131; Mamonov, \textit{Materialy}, i, pp. 44-45. See also RGADA f. 143, op. 1, ed. kh. 133a; Mamonov, \textit{Materialy}, i, p. 46.
\textsuperscript{81} 1644 post-mortem of a member of Count Valdemar’s retinue, RGADA f. 143, op. 1, ed. kh. 141; Mamonov, \textit{Materialy}, i, pp. 62-63. 1715 post-mortem of Charlotte-Christine, RGADA f. 143, op. 2, ed. khr. 1635.
\textsuperscript{82} RGADA f. 143, op. 2, ed. khr. 1361; Mamonov, \textit{Materialy}, iv, pp. 1288-89.
of the reports. In contrast, European medical practitioners often had extensive training: physicians would usually have studied for many years at a university to gain their medical degree. Although it was common for early modern medical practitioners to also engage in other trades alongside their medical practice, medicine was a long-term career for them. Thus, in contrast to most chancery reports, which were authored by professional administrators, Apothecary Chancery reports were written by experts in the subject.

As well as their examinations of bodies and statements on disease, physicians and their colleagues were also called upon to produce reports on medicines and their raw ingredients. Often, such reports were written about ingredients that were delivered to the Apothecary Chancery; they were examined for freshness and quality before being used. In a number of cases internal reports on medicines have no such obvious context, but were apparently simply produced to acquire a store of knowledge about medicines, such as Samuel Collins’ 1664 report on the properties of coffee and deer horn, or Engelhardt’s 1664 report on the use of animal parts in medicine. Other such internal reports on medicaments could occur during investigations about practice, like that instigated against Daniel Gurchin in 1703, or in respect to a patient, like the 1645 examination of Count Valdemar’s medicines.

Reports on medicaments could also be requested by other departments in the chancery system: in 1679 and again in 1685 and 1686 the Musketeers Chancery came to the Apothecary Chancery for reports on medicaments being sold on the Moscow markets. These cases were followed by a larger-scale investigation into those markets in 1699-1700. Several different departments relied on the Apothecary Chancery to provide expert testimony in witchcraft trials, which always involved an examination of

84 RGADA f. 143, op. 3, ed. khr 1506.
86 Case against Gurchin, RGADA f. 143, op. 3, ed. khr. 155; RGADA f. 143, op. 2, ed. khr. 1622. 1645 examination of Count Valdemar’s medicines, RGADA f. 143, op. 1, ed. khr. 210; Mamonov, Materialy, i, p. 125.
87 1679 malpractice case against Grigorii Donskoi, RGADA f. 143, op. 2, ed. khr. 1251; Mamonov, Materialy, iv, pp. 1110-11. 1685 investigation into the sale of p’ianoe zelie, RGADA f. 143, op. 3, ed. khr. 172. 1686 malpractice case against Andrei Kharitonov and Mikhail Tuleishchikov, Novombergskii, Materialy, ii, pp. 311-12.
88 1699 interrogation of stallholders in the Apothecary Chancery, RGADA f. 143, op. 3, ed. khr. 462.
a herb or root.\textsuperscript{89} Similarly, the tsar himself requested information from the Apothecary Chancery when considering purchasing unicorn horn as a medicament in 1655, 1657/8 and 1669.\textsuperscript{90}

In such cases, Apothecary Chancery physicians and apothecaries produced reports on this subject because of their special knowledge of medicaments and plants, and the effects those objects could have on the human body. Physicians in the Apothecary Chancery, like their colleagues in the rest of Europe, prescribed medicines for their patients, listing each ingredient and how it was to be prepared and consumed; it was thus assumed that physicians knew the properties of plants and other medicinal substances. Apothecaries were charged with preparing the medicines prescribed by the physician, although in some parts of Europe they also prescribed their own medicines. Thus, like the physicians, apothecaries were expected to have special knowledge of medicaments, their properties, and their effects on the human body, expertise drawn upon by the Apothecary Chancery in their reports.

Like the reports on the body and its ailments, reports on medicaments were always primarily based on an examination of the object in question. Unlike reports on the examination of human bodies, the 1685 report on \textit{p’ianoe zelie} also explicitly relies upon knowledge in Western medical books.\textsuperscript{91} Such a fact is highly unusual for chancery reports; typically they were composed on the basis of experience. Where they did rely upon written knowledge, it was typically that recorded in Muscovite official documents, as during precedence disputes when the boyar books recording service were consulted.\textsuperscript{92} In contrast, the 1685 report explicitly relies upon foreign written knowledge. This

\textsuperscript{89}1628 witchcraft case against Andrei Loptunov, Novombergskii, \textit{Materialy}, iii, part 1, pp. 9-12. 1657 witchcraft case against Andrei Durbenev, Mamonov, \textit{Materialy}, iii, pp. 676-77. 1673 collection of witchcraft cases heard by the Investigations Chancery, Mamonov, \textit{Materialy}, ii, pp. 494-95. 1703 witchcraft cases against Natalia Elfimova and Ustinia, RGADA f. 143, op. 2, ed. khr. 1618. 1664 case against \textit{syn boyarskii} Dmitrii Volodemirov, Novombergskii, \textit{Materialy}, i, pp. 60-61. 1699 witchcraft case against peasant Mikhail Grigor’ev, RGADA f. 143, op. 3, ed. khr. 454. In one case from 1690 the defendant, Perfilii Rokhmaniniv, petitioned for a report to be made, but it was not completed. Novombergskii, \textit{Vrachebnoe stroenie}, p. XCIII.


\textsuperscript{91}1685 investigation into the sale of \textit{p’ianoe zelie}, RGADA f. 143, op. 3, ed. khr. 172.

\textsuperscript{92}See Chapter Two, pp. 47, 69.
reliance on foreign book learning is another distinguishing characteristic of Apothecary Chancery knowledge production.

Apothecary Chancery reports also occasionally produced knowledge about medical practice and medical practitioners. Here medical practice means the specific courses of treatment for a disease or certain prophylactic measures. Such is the case with Dr Johann Belau’s report on his treatment of Gorikhvostov, and Samuel Collins’ 1664 text on venesection.\(^93\) As with the reports on human bodies and on medicaments, reports on appropriate medical practice draw on medics’ specialist knowledge; Collins, in his report on venesection, makes reference to ancient medical works, specifically that of Hippocrates, the great Greek physician, and Avicenna, a Persian polymath and physician. Similarly, Apothecary Chancery entrance examinations also contain assessments of medical practice; here the abilities of specific practitioners, rather than abstract assessments of the validity of procedures like Collins’ text on venesection. As the Apothecary Chancery recruited increasing numbers of medical practitioners, they began to have existing staff examine them for competency and appropriate knowledge; the results of said examinations were recorded as reports.\(^94\) Like the reports on the human body and medicaments, reports on medical practice contained specialist knowledge provided by foreign medical experts.

Many of the reports dealt with above were transcribed from oral testimony through an interpreter; some reports were composed in writing by the physicians, and then rendered into Russian by a translator: some documents begin: N skazal [N said], indicating transcription; others perevod s Latinskogo pis’ma [that is translated from a Latin document [lit. writing], denoting translations. All extant foreign-language reports are in Latin, possibly indicating that this was the lingua franca of Apothecary Chancery medical practitioners. The almost exclusive use of Latin, rather than the many different vernaculars of the foreign staff, would have also simplified the department’s translation needs. The existence of such Latin-language originals of reports is highly unusual; the vast majority of chancery reports were composed in Russian. Thus the composition of reports in a foreign language is one other significant way in which Apothecary Chancery reports differed from other chancery reports.

\(^93\) Belau’s report on worms, RGADA f. 143, op. 1, ed. khr. 127; Mamonov, Materialy, i, pp. 39-40. Collins’ report on venesection, RGADA f. 143, op. 2, ed. khr. 738.

Alongside the reports, the Apothecary Chancery also produced knowledge in the form of medical books.\textsuperscript{95} These texts, which primarily consist of recipe collections, were produced throughout the later decades of the Apothecary Chancery’s history, between 1676 and 1708. Like the reports, they were produced by foreign medical experts employed by the Apothecary Chancery. Also like the reports, they were created on the basis of foreign, Western European medical knowledge. Indeed, all the medical books linked to the Apothecary Chancery were translated or adapted from Western works, once again underlining the centrality of the European medical world to Apothecary Chancery knowledge production.

\textit{Conclusion}  
Many of the documents produced by the Apothecary Chancery, in particular reports and books, constituted a form of knowledge production. The documents of the Apothecary Chancery show certain features not present elsewhere in the chancery system. Unlike other chancery reports, which were produced in Russian by Russians, the Apothecary Chancery reports were first composed in a foreign language (Latin) by a foreign medical practitioner, and only then rendered into Russian. Similarly, medical books compiled by Apothecary Chancery staff were often based on Latin originals, and composed by foreigners. This heavy influence of foreigners on the Apothecary Chancery knowledge production process was unique in the chancery system, rivalling even the impact of foreign activity in the Ambassadorial Chancery.

The other significant feature of Apothecary Chancery knowledge production was the use of expertise. Most chancery reports were composed with reference to experience or to official Russian records. Apothecary Chancery reports reference experience against Western medical expertise contained in authoritative texts, with various reports specifically naming authors whose works they were relying upon. It was this reliance upon foreign experts and foreign expertise to fuel their knowledge production that set the Apothecary Chancery apart from the rest of the seventeenth-century Muscovite administration. In the following chapters this process of providing foreign expert knowledge to Russians will be explored in greater depth, beginning with the role of the Apothecary Chancery director.

\textsuperscript{95} See Chapter Five.
Chapter 2: The Role of the Apothecary Chancery Director

Russian chanceries were usually headed by a director, who made broad decisions regarding the activities of the chancery. During the sixteenth century the secretaries, professional administrators, had been in charge of the court’s administrative organisation, but during the seventeenth century boyars gradually took over the chancery directorships. Bringing the boyars into chancery service had meant partly politicising administration, as the clans measured their political capital through the acquisition of important posts. All Apothecary Chancery directors of the seventeenth century were important members of significant court factions, and appointments were often swayed by political crises such as the Musketeers revolt of 1648. As boyars had little administrative experience, having previously performed first and foremost military service, questions have been raised as to their administrative competency. Their names appear on judgements and correspondence, but this tells us little about their tangible input. Did they make a real contribution, directing the course of affairs? Or did they simply treat these jobs as sinecures, and leave the real decision-making to their deputies, the secretaries? Historians are divided. Borivoj Plavsic has proposed that the boyars did little in the chanceries, with the real work being done by the secretaries, who worked as their assistants.\(^1\) Robert O. Crummey has a more positive view of boyar contribution, proposing that they would have used their long tradition of military service to bring much needed leadership to chancery affairs.\(^2\) Crummey, however, does not think that the boyars made a practical contribution based on skill. Peter B. Brown has proposed a third view: looking at the organisation and work of the Military Chancery, he notes that this institution fulfilled its duties competently, which reflects well on the boyars.\(^3\) Similarly, George G. Weickhardt has shown that, judging by their successes and failures, during the seventeenth century there was no clear difference in the competence of the boyars and the secretaries.\(^4\)

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Historians of the Apothecary Chancery have recognised the importance of the Apothecary Chancery directors and their relationship to the court. Eve Levin has stated that the director was always closely related to the tsar or tsaritsa, which, in her view, was a result of the constant drive for the safety of the tsar’s family.⁵ M. K. Sokolovskii, although generally taking a wider view of the Apothecary Chancery’s functions than Levin does, also sees security concerns and familial relations as the central motivating factors in director selection.⁶ These assessments of Apothecary Chancery directorship selection are brief, no more than a couple of paragraphs, and solely focus on the directors’ relationship to the tsar and his family, highlighting only security concerns as the motivating factor in appointments. In part, the brevity of these assessments of the Apothecary Chancery directorship selection process is due to the sources: we have little direct evidence for why any specific individual achieved that, or indeed any other chancery position.

Nevertheless, it is important to attempt some further analysis of the Apothecary Chancery boyar directors. Despite the narrow focus on security in the historiography, directors had a much wider remit: they were responsible for all work done within their chancery, as well as liaising with other departments and with the court and tsar. In the case of the Apothecary Chancery, this meant passing on orders from above to the staff, including about report production, and also studying or disseminating reports to whomsoever the subject concerned. If the boyars were involved administrators, as Brown suggests, this would imply a close link between court politics, in which all boyars were intimately involved, and knowledge production. Moreover, it would mean that the directors were a key link in the chain of knowledge production and dissemination. By contextualising the careers of seventeenth century Apothecary Chancery boyar-directors within court politics, contemporary security considerations and considering their administrative careers as a whole, this chapter seeks to put forward tentative hypotheses concerning the importance of administration to the Apothecary Chancery directorship.

The Sovereign’s Court and Muscovite Politics

All Russian chancery administrators and directors held ranks within the Sovereign’s Court, which included the most important Muscovite servitors. Typically, important posts such as chancery directorships were linked to the attainment of certain ranks: in

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⁶ Sokolovskii, ‘Kharakter’, p. 70.
the seventeenth century it was mostly the boyars who held chancery directorships, and less commonly the \textit{okol’nichie}. Table 1 shows the position of these ranks in the court hierarchy.

**Table 1: The Sovereign’s Court**

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<tr>
<th>Counsellor Ranks</th>
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<tr>
<td>Boyars</td>
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<td>\textit{Okol’nichie}</td>
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<td>Dumnye dvoriane – Counsellor cavalrymen</td>
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<tr>
<td>Dumnye d’iaki – Counsellor secretaries</td>
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<th>Household Ranks</th>
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<td>Dvoretskie – Majordomos</td>
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<td>Kravchie – Cupbearers</td>
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<tr>
<td>Postel'nichie – Masters of the bedchamber</td>
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<td>Kaznachei – Treasurers</td>
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<td>Oruzhnichie – Arms bearers</td>
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<td>Pechatniki – Keepers of the seal</td>
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<td>Iasel'nichie</td>
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<td>Sokol'nichie - Falconers</td>
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<td>Lovchie – Masters of the hunt</td>
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<td>Koniushie – Equerries</td>
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<th>Personal Guard</th>
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<td>Stol’niki - Stewards</td>
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<td>Dumriane Moskovskie – Moscow cavalrymen</td>
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<td>Striapchie</td>
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<td>Zil’tsy</td>
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- Adapted from Bogatyrev, \textit{Sovereign}, pp. 22-25.
- Where there is a standard translation for the Muscovite rank, or a close equivalent in English, this is provided.
Administrative Ranks

Prikaznye d’iaki – Chancery secretaries
Podiachie s prpis’iu – Signatory secretaries
Podiachie – Under-secretaries

The bottom rung of the Sovereign’s court, the administrative ranks, provided the primary staff of the chancery system, including for the Apothecary Chancery. They recorded the activities of the chanceries they worked for, wrote correspondence, and dealt with petitions. Under-secretaries dealt with the most basic tasks, and this rank was the usual entry level for chancery staff, who would start their careers at the age of fifteen or sixteen. Signatory secretaries typically had more responsibility, but still only dealt with internal chancery matters. The highest administrative rank was that of chancery secretary; these servitors typically worked as deputy directors, taking on some of the responsibility for the overall direction of the department and its relations with the rest of the administration. The highest secretary rank was that of the counsellor secretary; these servitors could head chanceries, but, as the boyars took control of the chancery system, increasingly they were relegated to deputy directors like the chancery secretaries.

Only three other ranks served in the Apothecary Chancery in the seventeenth century: the kravchie, the okol’nichie and the boyars. The kravchie, as part of the household ranks, performed various tasks within the court. In the late fifteenth and early sixteenth centuries the household staff, in particular the major-domo and treasurer, were entrusted with vital administrative affairs. By the seventeenth century, the household ranks played little role in the running of the chancery system: only one Apothecary Chancery head was a kravchii – M. M. Saltykov.

Both the okol’nichie and the boyars, like the counsellor secretaries, were part of the counsellor ranks [dumnye liudi], the top of the Muscovite hierarchy, and filled various important posts in the military and diplomatic corps, as well as the directorships of the chanceries. The name of this group, ‘counsellor ranks’, also indicates their traditional role as the tsar’s key advisers. Muscovite political culture required constant

9 On the deputy directors see Chapter One, p. 22.
11 See below, pp. 55-57.
and productive consultation between tsar and boyars. Consultation was not a boyar right, but a duty of both the boyars and the tsar: boyars must counsel their tsar according to what they believe is right, even if they know their advice will not be well received; the tsar must listen to his advisers, and is responsible for choosing good advisors.\textsuperscript{12} It was to this vital process of political consultation that the term ‘counsellor ranks’ referred, yet, in reality, the servitors in the so-called counsellor ranks performed a variety of functions other than the provision of advice.

Initially an \textit{okol’nichii} was an advance man for the tsar on military campaigns, travelling ahead of him to check the road and secure lodgings. In the late fifteenth century the \textit{okol’nichii} rank became the second court ranking after the boyars, and these two ranks came to occupy all top jobs, acting as military governors and judges.\textsuperscript{13} During the late fifteenth century this rank designated a different role to that of the boyars, with the boyars taking care of military affairs, and the \textit{okol’nichie} dealing with state administration.\textsuperscript{14} By the seventeenth century the distinction between the duties of the \textit{okol’nichie} and the boyars had been largely eroded, with the \textit{okol’nichie} rank rather serving as a stepping-stone for men progressing through the court ranks. Some differences in the duties of boyars and \textit{okol’nichie} did remain, but they were essentially concerns of precedence: boyars received more prestigious assignments. This hierarchy is reflected in Apothecary Chancery appointments: no \textit{okol’nichii} ever headed the Apothecary Chancery in the seventeenth century, but on occasion they acted as deputy director.\textsuperscript{15}

The highest counsellor rank was ‘boyar’, a term generally agreed to be of Turkic origin meaning rich or eminent. First and foremost, the boyars served in the Russian army, as commanders of the various divisions; this was a long-established tradition, and formed the core of noble service for several centuries. They were also required to attend and play roles in the various ceremonies held at court. As Russia grew in size, the boyars took on a wider range of roles. Diplomats were typically chosen from the boyar ranks. Especially in the seventeenth century, it was common for boyars to serve for a period as a provincial governor, a key role in the administration of the increasingly large

\textsuperscript{13} Bogatyrev, \textit{Counsellors}, p. 22.
\textsuperscript{15} See below, p. 64-65.
Muscovite territory. More prestigious were posts in the central government, like the directorship of the Apothecary Chancery.\textsuperscript{16}

The appointment of servitors of all ranks to various positions, including chancery service, was the prerogative of the tsar, but the servitors themselves had the right to petition against their postings. The top ranks, in particular the boyars and \textit{okol’nichie}, were able to complain about a posting on the basis of precedence. Precedence [\textit{mestnichestvo}] was a system ranking boyars by their service, and the service of their relatives and ancestors. A boyar with an excellent service record, from a family who had a long tradition of service to the Russian crown, could expect to receive a more highly placed position than a boyar with a less prestigious record. Posts, especially army commands, were ranked, so that if a boyar felt that a lowlier contemporary had been given a better post than he, he could complain.\textsuperscript{17} Only a handful of precedence cases were ever fought over chancery appointments, and the Apothecary Chancery was never involved in these disputes.\textsuperscript{18}

The hierarchy of the Sovereign’s court and precedence concerns thus provided the basic structure for appointment policy, with certain ranks typically receiving certain positions. Alongside formal concerns of rank and precedence, appointment policy was also affected by power relations between the tsar and his boyars, and between the various boyar clans and alliances. Robert O. Crummey has proposed that in the seventeenth century chancery appointments were solely determined by the boyar clans, stating that

\begin{quote}
[f]or much of the [seventeenth] century, the tsars were young or incompetent, and favourites or groups of advisors ruled in their names. Such politicians had a free hand to do whatever was necessary to make
\end{quote}

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\textsuperscript{18} Iu. M. Eskin, \textit{Ocherki istorii mestnichestva v Rossii XVI-XVII vv.} (Moscow: Kvadriga, 2009), pp. 286-309.
\end{flushleft}
themselves wealthier or more powerful. Understandably, they made themselves heads of important chanceries.\(^{19}\)

Crummey’s statement rests upon a wider conception of politics and power in seventeenth-century Muscovy, in which the boyars wielded significant power. This power was generally structured by clans, extended family networks with a known lineage to which all boyars belonged; court factions were commonly arranged along clan lines.\(^{20}\) Crummey’s assessment does not totally deny political agency to the tsar, but does place significant political power, notably in determining chancery appointments, in the hands of these boyar clans. In assessing the appointment policy for Apothecary Chancery directors, considerations of inter-clan and boyar-tsar relations, as well as formal court rankings, must all be taken into account.

**The Boyar Take-over of the Chancery Directorships**

The importance of the boyar clans to chancery appointments stems from the boyar take-over of the chancery system. Beginning in the early decades of the seventeenth century, boyars took over the directorships of a number of chanceries from the secretaries. In the late sixteenth century the court medical department, the *aptechnaia izba*, was run by secretaries: in 1572 secretary Ivan Mikhailkov was the head; in 1598 it was headed by secretary Ivan Bogdanov.\(^{21}\) By the early seventeenth century a boyar already headed the Apothecary Chancery, along with the Great Court, Vladimir Judicial [*Sudnyi Vladimirs’kiy prikaz*] and Moscow Judicial Chanceries [*Sudnyi Moskovskii prikaz*]. In the 1610s and 1620s boyars were also appointed to the heads of most of the newly created military chanceries, along with some law enforcement chanceries. In the 1640s the boyars continued to expand their control over the chancery system, taking over a number of tax chanceries. The secretaries remained in control of a number of key chanceries – Military [*Razriadnii prikaz*], Ambassadorial, and Land Service, but they had lost control of these to the boyars by the 1680s.\(^{22}\) The seventeenth century was thus a period of gradual but inexorable shift in the control of chancery directorships from the secretaries to the boyars.

\(^{19}\) Crummey, ‘Noble Official’, p. 75.
\(^{22}\) Weickhardt, ‘Bureaucrats and Boiars’, pp. 342-49.
Control over chanceries shifted from the secretaries to the boyars for several reasons. In part, it was due to the changing status of the secretaries’ service. In the sixteenth century the ‘chancery people’ had been a group defined by their function as administrators, but during the seventeenth century they became more interested in their formal status, or perhaps just found themselves in a better position to request changes to it. In 1640 the secretaries were declared a closed group; no one of clerical descent, the only other semi-literate group of similar status, was to be taken into chancery service. It should be noted that this law was never fully implemented, as the demand for qualified and competent administrators was simply too great to permit its enforcement. When administrators could be found within the ‘chancery people’, this rule was adhered to. When it was not possible, the old recruitment practice of mining the literate town clergy returned. The significance of the decree of 1640 was not its application, but rather in what it reveals about the way the secretaries thought about themselves and wished to be seen: not just as administrators, but also as a social stratum.

The idea of the chancery people as a distinct social group was further developed in 1662 when they gained the right to precedence. By giving this privilege to the chancery people, the court was validating chancery service as essential to Russia. This privilege also underlined the extent to which the secretaries had become a distinct social group. As Brown has argued, this development damaged their previous reputation as professionals. Edward Keenan has said that ‘[p]olitics in Muscovy was a politics of status, not of function’. The actions of the secretaries in the seventeenth century, petitioning to become a closed group, and to be allowed to have precedence, can be seen as an attempt to gain a greater political significance as a group. Unfortunately for the secretaries, the same period saw their decline. The creation of a social stratum for the secretaries was intended to secure their position, but actually fundamentally undermined it: if chancery service was to be determined by status, the secretaries would always lose out to the boyars, who were of significantly higher status.

The decline of the secretaries’ power was also in part due to the entrance of the boyars into chancery service. Traditionally, boyars had been military men, advisors and ceremonial figures. Their ingress into chancery service was primarily driven by their own recognition of the importance of the chancery system in late Muscovy. Brown and Crummey have both seen the initial influx of boyars into the chancery system in terms

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24 Weickhardt ‘Bureaucrats and Boyars’, p. 332.
of the boyar’s desire to increase their political power.

It should be remembered that the period in which the boyars first entered chancery service was the reign of Mikhail Fedorovich. At the time of his election (1613) the royal coffers were all but empty, and Muscovy was under attack by both Poland and various Cossack groups. Mikhail needed to keep the boyars happy with their choice of ruler and minimise internal struggles in order to rebuild the realm. As boyars began to take over chancery directorships from the very first years of his reign, it seems probable that the boyars themselves at least acquiesced in the decision, and may well have proposed it themselves.

A place within the chancery system, especially as the head of a chancery, could bring boyars’ greater power: it could strengthen the position of a boyar at court, either by dint of service in a key chancery, or by using the excuse of chancery business to gain a personal audience with the tsar. The Apothecary Chancery, and others which provided services for the royal family, were particularly valuable from this point of view. Chancery service also provided other perks: access to the chancery budgets provided some unscrupulous boyars with an unparalleled opportunity for personal enrichment at the expense of the court.

The reasons outlined above all played some part in the behaviour of individual boyars, but the most important reason for boyar involvement in the chancery system was its importance to the consultation process: chancery directors were necessarily involved in consulting the tsar. As the experience of the sixteenth-century secretary-advisers had shown, that consultative role could bring with it significant influence. Ivan Viskovatyi, a secretary and head of the Ambassadorial Chancery in the 1550s, had acted as a key foreign policy advisor to Ivan IV; similarly, the secretaries Andrei Iakovlevich and Vasilii Iakovlevich Shelkalov were influential advisors to Ivan IV and his successors Fedor Ivanovich and Boris Godunov. In the seventeenth century a number of secretaries holding chancery offices also had significant influence, such as Ivan

27 Crummey, ‘Noble Official’, p. 73.
Gramotin, who dealt with foreign affairs under Mikhail Fedorovich.  

Boyars were concerned that the continuing presence of secretaries at the top of the chancery system was undermining their traditional role as advisors, and so they entered chancery service to preserve that role. The boyars apparently understood the importance of the chancery system, and wanted to make sure that they had a role in that power.

The boyars’ take-over of the chancery system was not unproblematic. Fear that the boyars would either not take their new roles seriously, or would not be good at them, is reflected in the chanceries the tsar allowed them to run. From the 1620s to the 1640s, they were permitted to take over new chanceries, and specifically those concerned with military affairs and some law enforcement. Generally speaking, the most important governmental affairs were dealt with by those chanceries that had already been in existence for some time by the early seventeenth century, which the boyars were not initially allowed to head. The new chanceries they were permitted to run also overlapped with the boyars’ previous spheres of competence: military affairs and the judiciary. The Apothecary Chancery does not entirely fall into either sphere, although it was involved in both military and judicial affairs. It is likely that this chancery was taken over so early because the benefits of having a boyar in this position outweighed the potential disadvantages. By appointing a boyar, the tsar could install a relative or favourite, who would reliably ensure the safety of the tsar’s medicines; security was the prime concern. Which chanceries were taken over first thus seems to be primarily linked to the boyars’ existing duties, as well as security concerns. In the 1660s to 1680s the boyars began to take over those most important chanceries that had previously been denied to them: Military, Land Service, and Ambassadorial. Their conquest of the chancery system was complete, and they could once again claim the sole right to be the tsar’s advisors.

**Responsibilities of the Apothecary Chancery Director**

Once the boyars were ensconced in their new chancery positions, they were faced with a range of duties. Due to the formal nature of Muscovite documents, it is easier to trace the theoretical remit of the director than to trace the specific input of any one boyar; the signature of the director was required on every important document, but this cannot be

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taken as a guarantee that the signatories had played a significant role in composing it.\footnote{In 1655 the Apothecary Chancery did not have a director, which significantly impeded business. This incident demonstrates that the director was at least theoretically involved in the administrative business of their chancery. Mamonov, \textit{Materialy}, iii, pp. 636-37; Levin, ‘Administration’, p. 367.} Rather, such notations reveal what the director was theoretically responsible for, whatever his personal input. Making such an abstract survey of theoretical duties is important, as it reveals what an involved boyar director would have been expected to do. In the case of the Apothecary Chancery, these duties cover three basic roles: security, politics and administration.

The security responsibilities of the Apothecary Chancery director primarily concerned the tsar and his medicines. Poisoning was a significant fear for seventeenth-century Russian rulers, and medicines represented one of the ways in which the tsar could be vulnerable to such an attack.\footnote{See also Chapter Six, p. 185-86.} It was thus vital that medicines for the tsar were subject to a strict chain of command, with every step from acquisition of the raw ingredients to delivery to the tsar being carefully recorded and monitored for irregularities. When raw ingredients were purchased by the department, they were commonly subject to an examination to ensure their freshness and suitability, before being carefully stored. Before the raw ingredients were made into medicines, the tsar approved his own courses of treatment, by reviewing a report on the proposed plan of action brought to him by the Apothecary Chancery director; it was only once the tsar had given his approval that medicines could be prepared.\footnote{See for example 1645 report sent to Mikhail Fedorovich, RGADA f. 143, op. 1, ed. kh. 206; Mamonov, \textit{Materialy}, i, pp. 120-23.} The preparation of medicines for delivery to the tsar was also carefully monitored: Apothecary Chancery medical practitioners were required to take an oath swearing that they would not put harmful substances into medicines, nor permit others to do the same; any transgression of these rules, however slight, was subject to serious consequences.\footnote{See Chapter Six, pp. 186-88.} As noted by Eve Levin and others, once the medicines were prepared, the Apothecary Chancery director was expected personally to deliver them to the tsar.\footnote{Levin, ‘Administration’, pp. 366-67.} It was the responsibility of the Apothecary Chancery director that each stage in the preparation and transportation of the tsar’s medicines was conducted appropriately, making him ultimately responsible for the tsar’s safety when taking medicines; thus security was a vital part of the Apothecary Chancery director’s duties. Notably, security-related duties partly involved
disseminating reports.

The Apothecary Chancery director’s role in politics was primarily linked to consultation. As noted above, chancery directors were expected to advise the tsar, and often gained significant power through their advisory functions. In the case of the Apothecary Chancery, the director was responsible for ensuring that certain reports were sent to the tsar and his counsellors; the reaction of the tsar and his counsellors would likewise be directed back to the department for the specific attention of the director. Such was the case in 1655, with the purchase of a unicorn horn in which the tsar had taken particular interest, and the 1679 autopsy of the boyar Vorotynskii. The Apothecary Chancery director was thus both directly involved in advising the tsar, and responsible for directing reports to the tsar and his other advisers. Such a role in consultation underlines the political aspect of the Apothecary Chancery directorship. As with the security-related duties of the director, political duties of also involved reports: ordering their production and disseminating them to others.

Finally, there are the administrative responsibilities of the Apothecary Chancery director. Much of this administration was internal, such as ordering the preparation of medicines and of reports. Some of these orders were fairly unusual: in 1657 the then director, Il’ia Danilovich Miloslavskii, ordered Apothecary Chancery physicians to perform an experiment on a unicorn horn which had been offered to the tsar, with the aim of verifying its prophylactic properties against poison. The experiment was the last in a collection of activities centered on this horn, which from the start had been under the supervision of Miloslavskii, who also ordered the composition of reports on unicorn horn. The unicorn horn documents not only show the director ordering reports and even an experiment, but ordering further action to be taken on current matters. Such requests for further action and information also occurred several other times during the course of the century, with regards to patient treatments that needed explanation, reports which lacked necessary details, post-mortems that needed to be redone, and more.

37 On the importance of consultation to Muscovite politics see Chapter One, pp. 21-22.
38 See above, p. 50.
40 RGADA f. 143, op. 2, ed. khr. 306; Mamonov, Materialy, iii, p. 696.
41 Mamonov, Materialy, ii, p. 160.
information on potential employees.\textsuperscript{42} The Apothecary Chancery director was thus responsible for ordering the undertaking the department’s internal duties, and for ensuring that they were completed satisfactorily. Internal administrative duties, like the director’s political and security-related duties, also involved reports.

Another vital part of the director’s administrative duties was conducting correspondence with other parts of the Muscovite administration, primarily other central chanceries. The Apothecary Chancery took an active role in the constant communication between the central chanceries, in particular providing various departments with reports on a range of issues.\textsuperscript{43} When other departments requested reports, they addressed themselves to the director, as in a request for a report on suspicious herbs made by the Land Chancery in 1664.\textsuperscript{44} When requests for such reports were carried out by the Apothecary Chancery, they were always first sent to the director before being delivered to the relevant chancery. Such was the case in 1679, when the autopsy of one of the Patriarch’s grooms was sent to the Land Chancery \textit{[Zemskoi prikaz]} via the Apothecary Chancery director.\textsuperscript{45} Thus the Apothecary Chancery director formed the official nexus past whom all inter-departmental communication must flow, again highlighting a significant administrative aspect to the directorship. This communication commonly included Apothecary Chancery reports; thus the director was involved in disseminating reports throughout the chancery system. Apothecary Chancery business encompassed activities beyond the security of the tsar’s medicines, activities in which the director was involved. Central to this post was the regulation of activities within the department, and also relations with other departments and the court, including the tsar. The director’s role, at least in principle, was not only related to security and politics, but also required significant administrative acumen, in part to direct the production and dissemination of reports.

\textsuperscript{42} 1643 Belau’s treatment of Gorikhvostov, RGADA, f. 143, op. 1, ed. khr. 127; Mamonov, \textit{Materialy}, i, pp. 39-40. 1643 report on angina and follow-up, RGADA f. 143, op. 1, ed. kh. 133a; Mamonov, \textit{Materialy}, i, p. 46. 1658 multiple post-mortems on suspected plague victim, RGADA, f. 143, op. 2, ed. khr. 300-303; Mamonov, \textit{Materialy}, iii, pp. 694-95. 1685 petition for work and request for more information, RGADA f. 143, op. 3, ed. khr. 143.
\textsuperscript{43} See Chapter One, pp. 32-34.
\textsuperscript{44} Novombergskii, \textit{Materialy}, i, pp. 60-61. See also RGADA f. 143, op. 3, ed. khr. 454; RGADA f. 143, op. 2, ed. khr. 1618; RGADA f. 143, op. 3, ed. khr. 466.
\textsuperscript{45} Mamonov, \textit{Materialy}, iv, pp. 1161-62.
Seventeenth-Century Apothecary Chancery Boyar Directors

Establishing the theoretical duties of the director only provides part of the picture; the possibility still remains that the deputy directors, professional administrators, took the leading role in decisions, with the boyars simply approving their decisions. The level of active engagement with the Apothecary Chancery’s duties, administrative and otherwise, by the boyar directors can best be addressed by consideration of each director and their career. Boyars dominated the directorship of the Apothecary Chancery in the seventeenth century, holding the post almost without interruption from 1622 to 1697, when administrators again took over. These boyar Apothecary Chancery directors typically ran multiple different chanceries during their careers, and they often ran several at the same time. An examination of Apothecary Chancery directors’ involvement in running other chanceries reveals that these combinations of chanceries in a boyar’s career were not random. The same chanceries, or chanceries dealing with related areas of governance, can be found in the careers of multiple Apothecary Chancery directors. Here the careers of each of the seventeenth-century Apothecary Chancery boyar directors will be considered in order to assess the relative importance of patronage, clan-tsar power relations, career profile (which other chanceries they held and when) and administrative experience to their appointment to the Apothecary Chancery. In this way it will be possible to judge if the boyar directors were indeed expected to take serious part in the administrative work of their departments.

M. M. Saltykov (1614-21)

Mikhail Mikhailovich Saltykov was the first Apothecary Chancery director of Mikhail Fedorovich’s reign (r.1613-1645). Crummey has shown that Mikhail’s appointment policy in general favoured old boyar families over newer servitors, in particular families who had served the previous dynasty: the appointments of his reign show the same families in prominent positions as under Fedor I and even Ivan IV. This view has been confirmed by Marshall Poe’s statistical analysis of the boyar ranks. Apothecary

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46 Appendix 1 lists all the seventeenth-century Apothecary Chancery directors. See pp. 219-20.
47 Appendix 2 provides information on the chancery careers of all seventeenth-century Apothecary Chancery boyar directors. See pp. 221-23.
Chancery appointments seem to follow this trend. M. M. Saltykov was a member of an established boyar family: the Saltykovs were a part of the Morozov clan, which had a long history in Russian service; the first member of the clan was made a boyar in 1382. The Saltykov line became a distinct lineage in the late 1550s when Iakov Andreevich Saltykov was made a boyar. From that point on, many Saltykovs became either boyars or okol’nichie. The Saltykovs were thus a well-established boyar clan by the early seventeenth century. The Saltykovs also had a connection to the Romanov clan: Mikhail Fedorovich’s mother was related to the Saltykovs, and Mikhail Mikhailovich Saltykov was her nephew. Saltykov’s appointment to the Apothecary Chancery thus follows the general trend identified by Crummey of appointments favouring old boyar families with prestigious lineages and ties to the Romanov family.

As well as his lineage and political connections, Saltykov also had some administrative experience that may have contributed to his appointment. Before he was appointed to the Apothecary Chancery, M. M. Saltykov had headed both the Armoury and the Silver-casting Chanceries, departments which had related functions. The Silver-casting Chancery (1613-1656) produced silverware for court celebrations; the Armoury (1573-1720s) produced so-called cold weapons (those that do not involve gun powder or explosives) for the Kremlin. Thus both departments primarily involved manufacturing. After he had held the Apothecary Chancery, Saltykov went on to hold the Banditry and Moscow Judicial Chanceries. These departments were not involved with manufacturing, but rather performed judicial functions. The Banditry Chancery (1555-1683) investigated and prosecuted cases of murder, robbery, and theft. The Moscow Judicial Chancery (1615-99) tried cases involving the upper service class, and later also the middle service class. This administrative experience may have contributed to Saltykov’s appointment to the Apothecary Chancery, as he was versed in chancery procedures and the strains of a directorship relevant to running the Apothecary Chancery.

M. M. Saltykov continued in court positions after leaving the Apothecary Chancery in 1620: he was made okol’nichii in 1634, and boyar in 1641, dying in 1671.

Saltykov had been a significant figure in the early part of Mikhail’s reign, but Filaret was not happy with his influence on the tsar, and soon after Filaret’s return (1619) he

51 Kozliakov, *Mikhail*, pp. 146-47.
52 See Appendix 2, pp. 221-23.
54 Poe, *Russian Elite*, p. 444.
fell out of favor. M. M. Saltykov was forced to leave Moscow, only able to return and pick up his career after the death of Filaret in 1633. Significantly, one reason for Saltykov’s disfavor was related to his role as Apothecary Chancery director. In 1616 Mikhail Fedorovich became engaged to Mariia Khlopova, but the marriage never took place, due to Mariia’s sudden illness soon after moving to the Kremlin’s women’s quarter. Saltykov, as head of the Apothecary Chancery, declared her incurable, and the engagement was abandoned. In 1623, Patriarch Filaret opened an investigation into Khlopova’s mysterious illness, which concluded that Khlopova had not been as ill as Saltykov had implied. As a result, Saltykov was exiled. The 1623 investigation cannot have directly led to Saltykov’s loss of the Apothecary Chancery, as it happened three years after Saltykov had left that department. Nevertheless, Saltykov’s involvement in a highly troubling incident involving the health of the tsar’s family may well have caused reconsideration of his suitability to act as Apothecary Chancery director; thus security concerns could have contributed to his loss of the Apothecary Chancery. Saltykov gained his Apothecary Chancery position as a result of his lineage and connections to the Romanov family, and possibly also due to his administrative experience; he lost the post also due to his relationship to the Romanovs and, possibly, security concerns. Saltykov’s career thus most heavily supports the importance of clan, politics and security in appointments to the Apothecary Chancery.

I. B. Cherkasskii (1622-37)

Mikhail’s next choice as Apothecary Chancery director, Ivan Borisovich Cherkasskii, similarly belonged to the old guard of Muscovite boyar families Crummey and Poe identify as being the core of Mikhail’s appointment policy. I. B. Cherkasskii’s clan, descendants of the Grand Prince of Kabarda (a kingdom located on the shores of the Caspian sea), had been in Muscovite service since the late-sixteenth century. The Grand Prince’s son Saltankul, later known as Mikhail Cherkasskii, accompanied his sister Mariia Temriukovna to Moscow, where Mariia married Ivan IV in 1561. As well as their connection to the previous dynasty, the Cherkasskii family also had links to the Romanov clan: one of Mikhail’s aunts, with whom he lived during the Time of

55 Kozliakov, Mikhail, pp. 144-47. The Khlopova investigation file is published in Sobranie gosudarstvennykh gramot i dogovorov, khraniashchikhsia v gosudarstvennoi kollegii inostrannykh del, 4 vols (Moscow: N. S. Vsevolozhskii, 1813-28), iii (1822), pp. 257-66.

Troubles, was Marfa Nikitichna Cherkasskaia. Furthermore, I. B. Cherkasskii was a close associate of Mikhail’s father, Filaret, and was married to one of Filaret’s sisters. Like his predecessor, I. B. Cherkasskii was a member of the established boyar families Mikhail preferred; even more importantly, he also had a relationship with the powerful Filaret.

Also like Saltykov, Cherkasskii had acquired experience in the chancery system prior to his appointment to the Apothecary Chancery. Before acquiring the Apothecary Chancery, I. B. Cherkasskii had headed five other chanceries, Investigations, Petitions, Land Service, Grand Court and Foreign Mercenary, and so was an experienced director. Cherkasskii’s chanceries cover a range of responsibilities. Several Investigation Chanceries existed in the seventeenth century, dealing mainly with litigation involving the middle and upper service classes; its main function was thus judicial. The Petitions’ Chancery (1610-1685) collated petitions and sent them to the chancery into whose competence the issue fell; this was an administrative department. The Musketeers Chancery (1571-1701) administered the musketeers regiments, and, between 1672 and 1683, also collected the musketeers tax. Similarly, Cherkasskii headed another department linked to military administration: the Foreign Mercenary Chancery, which administered all foreigners serving in the Muscovite army, as did its replacement, the Inozemskii prikaz (1623-1701). From the Smolensk war of 1632-34 on, it also administered the new-formation regiments. Cherkasskii also dealt with finance. The Chancery of the Grand Treasury [Prikaz Bol’shoi kazny] (1622-1718) oversaw the collection of direct taxes from the second and third merchant corporations [gostinnaia i sukonnaia sotni] and urban craftsmen. Its competence overlapped that of the Chancery of the Grand Revenue [Prikaz bol’shogo prikhoda], which was closed in 1680.

Cherkasskii thus had more administrative experience than his predecessor: Saltykov had held just two chanceries before acquiring the Apothecary Chancery, whereas Cherkasskii had held five. Cherkasskii also had much wider experience: his five chanceries covered a range of duties, meaning he had dealt with a greater number of administrative issues than Saltykov had. Most importantly, Cherkasskii had run one of the most important of all seventeenth-century chanceries: the Service Land Chancery. Cherkasskii was thus both more experienced, and had run more high profile and significant chanceries than Saltykov. Cherkasskii’s career path does suggests his

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57 Kozliakov, Mikhail, p. 24.
significant administrative background would have been a factor in his appointment to the Apothecary Chancery, and, consequently, that a degree of experience was required from boyar Apothecary Chancery directors.

Cherkasskii’s career is also significant as it set a pattern that later Apothecary Chancery directors followed; indeed, Hans-Joachim Torke sees the collection of chanceries that was first held by Cherkasskii as later being the mark of the court favorite.\(^59\) The Foreign Mercenary Chancery, like the Apothecary Chancery, dealt with foreigners in Russian service. It was long associated with the Apothecary Chancery, being held by F. I. Sheremet’ev, B. I Morozov, I. D. Miloslavskii, I. M. Miloslavskii and N. I. Odoevskii (the only Apothecary Chancery head not to also run this chancery was A. S. Matveev). Tax and finance were also common features in the careers of Apothecary Chancery directors after I. B. Cherkasskii: F. I. Sheremet’ev and B. I Morozov ran the Grand Treasury and the Excise Tax Chancery; I. D. Miloslavskii ran the Grand Treasury, Treasury, and Auditing Chanceries; I. M. Miloslavskii ran the Grand Treasury, the Excise Tax Chancery and the Vladimir, Galich and Novgorod Tax Chanceries; A. S. Matveev ran the Vladimir, Galich and Novgorod Tax Chanceries; N. I. Odoevskii ran the Grand Treasury and the Grand Revenue. Only Ia. N. Odoevskii did not run a finance or tax chancery. Finally, Cherkasskii’s career also set the precedent for the Apothecary Chancery director to head the Musketeers Chancery: it was subsequently run by F. I. Sheremet’ev, B. I Morozov, I. D. Miloslavskii, but not I. M. Miloslavskii, A. S. Matveev, N. I. Odoevskii or Ia. N. Odoevskii.\(^60\) The Musketeers Chancery was particularly important, as the musketeers were the only soldiers permanently stationed in Moscow, and on several occasions during the seventeenth century they were involved in revolts, as in 1648 and 1682. The head of this chancery thus needed to be a trustworthy man who would keep the musketeers in line. Apothecary Chancery directors from Cherkasskii onwards were thus entrusted with significant administrative responsibilities concerning finance, foreigners, and Moscow’s security.

Such groupings of chanceries were also evident elsewhere in the chancery system: the Ambassadorial Chancery director commonly held a certain set of chanceries.\(^61\) The

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\(^{60}\) See Appendix 2, pp. 221-23.

careers of these men were not so strikingly similar by coincidence; they were all following a certain track in the chancery system, which involved heading a specific set of chanceries. It is perhaps significant that several of these chanceries dealt with foreign servitors. Although the court had employed foreigners from at least the 1480s, the large-scale use of foreigners was a phenomenon of late Muscovy, and thus one which required close supervision. It could thus be proposed that the court found it desirable to hand responsibility for the majority of foreign servitors to one man, to better facilitate their supervision as a group.

Alongside specific trends within the Apothecary Chancery collection of departments, it is also noteworthy that the Apothecary Chancery directors were entrusted with multiple important chanceries, especially the finance chanceries and the Musketeers Chancery; it can thus be proposed that in order to head the Apothecary Chancery, a candidate had to be a serious administrator. Such an emphasis on administrative experience would seem to suggest a significant link between the figure of the Apothecary Chancery director, and the administrative process of report production.

Cherkasskii lost the Apothecary Chancery post in 1636, soon after Filaret’s death in 1633, although he kept some of his chancery posts until his death in 1640. As he had been used to replace Saltykov, who was disapproved of by Filaret, it seems his placement in the Apothecary Chancery was strongly linked to Filaret. Cherkasskii’s appointment to the Apothecary Chancery directorship thus seems to have been dependent upon three factors: dynastic links, personal contacts, and administrative experience. It is with Cherkasskii that administrative experience emerges as a significant selection criterion for the Apothecary Chancery directorship.

F. I. Sheremet’ev (1638-45)
Like I. B. Cherkasskii and M. M. Saltykov, Mikhail’s last Apothecary Chancery director, F. I. Sheremet’ev, was a member of an established boyar clan, and also had connections to the previous dynasty, as well as to the Romanovs. The Sheremet’ev clan shared the same founding member as the Romanovs: Andrei Ivanovich Kobyla, allegedly a Prussian prince who entered Russian service in the mid-fourteenth century. In the sixteenth century the Sheremet’ev clan became linked to the ruling family, as Ivan IV’s second son, tsarevich Ivan Ivanovich, married a Sheremet’eva. During the Time of Troubles F. I. Sheremet’ev protected Mikhail, keeping him at his house. He

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was also married to one of Filaret’s sisters. Sheremet’ev’s lineage and connections thus underline the applicability of Crummey and Poe’s views on the importance of the old Muscovite boyar elite to Apothecary Chancery appointment policy.

Like both his predecessors, F. I. Sheremet’ev also had experience in the chancery system before his appointment to the Apothecary Chancery, having headed six chanceries. Like his predecessors, Sheremet’ev had headed the Banditry, Grand Court, Musketeers and Investigations Chanceries; he was the first Apothecary Chancery director to have headed the Chancery of Chancery Affairs and the Chancery of the Seal. The Chancery of Chancery Affairs (1625-43) worked with the Investigations Chanceries, and dealt with a range of other administrative issues. The Chancery of the Seal (1604/5-1722) was the office of the keeper of the seal and treasurer of the seal fees. Sheremet’ev’s chancery career thus supports the view that administrative experience was an important quality for Apothecary Chancery directors.

Unlike Cherkasskii, F. I. Sheremet’ev lost all his chancery positions when he left the Apothecary Chancery on the accession of the new tsar, Aleksei Mikhailovich, in 1645. He was to die five years later. As he continued to be recorded in the boyar books after he lost his chancery postings, it would appear that he did not fall from grace, but rather was replaced as the new tsar made his own appointments. Like Cherkasskii before him, Sheremetev owed his positions to dynastic and personal links as well as experience, and so his career provides further support for the idea that administrative experience was important to the Apothecary Chancery directorship.

B. I Morozov (1645-48)
Boris Ivanovich Morozov was appointed to the Apothecary Chancery at the start of Aleksei Mikhailovich’s reign (r. 1645-76). Aleksei’s appointment policy differed substantially from that of his father. The Counsellor ranks had remained relatively stable in size at around 30 men from the late fifteenth century up to the end of Mikhail’s reign. In contrast, Marshall Poe has shown that Aleksei promoted increasing numbers of people to the Counsellor ranks. Partly this was in response to the growth in the size of the court: during Mikhail’s reign the total number of courtiers was around 2000; during Aleksei’s reign this number grew to nearly 3000. More importantly, Poe’s analysis of

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64 Kozliakov, Mikhail, p. 29.
65 See above, p. 55.
67 Poe, Russian Elite, i, p. 466.
68 Poe, Russian Elite, i, pp. 148-54.
the seventeenth-century boyar ranks also shows that Aleksei also changed the relationship of the ranks. Previously there had been many boyars, okol’nichie and counsellor secretaries, but at most one or two Counsellor cavalrymen. During Aleksei’s reign the numbers of this last rank exploded, with about thirty men becoming Counsellor cavalrymen by the 1670s. All these changes pushed the number of men in the Counsellor’s ranks up to around seventy, making those ranks more than twice as large as they had been during his father’s reign. Poe has proposed that Aleksei promoted so many men to this position as a way of appointing new men to the Counsellor’s ranks.  

As well as changing the overall composition of his court, Aleksei also took a more radical approach to choosing key advisors. Mikhail Fedorovich had promoted men from long-established families who also had links to his family, especially his father, Patriarch Filaret. In contrast, Aleksei distanced himself from Mikhail’s old advisors, and instead relied upon a string of favourites, who were often ‘new men’, rather than scions of established boyar families.

This bold swing towards appointing favourites is apparent in Aleksei’s first choice of Apothecary Chancery head: his former tutor, B. I. Morozov. The Morozov clan had a long service history, but did not have as prestigious a heritage as the Cherkasskiis or the Sheremet’evs, as no member of the clan had ever married into the royal family, and B. I. Morozov did not have any familial relationship with Aleksei when he received his post. When Aleksei married Mariia Il’inichna Miloslavskaiia in January 1648, Morozov married her sister only ten days later, thus effectively cementing his relationship with the tsar. Levin cites Morozov’s relationship by marriage to the tsar as evidence for security concerns dictating the directorship of the Apothecary Chancery; close relations had the best reason to guard the tsar’s health. In fact, Morozov gained this post before his marriage, meaning his familial relationship to the tsar cannot have played a role in his advancement. In Morozov’s case, being an in-law of the tsar was not the cause of his advancements, but rather a strategy to consolidate his position. The case of Morozov thus undermines the primacy of security concerns and family relationships to Apothecary Chancery appointments.

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69 Poe, Russian Elite, i, pp. 13-15.
71 Kollmann, Kinship, pp. 219-21.
72 Sedov, Zakat, p. 97.
Like his predecessors, Morozov had significant directorship experience before being appointed to the Apothecary Chancery, having previously run five chanceries. Like other Apothecary Chancery directors, he had headed the Chancery of the Grand Court, Musketeers and Foreigners’ Chanceries; unlike his predecessors, he had also headed the Tsar’s Artisans’ Chancery and the Excise Tax Chancery. The Tsar’s Artisans’ Chancery (1613-1704) oversaw the production of clothing and jewellery for the tsar and his family. The Excise Tax Chancery was created in 1619, and continued until 1680, when it was absorbed into the Chancery of the Grand Treasury. It controlled the sale of wine, food in taverns, and tobacco.\(^{74}\) It is particularly interesting that this tax chancery was linked to the Apothecary Chancery. Not only was it a tax chancery, it also regulated controlled substances (alcohol), a task in which the Apothecary Chancery also became involved.\(^{75}\) Morozov thus had gained significant experience prior to his tenure in the Apothecary Chancery, some of which was directly relevant to that department’s duties.

Morozov’s tenure as Apothecary Chancery director did not last long. In the same year as his marriage (1648) there was a revolt of the musketeers, which precipitated Morozov’s fall from power and the loss of all his chanceries.\(^{76}\) His fall was significant but not absolute; in contrast to some boyars who fell from power, he continued to be listed in the Boyar Books until his death in 1661.\(^{77}\) Unlike his predecessors in the Apothecary Chancery, Morozov relied on personal contacts and bureaucratic experience for his advancement, without the security that dynastic links could have provided. His rise was mainly due to his personal contacts, but his fall may have partly been occasioned because of his lack of an appropriate lineage. Morozov’s career thus demonstrates the continued, if not heightened importance of administrative experience to the Apothecary Chancery appointment policy under Aleksei.

**I. D. Miloslavskii (1649-66)**

Aleksei’s next choice as Apothecary Chancery head was much less controversial: his father-in-law Il’ia Danilovich Miloslavskii. This familial relationship seems to have been the primary motivating factor in the choice of Miloslavskii. The Miloslavskii family did not have a long service career (Kollman does not include them in her list of Russian boyar families of the fourteenth to sixteenth centuries), so genealogical

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\(^{74}\) Brown, ‘Russian Bureaucracy’, pp. 589, 601.  
\(^{75}\) See Chapter Six.  
\(^{76}\) Kivelson, ‘1648’.  
considerations were not a factor.\textsuperscript{78} Aleksei may well have been caught off guard by losing Morozov, as the cause of his fall (the Musketeers revolt of 1648) was obviously a surprise. When I. B. Cherkasskii left the Apothecary Chancery in 1636, F. I. Sheremet’ev had already taken over some of his former chanceries (Musketeers, Investigations and Grand Court), presumably indicating a plan to also put him in charge of the Apothecary Chancery as well.\textsuperscript{79} In contrast, no boyar had begun to take over Morozov’s departments before his fall. Having no natural successor in place to take over from Morozov, Aleksei had to create one. The appointment of in-laws to key positions was a well-established tradition and, moreover, I. D. Miloslavskii’s interests were best served by pleasing the tsar. Aleksei presumably hoped that this appointment would prove non-controversial, and also provide a loyal ally.

Like all his predecessors, Miloslavskii had held multiple chanceries prior to receiving the Apothecary Chancery: he had run the Investigations, Musketeers, Grand Court and Foreigners’ Chanceries, all four of which were commonly held by the Apothecary Chancery director. In contrast to his predecessors, who had usually run these chanceries for several years before going to the Apothecary Chancery, Miloslavskii only acquired his set of chanceries from December 1648, soon after Morozov’s fall and one year before he was appointed to the Apothecary Chancery (there was a brief interregnum in the Apothecary Chancery before Miloslavskii was installed).\textsuperscript{80} This underlines the impromptu nature of his promotion; he was hastily inserted into Morozov’s old positions.

During I. D. Miloslavskii’s tenure at the Apothecary Chancery, he had two deputies: under-secretary Ivan Desiatogo, and okol’nichii Ivan Andreevich Miloslavskii. The former was a career administrator who remained in the Apothecary Chancery after I. D. Miloslavskii’s departure; the latter happened to be a close kinsman of Miloslavskii. The presence of I. A. Miloslavskii was unprecedented: there had never been an okol’nichii working in the department before, and no one from the Counsellor ranks had previously served there as a deputy director (a role usually filled by a secretary or under-secretary). I. A. Miloslavskii had previously served in the chancery system, in the Petitions’ Chancery under B. M. Khitrovo, but only for one year. He then served for several years in the Post Chancery \textit{[Iamskoi prikaz]}, which administered all aspects of the post and messenger service, at the same time as and subsequent to serving in the

\textsuperscript{78} Kollman, \textit{Kinship}, pp. 199-241.
\textsuperscript{79} See Appendix 2, pp. 221-23.
\textsuperscript{80} See Appendix 1, pp. 219-20.
Apothecary Chancery, under S. B. Prozorovskii. Given the unusual nature of I. A. Miloslavskii’s tenure in the Apothecary Chancery, and that his tenure coincided exactly with that of his kinsman, it can be assumed that I. D. Miloslavskii gave him the post. I. D. Miloslavskii’s appropriation of a job for his kinsman demonstrates that he certainly had both an interest in and control over his deputies; Apothecary Chancery boyar directors had at least some say in appointing their staff, demonstrating some engagement with their administrative responsibilities.

I. D. Miloslavskii held the Apothecary Chancery until 1666/7. The following year sees the last mention of him in the boyar lists, although he did not die until 1688. This fact indicates that he had fallen out of favour with the tsar. I. D. Miloslavskii was also unpopular with others in Moscow. During the unrest of the early 1660s, his name was one of those named by the mob as ‘traitorous’. Philip Longworth also records that the tsar had reprimanded Miloslavskii for his promiscuity in the early 1660s, saying that if he did not curb his philandering, he would be removed from court. All these incidents must have contributed to his eventual fall. I. D. Miloslavskii owed his positions solely to his links to Aleksei, and so lost them when he lost Aleksei’s sympathy. The rise and fall of Miloslavskii thus underline the importance of personal connections and political considerations to Apothecary Chancery appointments; his nepotistic appointment of a kinsman highlights the administrative role of the Apothecary Chancery director.

I. M. Miloslavskii (1666-69)
I. D. Miloslavskii’s fall did not affect other members of the clan: the Apothecary Chancery went next to his relative, I. M. Miloslavskii. Although not as closely related to the tsarina as I. D. Miloslavskii, I. M. Miloslavskii undoubtedly gained his position as a consequence of the relationship of his clan to the throne. His promotion to the Apothecary Chancery appears to have been an improvisation designed to fill the gap left by the departure of I. D. Miloslavskii. At the time one of Aleksei’s most trusted advisors was A. L. Ordin-Nashchokin. Why not, it might be asked, give Ordin-Nashchokin the post? Even more than Morozov, Ordin-Nashchokin was an outsider.

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82 Poe, Russian Elite, i, p. 423.
84 Longworth, Alexis, p. 154.
85 Torke, ‘Oligarchie’, pp. 184-85; Bushkovitch, Struggle, p. 49.
and despised by the more established boyar families.\textsuperscript{86} Aleksei may have been wary of appearing to give him too much power, lest he too be removed as Morozov had been. I. M. Miloslavskii, although not as experienced as previous Apothecary Chancery heads, had the advantage of being an in-law. This gave legitimacy to his posting that simply promoting a favourite did not.

I. M. Miloslavskii did hold many of the offices traditionally occupied by the Apothecary Chancery head – Petitions Chancery, Chancery of the Grand Treasury, Chancery of the Grand Revenue, Excise Tax Chancery, and Foreign Mercenary Chancery. Whereas previously Apothecary Chancery directors had held these offices either before or concurrently with the Apothecary Chancery, I. M. Miloslavskii held no other chanceries concurrently with the Apothecary Chancery, and had only previously held one chancery (the Petitions Chancery).\textsuperscript{87} He was neither as experienced as his predecessors, nor was he entrusted with such great responsibilities during his incumbency of the Apothecary Chancery directorship as they had been. Furthermore, I. M. Miloslavskii did not leave chancery service when he lost the directorship of the Apothecary Chancery, as his predecessors had done. Rather, he continued working in the chancery system for another decade. Previously, the Apothecary Chancery had been awarded to an experienced administrator at the end of their career; I. M. Miloslavskii’s inexperience further underlines his hasty insertion into the post to replace the disgraced I. D. Miloslavskii.

I. M. Miloslavskii’s stint in the Apothecary Chancery was short-lived, lasting only two years. He was not removed from the court lists, so his dismissal from this position was not the result of a serious disgrace.\textsuperscript{88} His dismissal from the Apothecary Chancery coincided with the year of tsarina Mariia Ilyinichna Miloslavskaia’s death (1669). This event appears to have been the catalyst for his removal; with the death of Aleksei’s wife there was no longer any advantage to be gained from having a Miloslavskii in the Apothecary Chancery. I. M. Miloslavskii’s removal from the Apothecary Chancery underlines the fundamental role his familial relationship to the tsarina had played in his acquisition of it. I. M. Miloslavskii’s career thus saw a reversal of the former importance of administrative experience to the Apothecary Chancery directorship, with security concerns, in the shape of a familial relationship to the tsaritsa, coming to the fore instead.

\textsuperscript{86}Bushkovitch, \textit{Struggle}, pp. 54-55.
\textsuperscript{87}See Appendix 2, pp. 222-23.
\textsuperscript{88}Poe, \textit{Russian Elite}, i, p. 423.
A. S. Matveev (1670-75)

On marrying Natal’ia Naryshkina in 1671 Aleksei appointed a new favourite to the Apothecary Chancery, who would prove to be his last appointment to that post: Artamon Sergeevich Matveev. The exact relationship of Matveev to Aleksei’s bride has been the subject of some debate. The previously accepted view had it that Naryshkina was Matveev’s ward, and stayed in his house during the Moscow bride show. Paul Bushkovitch notes that this version was propagated by Matveev’s son, who had no direct knowledge of the events and was writing decades after the events he described. Bushkovitch acknowledges that there was a link between Matveev and the Naryshkin clan, and that he did support Natal’ia’s candidacy in the bride show, but he traces their links rather to a more mundane root: Matveev and Natal’ia’s father served in the same regiments. Matveev was not, then, some sort of substitute father-in-law, but rather belongs to the same category of courtly favourites as B. I. Morozov. Aleksei’s appointment policy veered between favourites and family. The former he appointed by his own choice; the latter he used when circumstances demanded it.

By the time he became the director of the Apothecary Chancery in 1671, Matveev had already been in chancery service for some time. He was used by Aleksei as somewhat of an expert on foreign affairs, as indicated by his directorship of the Ambassadorial Chancery. This chancery is the key to Matveev’s career. Bushkovitch notes that the Ambassadorial Chancery, like the Apothecary Chancery, had certain chanceries associated with it. This practice dated back to Ordin-Nashchokin’s directorship of the Ambassadorial Chancery as, from then on it was common for the Ambassadorial Chancery director to also hold the directorships of the Vladimir Tax Chancery, Galich Tax Chancery, Ukrainian Chancery, and the Prisoner-of-War Chancery. This portfolio was primarily focused on finance. The Vladimir Tax Chancery (1599-1700), the Galich Tax Chancery (1603-1700), and the Novgorod Tax Chancery (1599-1713) dealt with tax collection and the welfare and judicial concerns of the middle service classes for their respective regions; the Prisoner-of-War Chancery (1667-78) received the ransom money taxes for Russian soldiers in Tatar captivity. The Ukrainian Chancery (1622-1722) was not primarily involved with finance, as it administered parts of Eastern Ukraine, including those taken from the Poles in the

89 Bushkovitch, Struggle, pp. 58-59.
90 Bushkovitch, Struggle, p. 98; Bogoiavlenskii, Prikaznye sud’i, pp. 281-82.
Thirteen Years War (1654-1667). These chanceries held by Ordin-Nashchokin were the same chanceries later held by Matveev; Matveev did not hold the collection of chanceries associated with the Apothecary Chancery directorship since the tenure of I. B. Cherkasskii. The career of Matveev departed from the standard Apothecary Chancery career profile, in that he did not head all the same chanceries his predecessors had, but continued the tradition of the Apothecary Chancery director having substantial administrative experience, in particular linked to foreigners, the military and finance.

There is some evidence to suggest that Matveev made a particular mark on the Apothecary Chancery during his tenure there. Matveev is considered to have been a Westerniser and a reformer, and has been linked to changes in the Ambassadorial Chancery, notably the expansion of translating activities there during his tenure. It is thus significant that during his time at the Apothecary Chancery, that department also underwent significant changes. In 1673, soon after the start of Matveev’s term at the Apothecary Chancery, the department was split into two new branches, the Upper or Old Pharmacy, and the New Pharmacy. This evolution would have been a significant bureaucratic task, and would likely have been shaped by the Apothecary Chancery director, and possibly even proposed by him. It is also significant that the change dates to the very start of Matveev’s tenure, perhaps indicating that this reform was initiated by the new director. Thus Matveev may have been responsible for a significant change to the administration of the Apothecary Chancery which, along with his long administrative career and reputation for reform, supports the argument that administrative considerations were central to appointing the Apothecary Chancery director.

N. I. Odoevskii (1675-89)

With the death of Aleksei in 1676, the political scene, and the directorship of the Apothecary Chancery, changed again. This would be the most significant change of power for the Apothecary Chancery, as much of the previous appointment policy and career profile was abandoned after this point. Matveev, never popular with most of the boyars and especially not with the Miloslavskiis, was removed from power. The new tsar, Fedor Alekseevich (r. 1676-82) was both a young tsar (he ascended the throne at age fifteen) and was also frequently ill. His mother’s clan, the Miloslavskiis, thus

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92 See above, pp. 58-59.
94 See Chapter One, p. 20.
played a notable role in his reign. Paul Bushkovich has argued that the power of the Miloslavskii clan was not absolute, as Fedor, especially later in his reign, had favourites chosen from outside the Miloslavskii circle, such as I. M. Iazykov. P. V. Sedov takes a wider view, arguing that the boyars as a group were in the ascendancy during Fedor’s reign, and continued to be powerful until the end of the century. Apothecary Chancery appointments tend to support Sedov’s view, especially in demonstrating continuity between Fedor’s reign and the following joint reign of Peter I and Ivan V.

Fedor’s early death in 1682 left two candidates for the throne: his brothers, Ivan and Peter, both minors. To complicate matters further, they were in fact half-brothers: Ivan’s mother was a Miloslavskaiia, and Peter’s mother was a Naryshkina. Ivan, being the older brother, theoretically had the greater claim to the throne, but foreign observers noted that the boy seemed to be mentally handicapped in some way. Although Russian sources do not directly attest to this, circumstantial evidence leads us to believe that the court elders were also cognizant of this fact. On 27th April 1682, soon after Fedor’s death, a group of boyars and the Patriarch declared their support for Peter’s candidacy for the throne. This was not well received, as many other boyars were uncomfortable with passing over Ivan. The opponents included, of course, the Miloslavskiis and also Ivan’s sister, the indomitable Sofia. Eventually the dual tsar system was set up, with Sofia as regent, but the question remained of which tsar would eventually take sole power, complicating appointments to key posts like the Apothecary Chancery.

Previously, personal relationships with the tsar and dynastic contacts had played a large role in selecting Apothecary Chancery directors. In contrast, the first Apothecary Chancery director appointed after Aleksei’s death, N. I. Odoevskii, was not linked by marriage to the tsar (Fedor was first married to Agafia Simeonovna Gruszewska, and then to Marfa Matveevna Apraksina), nor was he ever considered to be in particular favour with either the tsar or the Miloslavskiis. It is thus necessary to look beyond the standard motives for Apothecary Chancery director selection. It is noteworthy that N. I. Odoevskii was a senior boyar; indeed the Boyar Lists show that N. I. Odoevskii was the most senior boyar from 1670/1 until 1688/9, when he died. This raises the possibility

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95 Bushkovich, *Struggle*, p. 112. A. P. Bogdanov saw Fedor as highly educated, and having similarities to the strong tsar Peter without Peter’s noted cruelty. For a survey of attitudes to Fedor, see Sedov, *Zakat*, pp. 190-93.
97 The Boyar Lists and Boyar Books were registers of court members and their service for the Russian court, kept from the mid-sixteenth century until the eighteenth century, in which vital information was recorded regarding the structure of court ranks, dates of promotions, disgraces (opala), and deaths. Primarily, they were reference texts for
that Odoevskii was appointed to the Apothecary Chancery because of his standing at court.

N. I. Odoevskii had been the most senior boyar during the latter part of Aleksei’s reign, but he did not receive the Apothecary Chancery directorship, as Aleksei gave it to his favourite, Matveev. Aleksei had his suspicions of Odoevskii: in a letter written in 1658 to Iu. A. Dolgorukov, then a general in the Russo-Swedish war (1656-58), Aleksei reprimanded him on disobeying his orders, but assured him of his continued favor as, Aleksei wrote, he believed Dolgorukov had been led astray by Odoevskii. Aleksei Mikhailovich was willing to use Odoevskii in a limited capacity, but he was certainly not a favourite. Immediately after Aleksei’s death, the new tsar, disregarding the usual practice of appointing a relative or a favourite, gave Odoevskii the Apothecary Chancery post. Odoevskii’s appointment is mirrored by other examples of the most senior boyars receiving top posts during this period. The second most senior boyar of the 1670s and early 1680s was Iu. A. Dolgorukov. He was active in chancery service for some time before Aleksei’s death, but it was on the accession of Fedor he was given the Musketeers Chancery. In the latter part of the century then, we should turn to the boyar lists for an explanation of why certain men received top posts.

Far from all boyars reached the position of senior boyar like N. I. Odoevskii; this raises the question of why Odoevskii headed the boyar lists. Seniority within ranks could occur because of genealogy, service considerations, or age. The latter was unlikely to have been a factor in N. I. Odoevskii’s case: although their birth-dates are unknown, ages of the top four boyars can be estimated from the date of entering service, and Odoevskii was not the eldest. M. M. Saltykov, the second most senior boyar entered service in 1612/13, some years before N. I. Odoevskii, who served from 1627. The next three boyars listed, I. I. Saltykov and Iu. A. Dolgorukov, all entered service in the same year as Odoevskii, 1627. Service also does not explain his location at the top of the list: by 1670 (when he first headed the boyar list) he had run only the Kazan’ and Siberian Chanceries, neither of which held particular significance. Neither age nor chancery service seem to have played a significant role in Odoevskii’s seniority.

administrators, so that when boyars petitioned for higher ranks of entitlements, the administrators could accurately determine their current status. As boyars progressed through their careers, they would move up the listings of boyars. See Poe, *Russian Elite*, i, pp. 15-18, 222-305.

98 Bushkovitch, *Struggle*, pp. 31-32.
100 Poe, *Russian Elite*, i, pp. 404, 430, 443-44.
Odoevskii’s rise to the top of the boyar lists was most likely due to his ancestry. The Odoevskii clan was of some importance: they were members of the Riurikid dynasty, former princes of Chernigov.\textsuperscript{101} N. I. Odoevskii’s clan had been in Muscovite service since the late fifteenth century: Semen Iur’evich Odoevskii served the Prince of Moscow until his death in 1473, and the clan is recorded as being in Russian service in an agreement [\textit{dokonchanie}] between the Lithuanian ruler Aleksandr and the Prince of Moscow in 1494. Members of the clan are listed as performing Muscovite military service, including commanding the key formations, from the early sixteenth century onwards. Although the Odoevskii could not claim a direct link to the previous dynasty, they did make valuable marriage alliances in the sixteenth century. One woman of the Odoevskii clan was married to Ivan IV’s key adviser Peter Ivanovich Golovin and another, more importantly, to Vladimir Staritskii, a member of a cadet branch of the ruling family.\textsuperscript{102} This genealogy was undoubtedly vital to N. I. Odoevskii’s position at the top of the boyar lists, and so his position in the Apothecary Chancery.

In other ways, the career of N. I. Odoevskii reproduced the pattern of those earlier Apothecary Chancery heads. Like the majority of seventeenth-century Apothecary Chancery directors, N. I. Odoevskii finished his career in the Apothecary Chancery. He was the only Apothecary Chancery head after the 1670s to hold the Foreign Mercenary Chancery, or the Chancery of the Grand Treasury and the Chancery of the Grand Revenue, chanceries that had frequently been part of the profile in the earlier period. Odoevskii also continued some of the features first seen in Matveev’s career, like holding regional Chanceries concurrently with the Apothecary Chancery; he headed the Kazan’ (1552-1709) and Siberian (1637-1725) Chanceries that dealt with, respectively, the former Khanates of Kazan’ and Sibir’.\textsuperscript{103} N. I. Odoevskii can thus be seen as the last holder of the traditional Apothecary Chancery director’s profile.

N. I. Odoevskii made some changes in the Apothecary Chancery: one year after gaining the post his kinsman, Prince Vasilii Fedorovich Odoevskii, was appointed his deputy.\textsuperscript{104} Like his predecessor I. D. Miloslavskii, N. I. Odoevskii apparently used his new position to appoint a relative to a key post. Unlike in the case of Miloslavskii’s nepotistic appointment, V. F. Odoevskii in fact had no previous chancery experience,

\textsuperscript{101} Bushkovitch, \textit{Struggle}, p. 32.
\textsuperscript{102} A. A. Zimin, ‘Sluzhilye kniaz’ia v Russkom gosudarstve kontsa XV-pervoi treti XVI v.’, in \textit{Dvorianstvo i krepostnoi stroi Rossii XVI-XVII vv.} ed. N. I. Pavlenko et al. (Nauka: Moscow, 1975), 28-56 (pp. 29-31).
\textsuperscript{103} Brown, ‘Russian Bureaucracy’, pp. 595, 605.
\textsuperscript{104} Bogoiavlenski, \textit{Prikaznye sud’i}, p. 281.
although he would go on to work in several other chanceries later in his career.\textsuperscript{105} Why should it be that I. D. Miloslavskii and N. I. Odoevskii exerted their influence for nepotistic goals, when the other Apothecary Chancery directors apparently did not? The answer lies in the balance of power between these men and the tsar at the time of their appointment. I. D. Miloslavskii was appointed by Aleksei after the disastrous events of 1648, which had lost Aleksei his key favourite (Morozov). As he was the tsar’s father-in-law, Miloslavskii had a relatively secure position at court. N. I. Odoevskii was appointed after the death of a strong tsar (Aleksei), and during a period of boyar ascendancy, when he personally headed the boyar lists. Both men were thus in charge of the Apothecary Chancery at a time of boyar strength and crown weakness. N. I. Odoevskii and I. D. Miloslavskii took advantage of their dominance in power relations at the time of their appointment in order to make personnel changes.

This new boyar power was also reflected in the longevity of N. I. Odoevskii in this post. Whereas when the tsars Mikhail and Aleksei had died, their Apothecary directors had lost their posts, on the death of Fedor in 1682, Odoevskii retained his. Odoevskii’s retention of his post can be attributed partly to the continued, if not increased, instability of the crown. In previous periods the appointment of a close relative by marriage to the Apothecary Chancery contributed to the stability of the court by lessening the risk that he might collude in poisoning the tsar. But in the case of the two tsars, neither the Naryshkins nor the Miloslavskiis could promote one of their own to the Apothecary Chancery, as this would at best be blocked by the other side, and at worst turn the wrangling into outright civil war. Odoevskii thus continued to be a good candidate, since he was not directly involved in the Naryshkin-Miloslavskii power struggle. Moreover, Odoevskii’s continued tenure of the Apothecary Chancery speaks to the continued, if not heightened, pertinence of security concerns to Apothecary Chancery appointment policy.

Although there is little evidence about the political stance of Odoevskii, what does exist indicates that he supported Peter.\textsuperscript{106} Given the role that Sofia, sister to Tsar Ivan and regent, played in promoting Ivan’s interests, why would she not attempt to replace him with another ostensibly neutral boyar more amenable to her ideas? Lindsey Hughes has suggested that, whilst Sofia was a formidable presence at court, she did not have

\textsuperscript{105} Bogoiavlenskii, \textit{Prikaznye sud’i}, p. 281.
sufficient power to risk turning powerful boyars against her.\textsuperscript{107} This certainly fits with the evidence in this case. Odoevskii was already ensconced in his chancery posts in 1682, and as the most senior boyar at court he would have been a useful ally and a dangerous enemy. It was thus politic for all concerned that Odoevskii retain his posts, which he did until 1688, becoming the first Apothecary Chancery director to die in office. In stark contrast to all of his predecessors, N. I. Odoevskii did not gain the Apothecary Chancery through links with a specific tsar, and so did not lose that position through a fall from grace or the accession of a new tsar. Instead, it was his long administrative career, his standing with the boyars and his neutrality in the succession crisis that were the most important factors in his success. Odoevskii’s career does demonstrate some continued significance of administrative experience to Apothecary Chancery appointments, but, especially during the joint reign of Peter I and Ivan V, it was security concerns that were paramount.

\textit{Ia. N. Odoevskii (1688-97)}

After the death of N. I. Odoevskii, his position was taken over by his son, Iakov Nikitich Odoevskii. This was another first for Apothecary Chancery appointments; never before had a son succeeded his father to this position. Ia. N. Odoevskii was also an important boyar, although he never headed the boyar lists as his father had done. In the year of his father’s death (1688/89), he was ranked fifth. In the following year he climbed to fourth, and by 1690/91 he was listed second, where he would stay until his death in 1696/7.\textsuperscript{108} It seems likely that Ia. N. Odoevskii did not receive the post on his own merits, but rather for being his father’s son. Given the continued tensions between the two tsars’ factions, it may have been seen as less problematic to allow the post to be inherited than to open it up to a politically motivated candidate.

Despite inheriting the Apothecary Chancery, Ia. N. Odoevskii’s career pattern did not follow that of his father. Like previous directors, he ended his career in the Apothecary Chancery. He also headed the Investigations Chancery, as had earlier directors. But his only other chancery, the Kazan’ Chancery (1552-1709), was a regional chancery, a reflection of the continued influence of Matveev’s career on the profile. Even more tellingly, Odoevskii ran only these three chanceries during his career, and none of them at the same time. This was a far cry from the careers of F. I. Sheremet’ev, and I. D. Miloslavskii, who had each run seven other chanceries at the

\textsuperscript{107} Hughes, \textit{Sophia}, p. 101.

\textsuperscript{108} Poe, \textit{Russian Elite}, i, pp. 299-340.
same time as heading the Apothecary Chancery, or even I. B. Cherkasskii and B. I. Morozov, who had run, respectively, five and four.109 There were threads of the old tradition remaining in the career of Ia. N. Odoevskii, but the essence of that tradition – the domination of multiple important chanceries by one experienced administrator – was lost.

Ia. N. Odoevskii also died in office, like his father. It was, politically speaking, a serendipitous death. Ia. N. Odoevskii died in the same year as Ivan V (1696), and so the same year that Peter I took sole possession of the throne. Peter then chose not to fill the position with a boyar, but to leave it in the hands of professional administrators, initially Counsellor secretary Prokofii Bogdanovich Voznitsyn, and later Counsellor secretary Andrei Andreevich Vinius.110 What he would have done if he had been faced with a long-term incumbent is thus unknown. Ia. N. Odoevskii, even more so than his father, gained his position through boyar strength and neutrality, not through links to the tsar or administrative experience. From the beginning of Fedor’s reign (1676) until the start of Peter’s sole rule (1696), Apothecary Chancery appointments support Sedov’s view on the power of the boyars.111 These final Apothecary Chancery appointments thus primarily show the importance of politics and security. Administrative experience was important to Apothecary Chancery appointment policy during much of the seventeenth century, but it was frequently subordinated to other issues.

**Conclusion**

From 1622 to 1697, the period in which the Apothecary Chancery directorship was held by boyars, appointments seem to have been made according to a combination of security concerns, court politics, and administrative experience. The first consideration, security, was a constant concern, and one which appears to have been primarily, though not exclusively, addressed by the use of close relations. Mikhail Fedorovich appointed men to the department from a ruling clique of boyars to whom he had close links; in times of crisis Aleksei Mikhailovich would appoint in-laws rather than his preferred favorites. In contrast, during the joint reign of Peter I and Ivan V, boyars were appointed who were not related to the tsars, as then they were also peripheral to the succession struggle. These facts all support the views of Levin and others who see security concerns as a significant motivating factor in Apothecary Chancery

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109 See Appendix 2, pp. 221-23.
110 See Appendix 1, pp. 219-20. Data for the very late seventeenth century and early eighteenth century is patchy.
111 Sedov, Zakat, p. 6.
directorship appointments.

However, it is important to consider a number of other factors affecting appointment policy. Appointments also follow a shifting of the balance of power between different groups at court across the seventeenth century, reflecting three distinct types of power relations at the seventeenth-century Russian court. Under Mikhail Fedorovich, there was an alliance between the tsar and a particular set of boyars; power rested with this circle. Aleksei Mikhailovich’s appointment of personal favorites shows notable strength of the crown at the start and end of his reign. In contrast, at other points during Aleksei’s reign, and, most notably, after his death, most power resided with the boyars as a group. Boyar power would thus appear to have often been a significant factor in Apothecary Chancery appointments.

Alongside the security and political aspects of Apothecary Chancery appointments, there is also some evidence to support the importance of administrative experience. Except during crises, men appointed to the Apothecary Chancery directorship typically had already served in multiple other chanceries, sometimes for several years before their appointment, with the Apothecary Chancery often being the last chancery to which they were appointed. It was also common for directors to hold several other chanceries concurrently with their tenancy at the Apothecary Chancery, signalling that the Apothecary Chancery directorship was a senior chancery position given to one with significant administrative experience. It is noteworthy that the directors’ duties theoretically included ordering reports, and disseminating them throughout the chancery system. Given the importance of administrative experience to the selection of Apothecary Chancery directors, it can be proposed that these directors did indeed play an active role in report production and dissemination, a role that will be further considered in Chapter Four. Also vital to report production were the medical experts employed in the Apothecary Chancery, who are the subjects of the following chapter.
Medical practitioners were vital for the fulfillment of the Apothecary Chancery’s duties, including the production of medical knowledge. These men, born and educated in Europe, constituted the link between the Apothecary Chancery and Western medicine, but their value as intermediaries has been called into question. Early work on Apothecary Chancery medical practitioners was highly polarised, viewing these men as either enlighteners or immoral adventurers, assessments strongly linked to the investigators’ evaluation of Europe’s influence on Russia. More recent work by Eve Levin and Sabine Dumschat has taken a more nuanced approach to both the practitioners themselves and Western medicine, noting that the practitioners in question were of very different backgrounds, and, most probably, varying levels of training and skill. Levin has refocused the debate over the quality of Western medicine at the Russian court by raising the previously unexplored question of why the Russians chose Western medicine over native healing practices, a decision she attributes to the security concerns of the court rather than an explicit resolution that Western medicine was better than native practices. Dumschat has noted that ideas of medical competency in Russia were influenced by ideas of professional identity held by the practitioners, highlighting the essentially subjective nature of medical competence in this period. The works of Dumschat and Levin thus move the debate away from simplistic value judgements of Western medicine and its representatives, and towards greater engagement with the specific nature of Russian links to European medicine.

A fundamental problem for the Apothecary Chancery was the recruitment and selection of new medical staff. In 1627 two medical practitioners, Doctor Kaufman and apothecary Krivei, arrived in Russia seeking employment in the Apothecary Chancery. They were both denied employment and ejected from the country in part, the report notes, because Kaufman and Krivei were ‘people [who are] unknown and without attestations’. This telling example illustrates the high value the Russian court placed upon recommendations from familiar individuals as a method of ensuring competent and trustworthy medical practitioners. The importance of recommendations also supports Levin’s identification of security as a driving force in Russian court medical

1 The historiography is summarised in Dumschat, Mediziner, pp. 25-48.
4 Dumschat, Mediziner, pp. 19, 328.
5 ‘люди неведомые и свидетельствованных [sic]’, Richter, Geschichte, ii, p. 68-69.
development. The court relied upon links it had developed with Western Europe to provide recommendations: diplomatic and mercantile contacts were frequently drawn on, as were existing and former medical staff members, who recommended both family and colleagues. These contacts can be seen as networks of trust, linking the Russian court to their potential employees through persons in whom the court already had faith.

In the later seventeenth century such networks proved insufficient to sustain recruitment, and potential staff members were recruited without recommendations, necessitating examination by existing employees. Assessments of medical competence fundamentally involve judgements on what is appropriate medical knowledge, a process bound up with the concepts of professional identity to which Dumschat has drawn attention. As with networks of trust, ideas of professional identity linked the Apothecary Chancery to Europe, as it was European medical theories and concepts of appropriate practice on which those ideas of professional identity were based. In contrast to diplomatic and mercantile networks, professional identities involved a more specialist assessment of medical competency. Levin’s focus on security highlights Russian concerns over medical practitioner recruitment; Dumschat’s emphasis on professional identity calls attention to how the medical practitioners themselves influenced this process. Here attention will be devoted to both aspects in order to establish the nature of Russia’s links to the European medical world.

**Apothecary Chancery Medical Practitioners**

The Apothecary Chancery employed medical practitioners of various professions, which, like all Muscovite servitors, were arranged hierarchically, as shown in the pay lists of Apothecary Chancery staff. The highest rank was that of physician [sng. *dokhtur*, pl. *dokhtury*]. In the early seventeenth century this post was exclusively occupied by university-educated foreign physicians, although later the Apothecary Chancery promoted some men to this rank from among the surgeons. Such promotions were rare, and the post continued to be dominated by academic physicians into the early eighteenth century. These men were most commonly English in the early part of the century, with German and Dutch physicians taking precedence later on, a shift linked to Russia’s diplomatic relations with those countries.⁶ Their education was received from one of the number of early modern universities with medical faculties.

Physicians in the Apothecary Chancery treated the most important patients, were the first group to produce reports, and were paid the highest wages. There was some

significant variation of salary within the physicians’ range. At least three physicians, Drs Pontanus, Rinhuberg and Kellerman, were initially paid only 170r per annum.\(^7\) In stark contrast, some physicians were paid as much as 1114r per annum. This deviation seems to have been linked to status within the department: Maria Unkovskaya notes that the salary of 1114r was reserved for the first physician; junior physicians were commonly paid 460r per annum.\(^8\) This hierarchy of salaries was not absolute: when Blumentrost was senior physician in 1682 he was paid just 730r per annum, far less than his predecessors.\(^9\) Physicians, especially senior physicians, also received a range of other provisions. The earliest physician to be granted the top pay bracket of 1114r per annum was Dr Arthur Dee, son of the renowned Elizabethan magus John Dee, who also received a horse, forage allowance, food and drink, and a large town house previously belonging to Prince Khvorostin.\(^10\) Such provision of accommodation for top physicians by the court was relatively common, often with the house being gifted to the physician, sometimes along with building monies for capital improvements. Practitioners working for the court for long periods could receive pay rises. In the first half of the seventeenth century, practitioners mostly stayed within one grade of medical practice, and were hence limited in what they could be paid according to the norms of that grade. Dr Wendelin Sybelist was initially paid 1080 rubles a year, but this was later increased to 1114 rubles, in line with the pay of his colleague Dee.\(^11\) The physicians’ pay thus reflects their position at the top of the Apothecary Chancery’s hierarchy of medical practitioners, and their leading role in its duties.

Beneath the physicians were the apothecaries [pl. aptekari, sng. aptekar’], men with practical training in the properties of ingredients and the preparation of medicines. Unlike the physicians, apothecaries did not receive their knowledge through university study, but through apprenticeships to practising apothecaries as part of a guild system. Typically, apothecaries did not have formal qualifications like the physicians’ degrees, but could provide recommendations from their former master and their guild. Apothecary Chancery apothecaries worked with assistants, the alchemists [pl. alkhemisty, sng. alkhemist] and distillers [pl. distiliatory, sng distiliator]. Here the term ‘alchemist’ denotes someone skilled in the production of complex medicines, often through techniques commonly associated with chemical medicines such as distilling,

\(^7\) Unkovksya, *Brief Lives*, pp. 33, 40, 41.
\(^8\) Unkovskaya, *Brief Lives*, p. 44.
rather than a seeker of the philosophers’ stone. Pay for the distillers was typically between 110 and 130 rubles per annum; apothecaries received more, between 140 and 360 rubles per annum.¹² Apothecaries and their assistants were initially subordinated to the physicians. By the late seventeenth century the situation had changed, with apothecaries composing reports, long a privilege of the physicians, and branching out into officially sanctioned private practices and producing medical books.¹³

Lowest of the Apothecary Chancery’s permanent medical staff were the surgical ranks, including field surgeons [pl. poleuye lekari, sng. polevoi lekar’], barber-surgeons [pl. barbery, sng. barber], and specialists such as bonesetters [pl. kostopravy, sng. kostoprav] and oculists [pl. okkulisty, sng. okkulist]. Such specialisms were grouped together by a shared concern with the external body and injuries, rather than the internal medicines produced by apothecaries and prescribed by physicians. Anatomy was taught at early modern universities, but surgeons typically learnt their skills in the same way as the apothecaries, through guild-approved apprenticeships. In Russia, these men most frequently treated the lower ranks of Muscovite servitors, especially injured soldiers. Their pay was the lowest of all the permanent ranks: 50 rubles per annum was a typical salary for these men, although they could receive as much as 140 rubles per annum.¹⁴

Some surgeons were selected to treat the tsar and his family during their bleedings. Venesection at court was a ceremonious affair, with multiple medical practitioners and courtiers in attendance, all of whom received generous gifts, presumably as an added incentive for a successful treatment. A physician was in attendance to monitor the patient’s health while a surgeon made the actual incision.¹⁵ Apart from such ceremonies, the duties of the surgeons were primarily restricted to more lowly Muscovite servitors, especially soldiers.

From 1654 on, the Apothecary Chancery also had apothecary and surgery pupils [pl. ucheniki aptekarskogo i lekarskogo dela, sng. uchenik aptekarskogo i lekarskogo dela], men usually taken from the musketeers’ ranks who were apprenticed to a foreign practitioner. Little is known about these men or what exactly they were taught, but it seems from their later practice that they were being trained for the lowest ranks, especially field surgery.¹⁶ Their pay reflected their position at the bottom of the ranks: the lowest-paid pupils were paid just 1 ruble per annum, although they could receive as

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¹³ See Chapter Five and also Chapter Six, pp. 192-93.
¹⁴ Unkovskaya, Brief Lives, pp. 64-108.
¹⁵ See for example RGADA 143, op. 2, ed. khr. 669.
much as 18 rubles 10 *altyn* per annum.\(^{17}\) The pupils were to assist their masters during their training, and then take roles as surgeons and apothecaries in their own right once pronounced qualified.

It should be noted that even when Russians began to work as medical practitioners, the terminology of the positions was distinctly foreign.\(^{18}\) *Dokhtur* and the other terms mentioned above were clearly taken directly from Western European naming practices. It is particularly interesting that the Russian word for distiller was *distiliator*, as the practice of distilling itself, although also a foreign import, acquired Slavonic terms: *perepushchenie*, *perepuskat*.\(^{19}\) Also of interest is the term for bonesetter, *kostoprav*, a composite term with an identical meaning to the European name. The overwhelming prevalence of foreign loan words in Apothecary Chancery terminology further underlines that department’s fundamental reliance upon European medicine.

Alongside their Apothecary Chancery duties, these distinctly foreign medical practitioners had some limited rights to conduct private practice.\(^{20}\) Private practice brought these court medical practitioners into contact and even conflict with other healers working in Muscovy. Evidence for healers outside the court is scattered and incomplete, but some significant patterns emerge. There were many ‘folk’ healers with no formal training or qualifications, who prescribed medicines based upon vernacular knowledge of indigenous plants, often with some kind of prayer or magical incantation as a part of the remedy. From at least the early seventeenth century, certain markets in Moscow were selling herbal medicines, with the tacit approval of the authorities but apparently without a formal system of approving traders and medicines.\(^{21}\) Thus the court medical practitioners were not only different because they were overwhelmingly foreign; they were also the only group of medical practitioners in Russia with some claim to formal medical training. As the Russian court used these foreign experts, they had to construct systems both to recruit them, and to verify that their claims of expertise and competence were reliable.

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\(^{19}\) See Chapter Five, p. 148-49.

\(^{20}\) See Chapter Six, p. 185.

\(^{21}\) On the herbal market trade and its eventual curtailment, see Chapter Six.
Established Networks of Trust

Some of the earliest long-term contacts with the West were diplomatic, as Muscovy established regular contact with other European princely courts. From the late fifteenth century onwards these relationships were exploited as a method of recruiting foreign experts, including medical practitioners. Courts typically employed a variety of specialists, and so the Russian court expected their counterparts to draw on their own experience to recommend suitable employees. Provision of experts, particularly medical practitioners, was a common part of diplomacy, serving as an affirmation of friendly relations. Recruitment of medical practitioners through diplomatic correspondence thus served a dual purpose: to fulfill the Russian court’s need for medical practitioners, and to strengthen diplomatic relations with friendly nations.

Diplomacy remained a part of medical staff recruitment for a long time: Ivan IV sent several such requests to Elizabeth I of England in the mid-sixteenth century; in 1685 Tsars Peter and Ivan wrote to the Holy Roman Emperor to request skilled physicians. The importance of royal recommendations throughout the seventeenth century is further supported by a decree [uказ] confirming previous practice, in which tsars Peter and Ivan note that physicians are expected to arrive in Moscow with such letters. Requests for experts sent to European courts typically asked for physicians (and less frequently surgeons or apothecaries) who were skilled or educated, often indicated by the adjective ‘learned’ [sng. учёный]. This characteristic is specified in the instructions given to Ambassador Fedor Andreevich Pisemskii by Ivan IV on the eve of his 1582 trip to England. Similarly, in 1598 Boris Godunov wrote to Queen Elizabeth of England inviting any and all ‘wise and skilled persons’, including physicians, who had such a desire to come and work at his court. Despite such a stress on formal expertise in these documents, medical practitioners recruited through courts and who held the proper diplomas were not subject to examinations, presumably indicating that the word of the patron was sufficient proof of their talents.

A second criterion frequently stressed in the diplomatic correspondence on recruiting medical practitioners was the trustworthy nature of the physician under discussion. The most commonly used adjective in Russian documents on this point is

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22 Dumschat, Mediziner, p. 178.
24 Florinskii, Travniki, p. 196.
25 Tolstoi, Snoshenii, p. 191.
26 ‘мудрые и мастеровые люди’, Richter, Geschichte, i, p. 437.
27 Unkovskaya, Brief Lives, p. 11.
‘worthy’ [sng. dostoinyi], indicating a good moral character. This characteristic is used in Pisemskii’s instructions to refer to the physician Robert Jacob, who had been sent to Russia by Elizabeth in 1581 and to whom Pisemskii was to refer as an example of a good physician. A letter from Tsars Ivan and Peter to Leopold, Holy Roman Emperor, in 1685, stressed that they needed physicians of such good character to whom we can entrust our health without any fear [lit. suspicion].

Alongside concerns about relevant expertise, the Russian court was also significantly concerned with the moral character of a potential employee as part of their precautions to secure the tsar’s personal safety.

Diplomacy provided the basis for trusting new medical recruits; conversely, diplomatic problems could cause issues with recruitment. According to John Appleby, the English physician Timothy Willis was the first person to submit to an examination of his medical competence in Russia in 1599, an incident which may have been motivated by diplomatic tensions between Russia and England. Willis arrived in Moscow without books or medical supplies, claiming that he had sent them by a different route. Willis was later rejected and sent out of Russia, ostensibly because of his lack of medical supplies. Zagoskin has taken this case as an example of the high standards of medical care at the Russian court, interpreting the rejection of Willis as evidence of him not meeting such requirements. However, Levin has proposed a different reading of these events, focused on the diplomatic aspect of Willis’ mission. The Willis case can thus be seen both as a medical issue and as a diplomatic issue.

Willis’ diplomatic mission was serious: he had been entrusted with some missives pertaining to the use of British ships by Poland, Russia’s enemy. In 1592 Sigismund III Vasa, then already King of Poland and Grand Duke of Lithuania, was crowned King of Sweden on the death of his father, King John III. Sigismund’s ascension to the throne

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28 Tolstoi, Snoshenii, pp. 190-93.
29 ‘cui curam sanitas nostri sine ulla suspicione confidere possemus’, Richter, Geschichte, ii, p. 150.
was challenged by his uncle, Duke Charles, who had a claim to the throne and who was also unhappy about a Catholic ascending to the Swedish throne. Tensions came to a head in the War of Deposition against Sigismund, fought 1598-99, which resulted in Sigismund’s deposition by Parliament in July 1599, and the election of his uncle, who became Charles IX. In 1598 Sigismund had requisitioned English ships then in Danzig to mount a (unsuccessful) naval expedition to Sweden. Sigismund’s use of English ships was seen by the Russian court as English support for their traditional enemy, Poland. At this time, England was a significant Russian ally, so the possibility of English cooperation with Russia’s regional rival Poland was a serious diplomatic problem.

The Russians were unhappy with Willis’ instructions on the issue of the ships: Willis was only to deliver the letters to Tsar Boris, and give a set explanation; he had not been given leave to enter into any negotiations concerning this, or any other matter. On his arrival, Willis was interrogated by Vasilii Shchelkalov, secretary of the Ambassadorial Chancery, on both his medical qualifications and the issue of the ships. Eventually, Willis was rejected and sent back to England. Levin concludes that it was diplomatic frustration, rather than high medical standards, that caused this rejection.33 This also seems to have been Queen Elizabeth I’s reading of the situation, judging by her missive of 1601 in which she makes a significant juxtaposition of Willis’ ejection and his diplomatic task.34 She later sent Sir Richard Lee to Russia in 1600-1 to renegotiate over the issue of the ships.35 Given the seriousness of the diplomatic situation, Levin’s assessment that this incident seems to have been motivated by diplomatic rather than medical concerns is persuasive. Diplomatic contacts were vital to the Russian court’s recruitment strategy, but this method was vulnerable to disruption.

In addition to the possibility of disruptions, the number of practitioners who were recruited through diplomatic contacts was always small. When Elizabeth I sent medical practitioners to Russia in the late sixteenth and early seventeenth centuries, it was usually only one or two at a time.36 Similarly, only two men, Jacobus Paludanus and the apothecary Henrick Jassen, came to Moscow from Moritz von Oranien in 1616.37 Requests from later in the century were no more productive: Peter and Ivan’s request to Holy Roman Emperor Leopold I in 1685 likewise only resulted in two new employees,

34 Richter, Geschichte, i, pp. 445.
37 Dumschat, Mediziner, p. 179.
Gregorius Carbonarius von Bisenegg and Iakovos Pylarinos.\(^{38}\) Court recruitment was good for producing reliable medical practitioners, but not for large-scale recruitment.

Particularly in the latter part of the seventeenth century, as the Apothecary Chancery grew in size and the need for practitioners outstripped the supply from European diplomatic contacts, men were commissioned by the Apothecary Chancery to travel to Western Europe to recruit medical practitioners. One such group to whom this task was often entrusted were merchants, usually those with whom the court and the Apothecary Chancery had previously had dealings. Merchants formed a significant link between Western Europe and Muscovy, as they frequently travelled between the two. Moreover, merchants sometimes acted as *de facto* ambassadors for their countries, like the earliest representatives of what would become the Muscovy Company, who established trade and diplomatic links between England and Russia in the sixteenth century. Using merchants as emissaries indicates that a significant degree of trust was placed in these men by both countries. Thus merchant circles, like diplomatic circles, formed a network of trust linking the Russian court to Western Europe through the Europeans with whom they had frequent contact. It was this established trust between Russians and certain merchants that led to their role in recruiting medical practitioners.

Merchants could be commissioned to search for staff on behalf of the Russian court, resulting in larger numbers of new recruits than requests to princely courts. According to Dumschat, merchants were used for four significant ‘recruitment drives’ of medical practitioners: in 1547, 1600/01, 1678 and 1695/96. In 1547 Hans Schlitte was able to recruit several men, but they were denied passage to Russia. Reinhold Beckmann had more success in 1600/01, when he was able to sign up four physicians to enter Russian service. The most successful recruiter was William Gordsen, who undertook recruitment drives in 1678 and 1695/96. He was able to enlist ten men in 1678, and a further nine in 1695/6. The following year Peter the Great himself became involved in mass recruitment, bringing back more than fifty surgeons from his Grand Embassy to Western Europe.\(^{39}\) Merchants were thus able to provide more men than courtly links, but not by a large margin.

Unlike medical practitioners who were recruited from courts, those recruited by merchants were subject to examinations.\(^{40}\) Several surgeons arrived together in Moscow in June 1679, having been recruited by William Gordsen. None of the men produced

\(^{38}\) Dumschat, *Mediziner*, p. 179.

\(^{39}\) Dumschat, *Mediziner*, pp. 185-89.

\(^{40}\) See above, p. 81.
recommendations, and so the examinations served as the only proof of their qualifications. Each of the ten men stated their name, country of origin, medical specialism and where, how and from whom they had learnt their skills, along with a list of specific ailments they could treat, and the period and salary for which they had agreed to serve the Russian court. Iurii Martynovich Gensen said that he was a surgeon, could heal wounds, remove bullets, and set bones. He also had some knowledge of eye diseases. Gensen’s statement is typical: examinations focused on practical skills relating to curing specific diseases. The use of examinations in the case of men recruited by merchants suggests that, although mercantile links could provide more men than court links, such recruitment was viewed as less reliable.

Fellow royal patrons and merchants were thus the preferred sources from whom the Apothecary Chancery recruited medical practitioners. Why were these two groups particularly relied upon to provide reliable medical practitioners? It is appropriate here to return to Levin's argument that Western doctors were employed by the Russian court due to security concerns. Physicians who had previously worked at another court and gained and kept the trust of a monarch could be trusted with courtly medical duties in the future. Similarly, the Russian court constantly dealt with foreign merchants, who sold them necessary goods and also acted as emissaries of their homelands, and so the court had faith in these men. In their earliest attempts to acquire medical experts, the Russian court relied upon established networks of diplomatic and mercantile contacts in whom they already had trust, a process that they evidently believed provided trustworthy servitors, but which was always limited in scale.

Networks of Professionals

The growing demand for the Apothecary Chancery’s services during the seventeenth century necessitated changes to recruitment strategy, namely the growing importance of the experts themselves in recruiting and selecting new employees. Networks of trust were also important here, as the Russian court’s existing medical experts drew upon kinship ties to recommend new staff. Kin, meaning extended family networks, was a vital part of Muscovite society. Nancy Kollmann has shown how boyar clan relations and marriage alliances structured Russian society, and also shaped court factions, which typically ran along clan lines. Similarly, kinship ties were also important to foreign

41 RGADA f. 143, op. 2, ed. khr. 1281; Mamonov, Materialy, iv, pp. 1178-81.
43 Kollmann, Kinship. See also Chapter 2, pp. 47-48.
groups in Russia. Kinship was thus a vital network of trust, structuring both society and governance in Muscovy.

Family connections between applicant and referee were a constant feature of professional recommendations made to the Apothecary Chancery. In 1685 the apothecary Christian Eichler and the physician Laurentius Blumentrost both petitioned for places in the Apothecary Chancery for their sons. The file on Blumentrost junior is much more detailed than other recommendations, as the Apothecary Chancery requested further information after receiving Blumentrost senior’s initial petition. Blumentrost senior then wrote a letter describing how his son had learnt medicine from him, as well as some surgery and chemical medicine [khimicheskoe delo]. Blumentrost stated that he was recommending his son as he himself wished to retire soon, and he thought that his son would be a good replacement. Blumentrost junior had studied in various places, including Paris’ famous Sorbonne University, where he read anatomy. Blumentrost junior had no doctorate, but this Blumentrost senior attributed to their peripatetic lifestyle, confidently stating that his son could attain such a qualification if he had an opportunity to do so. Despite his lack of formal qualifications, Blumentrost senior presented his son as a learned physician.

Similarly, Christian Eichler also noted that his son had no formal qualifications as an apothecary, the position for which Eichler senior was recommending him. Eichler stated that it was too dangerous to send him abroad to study at the present time, presumably referring to the War of the Holy League (1683-89) then being fought in Eastern and South-Eastern Europe. Consequently, Eichler requested that his son be given a place in the Apothecary Chancery as an apothecary without further study. Like Blumentrost senior, Eichler presented a case that his son had not gained a qualification because of circumstances beyond his control, not through a lack of ability.

Recruitment through kinship did not always involve applicants without formal qualifications: in 1666 Apothecary Chancery physician Hartman Graman recommended his nephew for a place as a physician in the Apothecary Chancery, noting that his nephew had studied medicine in Jena, in the Holy Roman Empire. The original letters of recommendation are not in the Apothecary Chancery archives as such letters were vital currency for a travelling medical practitioner and so were always returned to their

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45 RGADA f. 143, op. 3, ed. khr. 143.
46 RGADA f. 143, op. 3, ed. khr. 149.
47 Mamonov, Materialy, ii, pp. 310-11; Mamonov, Materialy, iii, pp. 794-95.
owner after inspection. Indeed, such formal qualifications, whether from a university or a guild, were a vital part of the professional identity of physicians, apothecaries, and many surgeons. Across Europe many different medical practitioners vied for business, and it was the formal training of the physicians, apothecaries, and surgeons that set them apart from the crowd.\footnote{On concepts of the medical marketplace see Mark S. R. Jenner and Patrick Wallis, ‘The Medical Marketplace’, in Medicine and the Market in England and its Colonies, c.1450-c.1850, ed. Mark S. R. Jenner and Patrick Wallis (Basingstoke: Palgrave Macmillan, 2007), 1-23.} Those qualifications were of less value in Russia. Russia lacked both universities and the corporate urban environment that created the guilds; consequently, such institutions and so formal qualifications meant less to Russians than other documents, such as recommendations from patrons. When Blumentrost and Eichler recommended practitioners who lacked such qualifications, they were clearly acting out of nepotistic aims: their clients did not have qualifications, so it was necessary to present them as competent despite the lack of qualifications. Nevertheless, their words had a broader implication: in recommending practitioners as competent without qualifications, they undermined the very validity of such qualifications, by presenting them as a desirable, not an essential, prerequisite to medical practice.

The cases of Eichler, Blumentrost and Graman are indicative of a wider trend in Apothecary Chancery appointments: Dumschat has identified more than ten families with several members working for the Apothecary Chancery. In some cases ‘dynasties’ of medical practitioners evolved, with multiple generations staying in Muscovite service. The Russian court seems to have encouraged these familial links, funding the foreign education of more than one son of a physician with the aim of later employing him.\footnote{Dumschat, Mediziner, pp. 249-59.} This policy was partly driven by a desire for physicians and other medical staff with Russian-language skills, as foreigners who grew up in Moscow would have had. As kinship ties were an integral part of Muscovite life, they were readily accepted as a method of procuring medical practitioners.

The existence of foreign medical practitioner ‘dynasties’ in Russia was possible due to evolutions in the legal status of foreigners in Russia. Foreigners were written into the Russian Law Code [*Ulozhenie*] of 1649: chapter X article 1 of the code stated that foreigners were to be subject to the laws of Russia and the judgement of the Sovereign and his proxies just like Russian subjects. There were significant exceptions to the general rule of equality before the law: foreigners were limited in their dress, where they could live, and ability to purchase land; they were also forbidden from keeping...
The 1649 Law Code came about in large part due to the riots of 1648, during which rioters protested bureaucratic unfairness, opacity and corruption. One particular complaint aired in that revolt was that rules were not written down, so it was impossible to know if a case tried before a chancery judge had been given fair hearing according to the rules. Essentially, the 1649 Law Code was intended to standardise the practices of the growing bureaucracy. This standardisation, it was hoped, would prevent caprice or bias from determining the outcome of lawsuits, and so create a more harmonious society, with all levels of it satisfied that they had seen justice done to them. Apparently, foreigners were to be included in this society. The Law Code of 1649 and the associated caveats thus clearly envisage foreigners as a constant presence in Muscovy, indicating that the Russian court intended engagement with the West and the use of foreign experts as Muscovite servitors to be an intensive and long-term project.

Alongside family ties, Apothecary Chancery experts also used their professional networks to help recruit and select new staff members. Although most early modern medical practitioners worked alone, with the exception of apprentices in the case of apothecaries and surgeons, they often developed strong links with fellow practitioners: physicians studied in groups at university, especially during such events as dissections; medical practitioners also commonly formed corporations, such as colleges of physicians and guilds of apothecaries and surgeons. Apothecary Chancery medical experts exploited these links with former classmates and colleagues to recruit new medical staff for the Apothecary Chancery: in 1655 the former Apothecary Chancery physician Johann Belau, then resident in his native Lübeck, was asked to return to medical service in Russia, and if he would bring with him

an apothecary [who] is good and learned in apothecary science, and three persons [who are] surgeons, good and learned people.

Even though Belau was not then in Russian service, he was called upon to contribute to the recruitment of new staff members.

50 Orlenko, Vykhodtsy, pp. 64-69.
52 ‘оптекаря доброго и оптекарскому делу навычен бы, да трех человек лекарей, добрых и навычных людей’, Mamonov, Materialy, iii, pp. 637-38.
Similarly, Robert Benyon, an English apothecary, was interviewed for a place in the Apothecary Chancery in June 1656 after having been recruited by the former Apothecary Chancery employee Robert Tewe. According to Tewe, finding a replacement on his departure from Russian service was a part of his contract.\textsuperscript{53} A contractual obligation to recruit a replacement suggests a significant investment in professional networks as an appropriate method of recruitment. In Benyon's case, he was able to present two letters of recommendation to the Apothecary Chancery: one from Tewe, the other from the College of Physicians of London. Translations of Benyon's letters were kept by the Apothecary Chancery, in which Benyon is described as good [\textit{dobryi}] and proficient [\textit{dostatochnyi}].\textsuperscript{54} As with the cases of Eichler, Blumentrost and Graman, Tewe's professional links only yielded one new staff member, in this case replacing one who was leaving. Recruitment through professional ties increased the overall numbers recruited, but did not provide the means for a significant expansion of recruitment.

**Professional Identities**

Physicians as a professional group were primarily defined by their relationship to European medical theory, which was traditionally based on the writings of Galen (129-c.217 AD) and Hippocrates (c. 460-377 BC). The central concept of Hippocratic medicine was that health was achieved through balancing humours: blood, black bile, yellow bile and phlegm; therapy was devoted to removing excess of a humour or promoting the production of one in deficit. Each humour related to one of the four elements, and was a combination of two qualities: blood was equated with air, and was hot and moist, black bile with earth (dry and cold), yellow bile with fire (dry and hot) and phlegm with water (cold and moist). Excess of each humour produced symptoms associated with its qualities: too much phlegm caused colds and pneumonia. Hippocratic physicians also saw humoral imbalance as linked to the person themselves (different humoral imbalances occurring at different ages), and to the world around them: winter, a cold and wet season, promoted phlegm; similarly, the cold climate of Northern Europe was also believed to cause excess phlegm.

\textsuperscript{53} RGADA f. 143, op. 2, ed. khr. 181; Mamonov, \textit{Materialy}, ii, pp. 158-59.
Galen glossed the Hippocratic corpus, instituting some vital elements that would long prove popular. Of particular importance was the practice of venesection, cutting veins to drain the body of excess blood, a practice thought to cool the body and so commonly used in the treatment of fevers; it also came to be used more widely both therapeutically and prophylactically. Alongside his ideas on the body, Galen also outlined the ideal relationship of the medical professions (excluding midwifery), demanding that each be separate, and pharmacy and surgery both be subordinate to the physicians. This proposal, although held to be correct by the physicians, unsurprisingly found little support amongst the other medical professions, or amongst most patients, who were more interested in successful treatment than in the exact structure of the medical professions. With the decline of the Western Roman Empire, many Galenic and Hippocratic works were lost to Western Europe, but were used by writers in the Arabic world, such as Ibn Sina (known in Europe as Avicenna). It was from these texts that ancient medical theory reentered the West in the early Middle Ages. This glossed Hippocratic and Galenic corpus became increasingly important as it spread throughout the nascent university system of Western Europe, and fundamentally shaped physicians’ conception of disease and healing well into the early modern age.

The earliest serious challenge to Galenic and Hippocratic dominance of medical theory in the early modern period came from chemical medicine, also known as iatrochemistry or spagyric medicine. Its key theorist was Paracelsus, (born Philippus Aureolus Theophrastus Bombastus von Hohenheim, 1493-1541), a German-Swiss physician. His central idea was of the balance of the three principles (tria prima) which made up the human body, which were represented by chemicals: salt was solidity or consistency, sulphur was inflammability or combustibility, and mercury was ‘spiritousness’ or volatility. Paracelsus’ universe was animistic, seeing disease and health being ruled by the spirits of various chemicals and minerals. His work was little known during his lifetime, and it was the posthumous publication of his works in the 1550s that caused the chemical controversy. Chemical medicine also revolutionised the

production of medicines, promoting the use of chemicals rather than just plants, and techniques such as distillation.\textsuperscript{57}

A different challenge to Galenism was mounted by the English Physician William Harvey and the Mechanists. Harvey (1578-1657) proposed that the heart was a pump that propelled blood around the body. In Harvey’s model, this process was linked to vital forces, with blood spreading these spirits throughout the body. Harvey’s views were of interest to Mechanists like the French philosopher René Descartes (1596-1650). The Mechanists were not interested in Harvey’s ‘vital forces’, and instead promoted an idea of the body as a machine, with the heart an engine, pumping fuel around the body.\textsuperscript{58}

The seventeenth century was thus a time of fracture and dissent within the community of learned physicians. Many physicians still considered Galen to be unassailable; still others adhered to one of the two new doctrines of chemical medicine and mechanism. Some physicians attempted to combine two or more of the above approaches, creating a hybrid, compromising approach. Despite such attempts at reconciliation, a war of sorts, fought through pamphlets and medical regulation, was initiated that continued for many years. When the Apothecary Chancery was seeking competent physicians, the very idea of what physicians should know and practise was controversial.

As recruitment through patronage links, mercantile contacts, kinship ties and professional networks had only provided small numbers of recruits, the Apothecary Chancery was forced to relax its insistence upon applicants presenting a recommendation from a known individual, allowing unknown men to apply. The more “liberal” policy raised the question of how to establish the competency and trustworthiness of applicants. This issue was primarily addressed through a more intensive use of entrance examinations, in which current medical staff members questioned applicants on their background, training, former practice, skills and knowledge. The latter in particular was determined by ideas of professional identity, as such identities were primarily shaped by the possession of appropriate types of knowledge.\textsuperscript{59}

\textsuperscript{57} Porter, \textit{Greatest Benefit}, pp. 201-10.
\textsuperscript{59} Dumschat, \textit{Mediziner}, pp. 19, 328.
Entrance examinations were not exclusive to the Apothecary Chancery. The Ambassadorial Chancery, in its role as overseer of all foreigners in Russia, conducted interviews of all newly arrived foreigners to determine their place of origin and the nature of their business in Moscow. Several Apothecary Chancery entrance exams have copies of the Ambassadorial Chancery’s interviews appended to the front, demonstrating the linkage of the two practices. The Gold and Silver Chancery [Prikaz zolotogo i serabrianogo dela] also used such exams to determine the skill of newly arrived jewelers. The practice of entrance examinations continued into the last years of the Apothecary Chancery’s operations: in 1701 the physician Gottfried Klem was interviewed by the Apothecary Chancery physicians Blumentrost, who was then Archiator of the Apothecary Chancery, and Petr Postnikov, as a part of his petition for employment. This was not, apparently, a joint examination: Blumentrost and Postnikov submitted separate reports on Klem. As with so many reports on the entrance exams, little detail was provided about Klem’s abilities; he was just described as sufficiently and appropriately knowledgeable. Apothecary Chancery exams were thus an adaptation and extension of an existing practice from the chancery system to tackle a new problem.

Exams were only infrequently conducted in the first half of the seventeenth century: of the 21 examinations Unkovskaya lists, all but two took place after 1650; 14 took place after 1670. In 1631 the English physician Arthur Dee examined the newly arrived French apothecary and surgeon Phillip Briot. Briot had a recommendation from the king of France, but he had petitioned for that recommendation, which made it of less value than one given freely by a monarch. Dee’s questioning of Briot is of interest, as the file records an unusual level of detail about the interrogation, and as Briot was examined both as an apothecary and as a surgeon. Dee first questioned Briot on the appropriate knowledge for an apothecary. Briot replied

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60 See for example Drescher case below, pp. 105-07.
61 Orlenko, Vykhodtsy, pp. 119-20.
62 An archiator is a king’s chief physician. In late Apothecary Chancery documents it is used to mean the first physician of the Chancery, who had some administrative responsibilities but who remained subordinate to the Russian director of the Apothecary Chancery.
63 RGADA f. 143, op. 3, ed. khr. 518.
65 Mamonov, Materialy, i, pp. 63-64; Unkovskaya, Brief Lives, p. 46.
an apothecary needs to know and command all herbs and flowers and roots and resins, and to [be able to] create medicine of any composition according to a physician’s order.66

Dee then asked Briot to go into various details concerning how to distill medicines. This first question is central to an understanding of early modern medical knowledge. Dee’s question and Briot’s reply assume the existence of an apothecary profession defined by specific types of knowledge, that of plants and other medicinal objects and the creation of compound medicines.

Briot’s answer to Dee on the appropriate behaviour of an apothecary also recognises the status quo of apothecaries as subordinate to the physicians. In reality European guilds of apothecaries were frequently in conflict with colleges of physicians for control of medicines. Apothecaries across Europe specifically fought for the right to prescribe medicines as well as produce them, a fact of which both Dee and Briot would have been well aware.67 The growing confidence of the apothecaries was countered by colleges of physicians, who wished to have the sole right to prescribe medicines as set out in Galen’s medical hierarchy. It was the physicians who were particular supporters of Galen’s medical hierarchy, a fact of which Briot would have been aware. His acceptance of the hierarchy can then be seen as an attempt to curry favor with the physician Dee. Briot’s answer positioned himself as an apothecary through appropriate knowledge and submission to the Galenic medical hierarchy.

Having received satisfactory answers concerning apothecary matters, Dee then moved on to examine Briot on surgery, to ensure that he had also learnt this art to an appropriate standard. The questioning on this point is similar to that on apothecary arts:

Question: What is surgical knowledge?

Answer: That knowledge is handcraft, because [it means] healing illness and wounds in any person with one’s own hands.

Question: Which illnesses and wounds is it appropriate that a surgeon know and heal?

Briot was then asked by Dee to go into more specific details concerning appropriate surgical practice. Dee was satisfied by Briot’s answers on both surgery and apothecary business and recommended that he be employed. As with the questions on apothecary knowledge, surgery was conceived both by Dee the interviewer and Briot the interviewed as a profession defined by a collection of appropriate knowledge – in this case the treatment of external ailments, wounds and broken bones – the limits of which Briot had to show that he was aware of in order to pass the exam. As with his answer on pharmacy, Briot here continued to adhere to the Galenic medical hierarchy, in which surgeons were to deal with wounds and external medicine, not to prescribe or create internal medicines. Briot convinced Dee of his suitability to work in the Apothecary Chancery by drawing upon boundaries of the activities of the medical professions particularly favorable to the physicians, and so asserting a professional identity that Dee found to be acceptable.

Despite Dee’s affirmation of his skill in both pharmacy and surgery, Briot was not allowed to practise as both an apothecary and a surgeon as he wanted. He was initially listed as an apothecary, but was moved to the surgeons in 1644 after performing a venesection. He complained about this change as it meant a reduction in pay. The Apothecary Chancery considered Briot’s petition to be moved back to the apothecaries, but ruled that
[a]pothecary Filip Briot must be in the surgeon’s [ranks] as he performs vesections [lit. cuts veins], and apothecaries do not perform vesections.  

Following his complaint, Briot was dismissed later the same year. Despite being judged capable of performing the duties of both an apothecary and a surgeon, Briot was not allowed to take both positions. In this particular case, the Apothecary Chancery upheld a version of the Galenic medical hierarchy, drawing strict divisions between the professional identities of apothecaries and surgeons.

A similarly strict interpretation of the divisions of the medical professions was asserted in 1672. Stepan Alekseev, an Apothecary Chancery surgeon, was sent to treat an emissary from the Kalmyk khanate, a polity in the lower Volga region, Daura Taish. Having examined the patient, Alekseev concluded that it was an internal illness, and that

such work [treating internal illnesses] is doctors’ [work], not surgeons’.  

Alekseev clearly adhered to a strict division of responsibilities between the medical professions markedly similar to that used by Apothecary Chancery officials in 1644 when deciding Briot’s fate.

The strict division of medical professions and their respective areas of activity was more frequently disregarded by the Apothecary Chancery than it was adhered to: only four years after Briot was refused a dual status as surgeon and apothecary, Johann Albanus was initially listed as both a surgeon and a distiller, although only one document refers to him in this capacity (1648). From then on Albanus worked only as a surgeon. At the start of the seventeenth century most Apothecary Chancery medical practitioners identified themselves as an apothecary, a surgeon, or a physician, and would then fulfill the specific tasks of that profession for the entirety of their period of service in Russia. By the late seventeenth century it became more common for men to work in more than one medical profession. Johann Guttmensch, who worked in the Chancery between 1668 and 1682, was originally employed as a physician, but mainly

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70 Оптекарю Филипу Бриоту быти в лекарех потому что он отворяет жильные а оптекари жильных не отворяют’, RGADA f. 143, op. 1, ed. khr. 147; Mamonov, Materialy, i, pp. 64-69.
71 ’то дело дохтурское, а не лекарское’, Mamonov, Materialy, ii, pp. 552-54.
72 Unkovskaya, Brief Lives, p. 67.
performed the duties of an apothecary.\textsuperscript{73} Peter Pill, who was in Russia from 1664 until at least 1701, worked as both an apothecary and a distiller from 1680. Pill was the first person to combine the roles of apothecary and distiller, despite their significant similarities: both involved the preparation of medicines.\textsuperscript{74} Similarly, Roman Selater worked as both an apothecary and a distiller in the 1690s.\textsuperscript{75}

During the late seventeenth century it sometimes happened that one medical profession would take on the duties previously associated with another profession, such as in 1677 when the apothecary Christian Eichler performed a post-mortem examination on one of the tsar’s singing deacons.\textsuperscript{76} Post-mortems were not specifically mentioned in Galen’s hierarchy, as dissection of human corpses was banned in the Roman Empire, but throughout the early modern period this procedure was accepted as the purview of the physicians. Such was the case in Russia in the early seventeenth century. The documents do not state why Eichler was allowed to perform this operation; Unkovskaya has suggested that it was because Eichler was a member of the tsar’s personal entourage.\textsuperscript{77} This cannot be the full explanation, as Aleksei Mikhailovich had several physicians in his retinue at this time and he could just as easily have appointed the task to one of them.\textsuperscript{78} Nevertheless, Unkovskaya’s suggestion that the close contact between Eichler and the Tsar was decisive in this task being assigned to him is reasonable.

As well as junior practitioners being given more prestigious tasks in the latter seventeenth century, during the same period the senior physicians were also given tasks that had previously been carried out by more lowly practitioners. Laurentius Blumentrost, a long-serving German physician and after 1682 the senior physician of the Apothecary Chancery, was assigned many duties that had earlier been the responsibility of junior surgeons. Unkovskaya has proposed that Blumentrost’s lowly duties were due to a general breakdown in the Apothecary Chancery medical hierarchy following Aleksei Mikhailovich’s promotion of two barber-surgeons (von Gaden and Sommer) to the position of his personal physicians.\textsuperscript{79} Stefan von Gaden\textsuperscript{80} entered

\textsuperscript{73} Unkovskaya, \textit{Brief Lives}, pp. 53-54.
\textsuperscript{74} Unkovskaya, \textit{Brief Lives}, pp. 52-53.
\textsuperscript{75} Unkovskaya, \textit{Brief Lives}, p. 58.
\textsuperscript{76} RGADA f. 143, op. 2, ed. khr. 1176; Mamonov, \textit{Materialy}, iv, 910-11. On post-mortems in Russia, see Chapter Four, p. 113.
\textsuperscript{77} Unkovskaya does not see this incident as being part of the disintegration of the Apothecary Chancery labor divisions. Unkovskaya, \textit{Brief Lives}, p. 49.
\textsuperscript{78} In 1677 the first physician was Dr Rosenberg. The Apothecary Chancery then also employed Dr Blumentrost, Dr Gaden and Dr Sommer. Unkovskaya, \textit{Brief Lives}, p. 25-26, 28, 36, 39.
\textsuperscript{79} Unkovskaya, \textit{Brief Lives}, p. 29.
Russian service in 1656 as a captured barber-surgeon, and by the early 1660s was permitted to issue prescriptions, even for the nobility, although he was not formally promoted to meditsina, a term which, according to Unkovskaya, was used to mean under doctor, until 1667.\textsuperscript{81} Von Gaden has attracted much attention from historians, as his career within the Apothecary Chancery was rather extraordinary.\textsuperscript{82} The vast majority of captured barber-surgeons worked as field surgeons, and their pay, status, and influence within both the Apothecary Chancery and court were low. In stark contrast, von Gaden almost immediately began to make a name for himself: his pay increased more than ninefold in the first nine years of service, and he was one of the first men, and the only captured surgeon, to be promoted from surgeon to physician.\textsuperscript{83} Two other surgeons were promoted from surgeon to physician by the court during this period: Simon Sommer, and Friedrich Klem. Sommer arrived in 1654, was promoted to under doctor in 1673, and in November of 1676 he replaced von Gaden as the Tsar’s personal physician.\textsuperscript{84} There are very few documents in which Klem is mentioned, but it is known that he arrived in 1699 and was initially employed as a surgeon, before being promoted to physician in 1702.\textsuperscript{85} Promotions were not restricted to surgeons: in 1696 Victorin Gregory was promoted from the alchemists to the apothecaries.\textsuperscript{86} The Apothecary Chancery’s commitment to a central tenet of the Galenic professional identity – a medical hierarchy with strict division of tasks – was thus inconsistent, and apparently decreased across the course of the seventeenth century.

It is interesting that several of these promotions took place under Aleksei Mikhailovich. In contrast to his father, Mikhail Fedorovich, who relied upon established boyar families for high-ranking servitors, Aleksei Mikhailovich appointed many ‘new men’ to important government positions.\textsuperscript{87} His apparent favoring of Eichler, von Gaden and Sommer could also be seen as part of the same meritocratic policy. Approaching both Russian boyars and foreign servitors using the same criterion – merit and

\begin{itemize}
  \item \textsuperscript{80} Also known as Daniel (von) Gaden. Stefan was the name he was baptized with when he converted to Orthodoxy. Unkovskaya, Brief Lives, pp. 34-37.
  \item \textsuperscript{81} Unkovskaya, Brief Lives, p. 39.
  \item \textsuperscript{83} Unkovskaya, Brief Lives, pp. 34-37.
  \item \textsuperscript{84} Unkovskaya, Brief Lives, pp. 37-40.
  \item \textsuperscript{85} Unkovskaya, Brief Lives, p. 97.
  \item \textsuperscript{86} RGADA f. 143, op. 3, ed. khr. 355.
  \item \textsuperscript{87} See Chapter Two, pp. 61-62.
\end{itemize}
favoritism rather than precedence – suggests that Aleksei Mikhailovich did not draw a strict distinction between these two groups of servitors, underlining the great importance to Muscovy of foreign experts he had acknowledged in the 1648 Law Code. The physicians’ professional identity was not of particular use to Aleksei, so he undermined it.

The Russian court also took issue with an employee’s professional identity when that identity obstructed service requirements in other cases. In 1645 the Apothecary Chancery physician Valentin Bills junior was sacked. The tsar had paid for him to study abroad, in one of the early attempts to produce a reliable source of foreign-educated physicians, and Bills had in fact gained a medical degree. Sending the children of foreigners in Muscovite service abroad to study was one method of gaining more recruits for the Apothecary Chancery. Boris Godunov had early experimented with sending native Russians abroad, but all those sent refused to return. Apparently it was believed that the children of foreign servitors would be more likely to return, a belief that was upheld. There were other problems: this method of producing new servitors was both costly and time-consuming, and did not always result in employable practitioners, as the case of Bills demonstrates.

Despite his qualifications and the investment the court had made in him by funding his education, Bills was dismissed without cause being stated. It is noteworthy that Bills was given the opportunity to perform some other kind of service for the Russian court. He was ordered

to serve his Lord’s service [outside the Apothecary Chancery] but if he does not want to serve [then] give him freedom [to go] where he wishes.

I. E. Zabelin has interpreted this statement as meaning that Bills was not wanted as a doctor because of his insufficiencies in that field. Zabelin’s suggestion is highly probable, especially as Bills himself took pains to present himself as a qualified practitioner, which may have been a defense against his detractors.

Bills protested the decision to dismiss him vociferously and repeatedly, basing his objections on two grounds. Firstly, he considered himself to be a Russian subject (Bills

88 Dumschat, Mediziner, p. 69.
89 ‘служить свою государеву службу а будет служить не похоте и ему дать воля где хочет’, Mamonov, Materialy, i, pp. 69-72.
had been born in Russia) and wished to serve the tsar. The Russians apparently rejected Bills’ interpretation that he should be considered a Russian subject: he was given permission to leave and work abroad, something not typically open to Russian subjects. This raises the question of the nature of Russian identity at this period. Bills, having been born in Russia (to foreign parents) and served the Russian court, clearly believed that this made him Russian. His ethnic and linguistic identity (he was a German-speaker) was non-Russian, so he located his Russianness in his place of birth, and his state service. What criteria were the Russians themselves using? T. A. Oparina notes that at this time the word ‘foreigner’ \([\text{inozemets}]\) did not mean person from a foreign land, but person not belonging to the Russian Orthodox Church; children of foreigners who were born in Russia did not automatically become Russians, but were known as ‘old foreigners’ or ‘foreigners of earlier immigration’ \([\text{starye inozemtsy, inozemtsy starogo vyezda}]\).\(^91\) Although foreigners were incorporated into Russian service for practical reasons, the Russian court did not view them as Russians unless they converted, as is seen in Bill’s case.

Secondly, Bills also claimed to be a learned and sufficient doctor, and could only work as such as he had sworn an oath to the doctors.\(^92\) Here he is presumably referring to the Hippocratic oath, a text from the Hippocratic corpus of unclear dating, which proclaims the moral responsibilities of the physician towards his patients, and so prefigured the idea of a profession, ‘a morally self-regulating discipline among those sharing craft knowledge and committed to serving others’.\(^93\) In claiming that he could not serve as anything other than a physician, Bills was reaffirming his commitment to a Western European ideal, one that the Russian court rejected despite the mention of the oath. Bills’ self-identification as a physician was rejected as it did not serve the needs of the court.

Professional identity and medical knowledge are explicitly dealt with in an Apothecary Chancery document from 1690. The report, which survives in Latin along with a Russian translation, is unpublished, and has received little attention from historians.\(^94\) Doctors Blumentrost and Carbonari were ordered to report on the medical degrees of unnamed physicians recently arrived, who had studied at the Italian university of Padua. Four Apothecary Chancery physicians are known to have studied

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\(^{91}\) Oparina, *Inozemtsy*, pp. 5-7.


\(^{94}\) Dumschat discusses this report. See Dumschat, *Mediziner*, p. 327.
in Padua: Samuel Collins, Jacob Pilarius, Andrei Kellerman and Carbonari himself.\textsuperscript{95} The document of 1690 cannot have been referring to Collins, as he left Russia in 1667.\textsuperscript{96} Andrei Kellerman had worked for the Apothecary Chancery from 1673 to 1683, returning sometime before 1700.\textsuperscript{97} Even if Kellerman were back in Russia in 1690, it would be strange for the Apothecary Chancery to commission a report on his credentials, as he had already worked for them, presumably to their satisfaction. The only new Apothecary Chancery physicians to have studied at Padua were Pilarius and Carbonari himself, both of whom had arrived in 1689, shortly before the commissioning of the report, with recommendations from the Holy Roman Emperor Leopold.\textsuperscript{98} Evidently, the document concerns Pilarius and Carbonari. Blumentrost had not been to Padua, instead having studied in Leipzig and Vienna.\textsuperscript{99} Blumentrost was likely involved in the production of the report due to his seniority in the Apothecary Chancery: he was then Archiactor, the chief physician, a role which included recommending the acceptance or rejection of applicants. As the document is signed by Carbonari and Blumentrost, it seems likely that the document is a record of Blumentrost’s conversation with Carbonari about the latter’s Alma mater.

The university of Padua existed from at least 1222, and was a famous early modern centre of medical learning. As a part of the Republic of Venice, it was somewhat shielded from the strictures the Catholic Church put on medical teaching and research elsewhere. This freedom allowed for the development of a significant anatomy program, including public anatomy dissections (from 1595). The subject of the report was thus a rather significant early modern medical institution.

The report on Padua begins by announcing as its subject the university of Padua and the recent graduates of that institution who were then in Moscow. Blumentrost refers to Padua as ‘[the] academic and illustrious Gymnasium of Padua’.\textsuperscript{100} The report then briefly deals with the degree certificates of the Paduan doctors, confirming them as

\textsuperscript{95} Unkovskaya, \textit{Brief Lives}, pp. 23, 41-42, 43, 44.
\textsuperscript{96} Unkovskaya, \textit{Brief Lives}, p. 23.
\textsuperscript{97} Unkovskaya, \textit{Brief Lives}, pp. 41-42.
\textsuperscript{99} Dumschat, \textit{Mediziner}, p. 569.
\textsuperscript{100} ‘Academica Illustris Gymnasi Patavini’, ‘академическая славного училища Падвинского’, RGADA f. 143, op. 3, ed. khr. 322.
genuine and correct, and affirming that these men will be of use to Russia. Following this, and uniquely for entrance examinations, the report focuses not on the men themselves, but on the university of Padua and the medical knowledge taught there. Padua, Blumentrost declares, thoroughly prepares its students in the ancient works of Galen, whose writings are essential to medical practice: students of Padua can recite Galen’s works accurately, and are also learned in the proper application of venesection to regulate humors [here vlazhebnikov], a practice which can be dangerous if improperly used. Stressing the central role knowledge of Galen and humours play in contemporary medicine, Blumentrost notes that knowledge of such matters is essential to becoming a physician. Padua was thus judged to be a good university by Blumentrost as it promoted the use of Galenic medicine, of which Blumentrost evidently approved.

In contrast to his praise for Padua's Galenic credentials, Blumentrost criticises Padua for its approach to other medical authors. According to Blumentrost, Padua defames Paracelsus and von Helmont, the controversial leading figures of chemical medicine. Worse still, to Blumentrost's thinking, is Padua's rejection of the chemical elements present in ancient authors, in particular the respected Hippocrates but also Plato. He states that

in Italy those [ideas concerning chemical medicine] are not put to [the test of] fire and water, [as the Italians] fear deeply concealed nature, and [so reject] the most tolerable teaching concerning fermentation not only of Paracelsus or [von] Helmont but also [that of] the great Hippocrates, Plato and other most ancient teachers, whom are now and from ancient [times] accepted and respected.\footnote{\textit{quibus in Italia aqua et igni interdicatur, quod altius natura abdita rimen ipsamque mobilissimam fermentionis doctrinam non ipsi tantum Paracelso anti Helmontio, sed et magno Hippocrati, Platoni, aliisque antiquimis Autoribus, et quibus hodie non ex incensionibus’, \textit{Яко таких котриом во Италии огнь и вод им не подается, что глубее естества сокровенная истязают, и самое преизрядное учение тисение не одному токмо Парацельсу или Хелмонцию но и великому Иппократу Платону и иным предревним учителем и которым ныне не отдавных принимают и почитают}, RGADA f. 143, op. 3, ed. khr. 322.}

\footnote{\textit{ne\cursus, quia huic Regno possint esse medici utiles’}, \textit{не усомневаемся, что сemu г[o][ула][дству могут быти дохтуры полезные’}, RGADA f. 143, op. 3, ed. khr. 322.}
Blumentrost thus endorsed Padua as a centre of medical learning, and so the value of
degrees issued by that institution, but also warned that the knowledge gained there was
incomplete as the Italians would not give a fair hearing to chemical medicine.

This concern about the reception of chemical medicine in Padua seems to have
been rooted in a genuine disconnection between Northern Europe and Italy over the
value of the chemical tradition. A seventeenth-century Pisan official noted that it was
hard to introduce chemistry and chemical medicine into Italian universities, as the
Paracelsians were ‘damned in all [Italian] universities’, in part because of a preference
for the Mechanists. 103 Blumentrost was a German, and thus belonged to the Northern
European medical world, which differed in some significant respects to that of Italy.
Paracelsus and von Helmont, the chemical medical practitioners Blumentrost defends,
were, respectively, from Switzerland and the Netherlands, and so were also Northern
Europeans. Paracelsus in particular was both a controversial and an almost revered
figure. His works were originally composed in German, and Latin translations, the usual
language of scholarship, were late and rare. In this respect Paracelsus was compared to
Martin Luther, who had been the first man to write theology in German; Paracelsus was
the first to write a scientific text in German. Paracelsus’ work was then bound up with a
growing German vernacular identity. 104 The absence of these men’s work from the
curriculum of an Italian university was an insult to German medical science. In
defending Paracelsus and his other fellow Northern European von Helmont,
Blumentrost was not only defending a medical theory as worthy of study, but also his
linguistic identity.

The report on Padua was composed just two years before the first Russian to
successfully study abroad, Petr Postnikov, who was sent there to be educated as a
physician. Dmitrii Tsvetaev, Postnikov’s biographer, makes much of the decision to
send Postnikov to an Italian university rather than one of the German universities that
supplied so many of the Apothecary Chancery’s physicians in the latter seventeenth
century. Indeed, Tsvetaev claims, German physicians’ resentment over Postnikov’s
alma mater was one reason Postnikov spent little time working in the Apothecary
Chancery, being quickly transferred to the Ambassadorial Chancery and working as a

103 Brendan Dooley, ‘Social Control and the Italian Universities: From Renaissance to
104 Isabelle Pantin, ‘The Role of Translations in European Scientific Exchanges in the
Sixteenth and Seventeenth Centuries’, in Cultural Translation in Early Modern Europe,
ed. Peter Burke and R. Po-Chia Hsia (Cambridge: Cambridge University Press, 2007),
163-79 (p. 172).
diplomat for most of his years of service. The impression that the report on Padua may have been commissioned in part due to Peter’s wish to send Russians abroad to study is strengthened when considering that Peter later sent a further sixty Russians abroad to study in 1697, forty of whom were sent to Italy (the rest went to the Netherlands). Although the explicit purpose of the 1690 document was to inform an assessment of the Paduan university qualifications of newly arrived doctors, it is also possible that Postnikov’s trip, and that of the later students, was already being discussed in 1690, and the Padua report was part of those considerations.

Prior to the Padua report, medical practitioners had been recruited and examined individually. The commissioning of a report on a medical institution suggests a shift in policy. By approving or rejecting a university as an appropriate centre for medical learning, it would be possible to formulate a policy towards all graduates of that institution, rather than considering each case individually. This move from considering individuals towards a broader policy suggests a more long-term strategy than the Apothecary Chancery had previously used. When recruitment of medical practitioners from the West had begun, it was used only to replace specific positions; forming a general policy was a commitment to continuous recruitment of staff and to expanding the Apothecary Chancery. The Padua report thus suggests recognition of the continued importance of the West to Russia’s medical development. In using their existing medical staff and their conception of professional identity for selecting new staff, the Russian court was developing a more specialist, and longer-term view of its relations with Western Europe.

It should be noted that, despite Blumentrost’s concerns, both Carbonari and Pilarius were accepted into the Apothecary Chancery. It would thus seem that the Russian court had no problem with employing medical practitioners with conflicting views on theory. In recruiting men from across Europe, the Russian court collected together practitioners not only of different nationalities and languages, but also, apparently, of differing schools of medical thought. The presence of such divisions in the Apothecary Chancery may have had an effect on the production of knowledge: in composing reports, physicians were required to be ‘agreed and of common advice and

105 Tsvetaev, Mediki, pp. 23-27.
106 Lindsey Hughes, Russia in the Age of Peter the Great (New Haven: Yale University Press, 1998), pp. 305-06.
107 Unkovskaya, Brief Lives, pp. 43-44.
thought among themselves’. It is interesting that the reports rarely, if ever, discuss medical theory. If, as it seems here, Apothecary Chancery physicians belonged to rival schools of medical theory, it would be unlikely that they could have agreed on what theoretical position to take. It thus would have been simpler to leave theoretical considerations out of reports, thus avoiding such areas of conflict. Consequently, the recruitment of physicians from different schools of medical thought may have contributed to the noted lack of medical theory in Apothecary Chancery reports. Professional identity, which was partly based on medical theory, did shape the recruitment of medical practitioners, but it never entirely determined who was accepted into that department.

**Conflicting Testimony**

Medical practitioners looking for work in the Apothecary Chancery often availed themselves of more than one of the networks of trust and professional identities discussed above. Patrons, patients and practitioners often took rather different views of medical practice, with practitioners more likely to focus on the correctness of form, whereas patients and patrons would focus on results. Consequently, multiple assessments could lead to conflicting recommendations.

If the opinions of all those involved in the assessment coincided, the effect was positive, as in the case of Doctor Gliusnik, who applied for an Apothecary Chancery position in 1702. Gliusnik provided all the types of verification discussed above: he had a recommendation from the King of Poland, another from a Spanish university (it has not been possible to confirm which), and passed an entrance exam resulting in a letter of recommendation from Blumentrost senior. In addition, and uniquely for a new applicant to the Apothecary Chancery, he also presented the Apothecary Chancery with a copy of his doctoral thesis on dysentery, written in 1692. Gliusnik was accepted into the Apothecary Chancery as a physician. This decision was reached due to evidence of his learning as determined by Blumentrost and a qualification from a university, and evidence of trustworthiness, in the form of the royal recommendation. The combination of positive testimony from both patrons and experts undoubtedly led to his acceptance into the Apothecary Chancery.

110 See Chapter Four, p. 109.
111 RGADA f. 143, op. 3, ed. khr. 536.
Conversely, conflicting testimony could cause significant problems within the Apothecary Chancery, as occurred in 1685, with the arrival in Moscow of a man named Ivan [Johann?] Drescher. Drescher’s case has become something of a staple for histories of the Apothecary Chancery due to the length and unusual detail of the file and the disagreements between physicians and bureaucrats recorded in it. On his arrival Drescher had been interviewed by the Ambassadorial Chancery, and had given a lengthy, detailed and somewhat eccentric account of his origins, education and medical practice. Noteworthy is his insistence on a familial tradition of medical practice, listing his father, brother, son-in-law, father-in-law, and wife’s deceased husband as fellow doctors. Drescher did not have evidence of his medical studies and qualifications and so his insistence on belonging to a social group of physicians may have been an attempt to bolster his credentials as a genuine physician.

When transferred to the Apothecary Chancery for further questioning, Drescher’s story was immediately challenged by the other physicians, who drew particular attention to the details he had given concerning his university education. The two physicians chosen to examine him, Blumentrost and van der Hulst, were both from the German lands and, as explicitly stated in the document, were expressly selected for their knowledge of the German universities Drescher claimed to have attended. Drescher claimed to have studied in Jena but, as noted by the other physicians, tuition at Jena was in Latin, a language in which they judged Drescher to be deficient. Ignorance of Latin would in fact have precluded study of medicine, or any other subject, at any European university. Furthermore, Drescher was also tripped-up by his claims concerning with which professors of medicine he had studied: the examiners stated that the men he named in fact had never worked for the faculty of medicine at Jena.

Having examined Drescher thoroughly, Blumentrost and van der Hulst gave their report, attacking Drescher’s testimony on several counts. He cannot, they said, have attended Jena as he did not speak Latin. Moreover, without a medical degree he would also have been unable to work in the places he claimed to have worked. They thus dismissed Drescher’s account of his studies and medical practice as ‘silly lies’ [glupye lzhi]. Drescher’s examiners also said that the Apothecary Chancery should not give much weight to the patient testimonials Drescher had produced, as many unlearned healers could produce such documents. The physicians’ rejection of patient testimonials mirrors developments elsewhere: city authorities in early modern Italy accepted patient testimonials as recommendations for medical practice, but the medical colleges did

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112 RGADA f. 143, op. 3, ed. khr. 151.
not. Blumentrost and van der Hulst also questioned Drescher’s motives, accusing him of wanting to fleece people out of money, and even stating that his practice was dangerous to the health of Muscovites. The examiners evidently considered their testimony to be conclusive, and branded Drescher a charlatan [shantun] and false doctor [dokturlzhets], and declared him to be totally ignorant of medicine, recommending that he be rejected.\footnote{Pomata, Contracting a Cure, p. 51.}

Despite the strident and overwhelmingly negative statement on Drescher’s qualifications as a medical practitioner and overall moral character given by his examiners, Drescher was given a position in the Apothecary Chancery. Levin, discussing the Drescher case, has noted the apparent indifference of the Apothecary Chancery authorities to the Western dichotomy of learned medicine from irregular healers promoted by professional medical practitioners, an attitude she equates with that of patients in the rest of Europe.\footnote{RGADA f. 143, op. 3, ed. khr. 151.} The Drescher case underlines the Apothecary Chancery’s inconsistent commitment to medical hierarchies, and so to a vital part of physicians’ professional identity.

The Drescher controversy did not end with his acceptance into the Apothecary Chancery: five years later, in 1690, the department decided to reexamine his credentials. At that time Drescher was preparing to go and join the Russian army in the Crimea, and was to be entrusted with a significant sum of money to defray his expenses. The Apothecary Chancery thus apparently wanted to reassess Drescher’s trustworthiness before giving him the money. Blumentrost and van der Hulst were questioned once again, and repeated their previous conclusions: Drescher could not prove his medical qualifications, and was untrustworthy. As a result Drescher was eventually expelled from the Apothecary Chancery.\footnote{Eve Levin, ‘The Adoption of Western Medical Ideas in Seventeenth-Century Russia’, paper delivered at the 39th National Convention of the American Association for the Advancement of Slavic Studies, New Orleans, November 2007, p. 4.} The initial acceptance of Drescher as an Apothecary Chancery employee seems then to have been made on the basis of patient testimonials, and in spite of significant concerns over his medical knowledge. The Apothecary Chancery officials did place importance upon the possession of appropriate knowledge, as they ordered him to be examined, but such evidence could be overlooked in the face of positive patient testimonials. Here concerns of professional identity were initially

\footnote{RGADA f. 143, op. 3, ed. khr. 309. See also Dumschat, Mediziner, pp. 198-203.}
overlooked due to conflicting testimony from patrons, suggesting a preference for the latter type of assessment.

A similar case to that of Drescher took place in 1696, concerning a Scottish medical practitioner named John Buck. Buck had been recruited for the Apothecary Chancery by his fellow countryman, Russian general and respected counsellor to the tsar, Patrick Gordon. On his arrival in Moscow Buck was interviewed by the Apothecary Chancery and, like Drescher before him, found to be ignorant of key points of medical knowledge. Buck, defiant of such claims, stated that he was more learned in experience than in theory.\(^{117}\)

Buck’s defense is relevant to contemporary ideas of professional identity. Some medical practitioners in early modern Europe rejected the centrality of medical theory to correct medical practice. These practitioners, commonly derided as ‘empirics’ by their opponents in reference to their use of experience over written medical knowledge, thought that experience, experiment, and active engagement with the natural world and investigation of all possible remedies was the key to curing illness.\(^ {118}\) Buck, in highlighting his experience and stressing the primacy of experience over theory, was aligning himself with the empirics.

Buck’s case was referred to Peter I, probably due to the importance of Buck’s patron. It may also have been due to Gordon’s influence that Peter ruled in favor of giving Buck a place in the Apothecary Chancery.\(^ {119}\) As with Drescher, Buck was accepted into the Apothecary Chancery against the strong objections of the physicians and solely on the basis of patron testimony, not formal qualifications or professional recommendations. Although professional assessments of medical practitioners’ competence grew significantly in importance across the seventeenth century, the Russian court also remained committed to traditional networks of trust and patronage.

**Conclusion**

In recruiting its medical staff, the Apothecary Chancery thus relied partly upon networks of trust, and partly upon professional identities. Diplomatic ties, mercantile connections, and, later, kinship and professional networks of existing medical staff were all drawn upon; institutional links were almost nonexistent. In each case, the Russian court was relying upon an existing bond of trust with an individual to translate into a

\(^{117}\) Dumschat, _Mediziner_, pp. 202-03.


\(^{119}\) Dumschat, _Mediziner_, pp. 202-03.
new, equally trustworthy contact. Such networks were thus essential but also, due to their personal nature, only ever provided a limited number of medical practitioners. More experts could be recruited by examining applicants, to judge their knowledge of appropriate theory and practice, a system which fundamentally relied upon adherence to a certain professional identity. Thus examinations represented a fundamentally different way to judge recruits: through knowledge, not through links to trusted persons. Despite the greater utility of using examinations, the Russian court always preferred recruitment through networks of trust, indicating their bias towards personal links over professional criteria of competency, a fact most likely linked to the absence in Russia of the medical institutions to which such assessments of competence were linked.

The long-term reliance upon networks of trust had a significant effect on the community of medical experts employed by the Russian court. The Apothecary Chancery recruited experts from across Europe, but also from across boundaries dividing institutions and theoretical stances, as was apparently the case with Blumentrost and Carbonari, expressed in the Padua document of 1690. By relying on personal networks, the Russian court prevented the formation of a corporate identity based on a specific medical theory that was often associated with physicians who studied at the same university. Thus the very method of recruitment resulted in a community of medical experts formed of multiple nationalities, languages, and theoretical affiliations. Russia’s links to the European medical world were long-term, and became increasingly specialised across the course of the seventeenth century, but networks of trust always outweighed considerations of theory and knowledge. Given the Russian court’s insistence upon unanimity when producing reports, such a divided community may have resulted in theoretical elements being left out of reports in order to avoid controversy; Apothecary Chancery recruitment practices may have shaped the types of knowledge conveyed in reports. The following chapter explores how these various medical experts supplied their knowledge to their Russian masters.
Chapter 4: Production of Medical Knowledge in the Apothecary Chancery

The main form of medical knowledge produced in the Apothecary Chancery was the report, documents which provided information on various medical matters and were compiled by medical practitioners. The preparation of these documents was a multi-phase production process, involving a number of physicians, translators and scribes. Knowledge produced in the Apothecary Chancery was thus not the product of one individual’s work, but a result of collective work by Western and Russian specialists employed in the Apothecary Chancery; the Apothecary Chancery was an intellectual community. In this respect the production of medical knowledge in Muscovy differed from Europe, where medical and natural-philosophical tracts typically stressed the individuality of the author. Lorraine Daston notes that ‘[f]ar from embracing the ideal of the interchangeable observer, seventeenth- and eighteenth-century scientists carefully weighted observation reports by the skill and integrity of the observer . . . Reports of scientific findings, particularly in the empirical sciences but sometimes even in mathematics, were emphatically cast in the first-person singular, for the skill and character (and occasionally social status) of the reporter were often as crucial to judging its worth as its contents’.1

Physicians and Russian courtiers could also have differing views on any given subject, further complicating the process of consultation, which fundamentally involved adapting medical knowledge to the purpose at hand. Maria Unkovskaya has stated that the Apothecary Chancery physicians were explicitly forbidden from discussing any medical theory or natural philosophy in their texts, being limited to naming the disease and prescribing for it.2 It is true that Apothecary Chancery texts were overwhelmingly practical in focus, but this does not necessarily mean that there was a ban on discussing theory.3 To what extent did the Russian court limit knowledge-production in Muscovy? How did the collective nature of production affect the form and content of medical knowledge generated by the Apothecary Chancery? To answer these questions it is necessary to consider the content, context, format, style and language of Apothecary Chancery reports.

3 Levin mentions the lack of theoretical aspects to the reports, but does not link this to Unkovskaya’s proposed ban. Levin, ‘Adoption’, p. 5.
Given the limits placed on knowledge production by Russian officials, it is important to examine how those reports were produced, and who was involved in that process. Reports were prepared in two basic ways: they could be composed in writing, or be transcribed as the medical practitioners spoke. Writing a statement required considerable time. Consequently, written testimonies were used for situations where a detailed explanation was needed. Oral reports were most commonly used when only very basic information was requested, as a more efficient manner of transmitting brief comments than producing and translating a written document. Such reports can be very short, and lack the addition of abstract information about the disease in question common to the longer reports. The collective nature of advice in the Apothecary Chancery has long been noted in the historiography: when multiple staff members were assigned to a case they were required to be ‘agreed and of common advice and thought among themselves’. Despite this emphasis on collective decisions and advice the Apothecary Chancery did also solicit reports from individual physicians. Sometimes the press of business required each staff member to work individually to deal with the case load; on other occasions, the physician in question had a personal involvement in the case, and the Apothecary Chancery wanted an account of their experience. Reports were thus composed both individually and in concert.

Nevertheless, even those reports composed by one physician were then translated and edited by Russian scribes. Daniel E. Collins, working on Muscovite trial documents, has shown that scribes would commonly summarise speech, and so could shift the emphasis of evidence. The power of the scribes over the trials was considered so substantial that plaintiffs would bribe them. Scribes performed similar functions in transcribing Apothecary Chancery reports; they paraphrased and even edited physicians’ words. As scribes helped shape the final form of reports, they should be considered a part of the Apothecary Chancery’s intellectual community. In this respect, all reports, even those composed by only one medical practitioner, may be seen as a result of collective effort.

Collins’ work has also shown that the variety of linguistic forms employed in chancery Russian documents is dictated by their function. Previous analyses of

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4 See Chapter One, p. 40.
5 Levin, ‘Administration’, p. 366. The translation is Levin’s.
6 Such rephrasing, according to Collins, in the case of the trial records was only applied to oral testimony: ‘it was conventional to copy written sources verbatim’. Daniel E. Collins, ‘Speech Reporting’, p. 283.
documents in Chancery Russian have assumed that, in contrast to the sophisticated style of Church Slavonic texts, these documents were poorly composed. Collins has analysed the forms of Muscovite trial documents, and found use of certain linguistic features to be indicative of a specific function (form-to-function matching). His initial study, which examined documents produced between 1410 and 1505, found that direct speech was the norm for reported speech; deviations from this trend served to highlight a specific, unusual or unexpected feature of the testimony. In contrast, Collins’ study of cases heard in the Slave Chancery [Khlopkii prikaz] between 1620 and 1630, a department which regulated the Muscovite practice of contract slavery, reveals that indirect speech was the more common method of rendering reported speech, a development Collins ascribes to the general rise of literate documentation in that period. Collins’ work thus reveals vital points about how chancery documents were composed: the manner of expression was purposive, reflecting the context of the document; documents had both standard formats, and also standard manners of expression, deviations from which can be related to unusual contextual features.

Russian officials then could shape reports in two basic ways: by dictating the subject of the report, and by adapting its contents post factum. The power of scribes to change testimony they transcribed requires an examination of what they were changing, when, and why, a question fundamentally related to Collins’ ideas about the context-related manner of expression in chancery documents. Attention to the manner of expression in the Apothecary Chancery reports thus allows an assessment one important way in which the Russian scribes were affecting the production of knowledge in the Apothecary Chancery.

Ordering Reports
The initial stage of report production was typically an order from a Russian official to a medical practitioner or committee of practitioners. These orders are recorded at the start of the files, and testify to the role of Russian officials in setting the topics for knowledge production. Orders could be internal, and so given by the Apothecary Chancery director, or could come from outside the department, being made by another chancery director, or even the tsar himself.

8 Collins, ‘Speech reporting’.
The role of the Apothecary Chancery director in ordering reports relates to the issue of boyar involvement in chancery affairs. As discussed in a previous chapter, Apothecary Chancery directors were typically expected to have administrative experience before taking up that post. It thus seems that boyar directors were expected to take active part in the administration of their departments, which, in the case of the Apothecary Chancery, included ordering reports. Russian boyars heading the Apothecary Chancery thus played a role in setting the topics for medical knowledge production.

Orders to provide reports made by the Apothecary Chancery head typically involved internal matters, like patient treatments. Such was the case in 1643, when head of the Apothecary Chancery, Fedor Ivanovich Sheremet’ev, asked Belau for an oral report explaining his treatment of Grigorii Gorikhvostov for worms. When Sheremet’ev asked for the report, Gorikhvostov had been under Belau’s care for a month; apparently, this was considered to be too long, and Belau was called upon to explain why his treatment had failed to produce results. Here Sheremet’ev was evidently concerned with the efficiency and efficacy of patient treatment in the department, a problem he sought to resolve partly through the production of knowledge.

The Apothecary Chancery also received requests to produce reports from other sections of the Muscovite administrative system. The largest group of such documents is the examinations of soldiers and other servitors to assess their fitness to serve. Reports were also requested as a part of judicial proceedings conducted by various chanceries. Such reports always explicitly state the limits of the report, in the case of judicial reports commonly being the name and qualities of various plants suspected of use in witchcraft. Thus officials from across the Muscovite administration played a role in determining the limits of Apothecary Chancery report production.

Orders for reports could also come directly from the tsar himself. One such order called for a written post-mortem report to be produced and sent to him. On the 24th of July 1679 Boyar Prince Ivan Alekseevich Vorotynskii died suddenly. Vorotynskii had been in council with the tsar immediately before his death, raising the possibility that the tsar had been infected with a deadly disease. Thus, the physicians Blumentrost and

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9 See Chapter Two.
10 Unusually for an Apothecary Chancery document, we are not given any further information about Gorikhvostov other than his name. RGADA f. 143, op. 1, ed. khr. 127; Mamonov, Materialy, i, pp. 39-40.
11 See Chapter One, pp. 32-33, 36.
12 See Chapter One, pp. 33-34, and also Chapter Six, pp. 205-06.
Sommer were to examine the corpse and make a determination as to the cause of death, and the likelihood that Vorotynskii could have infected others.\textsuperscript{13}

Performing post-mortems like that of Vorotynskii was a common duty for Apothecary Chancery medical practitioners. These inspections were not, strictly speaking, autopsies, as autopsies involve an internal examination of the corpse; the Apothecary Chancery only ever carried out external examinations of the state of the body. Such investigations were conducted under one of two circumstances: if the person was suspected of having died from the plague, or if the individual in question was important. The first criterion meant that any Muscovite could, in theory, be subjected to a post-mortem examination, which was not a popular idea amongst the population: the man in charge of such investigations, a clerk from the Musketeers Chancery named Antipin, was called a ‘seller of the dead’ [mertvoprodavets], and frequently harassed.\textsuperscript{14}

Despite such resistance from the general population, the court continued with its program of post-mortems, indicating their significance for containing outbreaks of disease.

Post-mortems were more commonly conducted in Muscovy in cases of suspected plague than death by human hands, in contrast to the extensive use of autopsies in coroners’ inquests elsewhere in Europe.\textsuperscript{15} Plague [morovoe povetrie] was as greatly feared in Russia as elsewhere in Europe. Novombergskii’s collection of documents on the history of medicine in Russia includes a great many documents relating to the plague.\textsuperscript{16} News of plague abroad, especially in neighbouring countries, was frequently sought, as in 1602 when the newly arrived apothecary James Frencham was questioned about the plague in the Baltic countries through which he had passed.\textsuperscript{17} If a country were known to have plague, routes from there would be cut, and quarantine posts placed on major trading routes. Such precautions did not prove effective in protecting Russia, and there were periodic outbreaks in various towns, which continued into the nineteenth century.\textsuperscript{18} When plague did reach Russian towns, the measures taken were identical to those taken against plague coming from Russia’s neighbours: the affected area was placed under quarantine. If the affected area was central, or in Moscow itself, then the

\textsuperscript{13} RGADA f. 143, op. 2, ed. khr. 1294; Mamonov, Materialy, iv, pp. 1304, 1198-99.
\textsuperscript{14} Unkovskaya, ‘Foreign Mysteries’, p. 10; Mamonov, Materialy, iii, pp. 727-28.
\textsuperscript{15} See for example, Carol Loar, ‘Medical Knowledge and the Early Modern English Coroner’s Inquest’, Social History of Medicine, 23 (2010), 475-91.
\textsuperscript{16} See Novombergskii, Materialy.
\textsuperscript{17} Dumschat, Mediziner, p. 335.
tsar would move elsewhere until the epidemic had subsided. The official attitude to plague was not to prevent or to treat, but to contain.

Similar prescriptions were applied to the court: if a member of court was taken ill then he was forbidden to attend court, and to be in the presence of the tsar until he was cured. Vorotynskii, if he had knowingly approached the tsar when ill, would have violated this rule and so endangered the tsar. In the Vorotynskii case, the tsar became personally involved in ordering the post-mortem report because of a personal fear for his own safety.

The use of reports to help assess threats to the health of the tsar was common, and often such reports contained information about the tsar himself. Such was the case with reports written in late April and early June 1645 regarding the treatment of Tsar Mikhail Fedorovich. This would prove to be Mikhail Fedorovich’s final illness, as he died in July 1645. The extensive report on his treatment was not only occasioned by the seriousness of his disease for his health, but the effect his death would have on Russia. In 1645 Mikhail’s son, the future tsar Aleksei Mikhailovich, was only sixteen, rather young to ascend the throne. Mikhail Fedorovich’s succession, as the first of the Romanov dynasty, had to be unproblematic to strengthen the legitimacy of the nascent dynasty. When Mikhail did die, Aleksei’s tutor, Boris Morozov, acted as regent during the early years of Aleksei’s reign until the revolt of 1648 that was partly directed against Morozov’s rule. The Morozov incident demonstrates how the premature death of a tsar could weaken both Russia and the dynasty by leaving the country in the hands of one unprepared to rule. It should also be noted the Apothecary Chancery head, Sheremet’ev, had been appointed to his post by Mikhail, and stood to lose political ground upon the ascension of a new tsar who would appoint his own chancery directors, as in fact occurred. Sheremet’ev thus had a vested interest in maintaining Mikhail’s health. The 1645 report on the tsar’s health was therefore required for political as well as medical reasons, demonstrating the role of the Apothecary Chancery in supporting the dynasty, and the political status quo, through guarding the tsar’s health.

The political status quo could also be threatened by the illness of the tsar’s family. One particularly significant case was that of the sudden illness of Mikhail Fedorovich’s fiancée, Mariia Khlopova, in 1616. In 1623 Filaret launched an investigation into

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20 RGADA f. 143, op. 1, ed. kh. 206; Mamonov, Materialy, i, pp. 120-23.
21 See Chapter Two, p. 61.
22 See Chapter Two, pp. 56-57.
Khlopova’s sickness, which included an Apothecary Chancery report on her health. That report stated that the illness was relatively minor, and had not been caused by witchcraft. As noted by Collins, questions put to witnesses were commonly elided in the written record; the testimony itself reveals what was asked.\(^{23}\) Thus the Russians were concerned that Khlopova had been bewitched, presumably to stop the marriage, a serious affront to the tsar. Illness caused by witchcraft was a common fear in Muscovy, judging by its frequent mention in Russian witchcraft trials.\(^{24}\) It was unusual for cases of sickness caused by witchcraft to be referred to the Apothecary Chancery; only one other such case exists.\(^ {25}\) The Khlopova case was not, strictly speaking, a witchcraft trial, as no one was accused of bewitching Khlopova. Indeed, the focus of the investigation was not witchcraft \textit{per se}: the file also records the interrogation of Khlopova’s father on her health, with the apparent implication that he may have let a sickly woman become betrothed to the tsar, a serious offence.\(^ {26}\) The investigation was thus designed to discover the nature and cause of Khlopova’s illness, her future suitability for marriage, and to discover if any boyar had connived in concealing or causing that illness. The latter consideration is the most important, as it once again shows how Apothecary Chancery expertise was called upon by the Russian court to address a question related to political stability.

Politics also motivated the production of reports concerning important foreigners. In the 1640s the Apothecary Chancery became embroiled in the complex and ultimately unsuccessful negotiations concerning the betrothal of Count Valdemar (son of King Christian IV of Denmark) to the tsar’s daughter, Tsarevna Irina. Mikhail Fedorovich hoped the marriage would bring an alliance with Denmark, whose strategic location would facilitate Muscovy’s growing Western contacts by giving the country access to the Baltic and North Seas. This would have been a significant diplomatic coup for Russia, and was sufficiently important for the king of Poland to attempt to block the marriage by arguing that the conversion of a Protestant to Orthodoxy was impossible.\(^ {27}\) Mikhail was sufficiently involved in the project to continue negotiations even after Valdemar made it clear that he would not convert to Russian Orthodoxy. Conversion was of particular concern in this case, as Mikhail had only one living son, meaning that if Alexei died, the Russian throne would fall to Valdemar. Thus ensued a serious debate

\(^{23}\) Collins, ‘Speech Reporting’, p. 277.
\(^{24}\) See Chapter Six on witchcraft, especially p. 181.
\(^{25}\) RGADA f. 143, op. 2, ed. khr. 344.
\(^{26}\) Sobranie gosudarstvennykh, iii, pp. 257-66.
\(^{27}\) Oparina, Inozemtsy, pp. 69-81.
on conversion, and the political exigencies, with courtiers taking differing positions. Ultimately, all Mikhail’s efforts were unsuccessful, as the marriage never took place.

Mikhail’s determination to see the marriage occur can be measured by the treatment of Valdemar: Valdemar was not permitted to leave the capital even when negotiations had broken down. Consequently, in 1644 he and his retinue attempted to escape Moscow under cover of darkness, an attempt that ultimately failed, resulting in at least one death. Although this is not directly stated in the documents, the death was presumably that of a royal cupbearer [kravchii] from Valdemar’s retinue on whom the Apothecary Chancery then performed a post-mortem. Doctors Sybelist, Belau and Graman were thus ordered by Mikhail Fedorovich himself to examine the body and produce a report. The death of a member of a diplomatic contingent was a serious incident, and the production of a post-mortem was no doubt related to the concern about the potential diplomatic consequences of the death.

A more unusual task was presented to the Apothecary Chancery physicians on 31st January 1645. Sometime previously Prince Valdemar had requested some medicines from the Apothecary Chancery. The list, sent through the Ambassadorial Chancery, was shown to Doctors Sibelist, Belau and Graman on the orders of Apothecary Chancery director F. I. Sheremet’ev, so that they could state what illnesses such medicines would be used to treat. This report also testifies to Mikhail Fedorovich’s continued determination to see the marriage of Irina and Valdemar go ahead as late as 1645. Ultimately, Mikhail’s stubbornness was counter-productive: enraged at his son’s virtual imprisonment by the Russians, when Valdemar was finally returned to Denmark after Mikhail’s death in 1645 Christian IV called off all diplomatic relations and trade agreements with Russia. The Valdemar affair was of central importance both to Russian court politics, and to Russia’s international relations, and the involvement of the Apothecary Chancery in the incident demonstrates the significance of that institution to the Russian court.

Another significant group of reports commissioned by the tsar concern negotiations over the purchase of unicorn horns. Unicorn horns, or alicorns as they were also known, were a prized commodity in early modern Europe. Most were actually narwhal tusks, long straight bone protuberances with distinctive spiral markings,

29 Orlenko, *Vykhodtsy*, p. 55.
although horns were also ‘faked’, with other types of horn manipulated to mimic the spirals. These horns were in demand as ornaments, being made into a variety of *objets d’art*, but were also used as medicaments and prophylactics against poison, due to long-standing beliefs about the potency and purity of unicorn horn.\(^{32}\)

Between the 1650s and the 1680s the Russian court was involved several times in negotiations over the purchase of unicorn horn, which was used by the Apothecary Chancery as a medicament.\(^{33}\) In 1654 Aleksei Mikhailovich acquired a horn from former Apothecary Chancery physician Johann Belau, then living in Lübeck, although on this occasion the horn was acquired as an *objet d’art* not a medicament (it was to be made into a staff).\(^{34}\) Only one year after acquiring a horn through Belau, the court was approached by the merchant Peter Marselis with three unicorn horns for sale, which the court eventually purchased after lengthy price negotiations.\(^{35}\) Two years after purchasing the Marselis’ horns, the Russian court was offered another unicorn horn by the merchant Artemii Artem’ev.\(^{36}\) Yet another horn was brought to the Russian court by the merchant Johann von Gorn in 1669, but that horn was rejected on advice from Apothecary Chancery staff.\(^{37}\)

Judging by foreign sources, there were other instances when the Russian court was offered unicorn horn for purchase. In 1611 an English sailor discovered a horn in Greenland, which he entrusted to the Italian merchant Pietro della Valle. Della Valle tried to sell the horn in Russia, Constantinople and Turkey, but the sums proffered by those courts were low, and eventually the horn was cut up and sold in parts.\(^{38}\) In 1647 the French writer Isaac de la Peirere wrote that some years previously a company of

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\(^{33}\) 23\textsuperscript{rd} April 1645, alicorn prescribed to Tsar Mikhail Alekseevich for a deficiency of warmth in his stomach, spleen and liver. RGADA f. 143, op. 1, ed. khr. 206; Mamonov, *Materialy*, i, p. 120. In 1655 Samuel Collins prescribed it for Prince Iurii Alekseevich Dolgorukii. RGADA f. 143, op. 2, ed. khr. 749. In 1674 Stepan von Gaden prescribed it for Tsarevna Tat’iana Alekseevna. RGADA f. 143, op. 2, ed. khr. 1093.

\(^{34}\) RGADA f. 143, op. 2, ed. khr. 134; Mamonov, *Materialy*, iii, pp. 631–32.


\(^{37}\) RGADA f. 143, op. 2, ed. khr. 850; Mamonov, *Materialy*, iii, pp. 805–06.

merchants working out of Greenland tried to sell the tsar a horn, but that his court physicians convinced him not to, saying that it was the horn of a sea creature.\textsuperscript{39} These negotiations give us a basic guide to the price of the horns offered to the Russian court. The Artem’ev horn, which had been imported from Amsterdam, weighed 7.5 funt and was 4 arshin long.\textsuperscript{40} Artem’ev was asking for 900 rubles.\textsuperscript{41} Artem’ev’s horn was thus worth 120 rubles per funt.\textsuperscript{42} For comparison, it should be noted that the contemporary price for gold on Russian markets was never more than 2.5 rubles per funt.\textsuperscript{43} It was the massive prices commanded by horns that occasioned the tsar’s involvement in purchase negotiations.

Why were the Russians so interested in purchasing unicorn horn? Partly this was an issue of prestige – alicorns were large, impressive objects known by all Europeans to be extremely expensive, and the possession of several horns would have emphasised the wealth of the Russian court. Medicinal uses were also a concern. The horn’s primary function was as a prophylactic against poison, which was greatly feared in Muscovy.\textsuperscript{44} During the Time of Troubles, the talented military commander Mikhail Skopin-Shiuskii was probably poisoned by his wife on the orders of his cousin, Dmitrii Ivanovich Shuiskii, apparently with the connivance of the then tsar, Vasilii IV Shuiskii, as they feared Skopin-Shiuskii would take the throne. As discussed above, a member of court may have caused the mysterious illness of Mariia Khlopova, Mikhail Fedorovich’s one-time fiancée.\textsuperscript{45} Seventeenth-century tsars were thus particularly aware of the dangers posed to them by their own retinue and families, a fear that could be ameliorated by the use of the prophylactic horn.

In considering the purchase of these horns, reports were ordered to be produced. The tsar took a leading role in this process: Miloslavskii instructed Belau to purchase the horn only after discussing the matter with the tsar. Likewise, the purchasing decision for the Marselis horns was not made by the Apothecary Chancery director, but by the

\textsuperscript{40} Richard Hellie, \textit{The Economy and Material Culture of Russia, 1600-1725} (Chicago: Chicago University Press, 1999), p. 646.
\textsuperscript{41} RGADA f. 143, op. 2, ed. khr. 407; Mamonov, \textit{Materialy}, iii, pp. 722–23.
\textsuperscript{42} The prices are not entirely comparable, as a complete horn would be worth more than the equivalent weight of powdered horn or a section of horn.
\textsuperscript{43} Hellie, \textit{Economy}, p. 141.
\textsuperscript{45} See above, pp. 114-15.
tsar himself. Aleksei Mikhailovich, who was then out of Moscow, was sent regular missives recounting significant developments in the capital and at court. One such missive informed him of the passage of negotiations with Marselis. Aleksei Mikhailovich underlined that the horns must be acquired, and stressed that he was to be kept informed of negotiations:

But it is essential to buy them and not return [them]; and about that [matter] report to the lord [i.e. tsar].

Negotiations continued, with the tsar kept informed of their progress.

The tsar did not always order reports on the horn directly; sometimes his orders were relayed to the Apothecary Chancery director, who would then in turn give an order to his staff. Such was the case with the 1657 reports, as the document states

And by the order of Lord Tsar and Grand Prince Aleksei Mikhailovich, Autocrat of all Great and Small and White Russia, boyar II’ia Danilovich Miloslavskii ordered that horn to be examined and reported [on] by a physician.

This document is central to Unkovskaya’s argument about the existence of a ban on discussing medical theory. She claims, referencing the above statement, that in the 1657 discourses on unicorn horn doctors Lichifinus, Engelhardt and Graman ‘were not allowed to refer to any philosophical issues but were ordered to describe only the medicinal properties of the horn’. In contrast to Unkovskaya's assertion, the document does not appear to set limits to the doctors’ investigation of the horn, but simply commands that an examination take place. The sources thus do not support Unkovskaya’s assertion that the Apothecary Chancery set out specific rules as to the composition of reports. Rather, the document in question demonstrates that Russian officials and even the tsar himself did take an active role in deciding which topics were

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46 ‘А однолично б их купить а не отдавать; и о том к государю отписать’, RGADA f. 143, op. 2, ed. khr. 147; Mamonov, Materialy, ii, p. 157; Mamonov, Materialy, iii, pp. 636–39.
47 ‘И по Государеву Цареву и Великого Князя Алексея Михайловича всея Великия и Малыя и Белыя Росии Самодержца Указу, боярин Илья Данилович Милославский приказал тое кость смотрить и свидетельствовать Духтуром’, Mamonov, Materialy, ii, p. 160.
the subject of reports. Russians thus participated in medical knowledge production by setting the agenda for the physicians’ reports.

**Composing Reports**

Once an order to compose a report was received, the staff-member to whom the order was given began to assemble relevant information for that report. Such information was commonly assembled from one or more of several sources: an examination of a specific patient or medicament; the physicians’ experience; or more abstract ideas taken from medical texts.

Post-mortem reports necessarily focused on the body being examined, giving a characterisation of the wound or disease that had lead to death. Such was the case with the 1644 examination of a member of Count Valdemar’s retinue. The report on cause of death stated

> that cupbearer is wounded by a harquebus [and] the wound is just under the right eye.\(^{49}\)

Unusually for post-mortems in Muscovy, the doctors then went on to attempt to remove the bullet by cutting into the body with a scalpel: such incisions were rarely made in post-mortems. In this case the incision was unproductive, as the bullet failed to materialise, with the doctors proposing that it likely had gone too deep into the skull to be easily retrieved.

Conducting a post-mortem in this case seems rather unnecessary; a gunshot wound to the head would be both a visible and a dramatic manner of death, and there can hardly have been any doubt about the cause. As noted above, Valdemar’s mission was considered very important by Mikhail Fedorovich, and so any incident that could have threatened it would have been considered very serious by the court.\(^{50}\) The post-mortem in this case served less as an information-gathering exercise than as official confirmation of facts already known.

As well as examinations of bodies, Apothecary Chancery reports were also composed on examinations of medicines, as with the 1645 report on medicines sent to Count Valdemar. The doctors, having examined the list, stated that

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\(^{50}\) See above, pp. 115-16.
those medicines are suitable for [treating] fever and whosoever has fever in
the larynx [they] take such medicines by mouth.\textsuperscript{51}

Sibelist, Belau and Graman’s report does not state for what purpose the report was
requested. It should here be remembered that Valdemar was a prospective son-in-law
for the tsar. A sickly son-in-law could either die before the marriage took place, or fail
to produce an heir, and so endanger the whole project. The Apothecary Chancery report
was thus most probably used to establish whether Valdemar was a suitable candidate for
a dynastic marriage, something the report upheld. As with the post-mortem, here an
examination of specific objects formed the basis for the report.

Some reports relied more heavily on abstract information. The 1643 angina\textsuperscript{52}
report contained general comments about the disease, for example

\textit{it is said [that] from such illnesses it soon becomes impossible to help a
person and from such illnesses many people die.} \textsuperscript{53}

Unlike most oral reports, this statement was not a brief summary of a specific case, but
appears to have been the answer to an abstract question on what disease was signified
by certain symptoms (swollen and feverish throat and chest). Graman and Belau named
the disease, and stated its seriousness: if not treated quickly it would prove fatal. The
angina text also describes the causes of the disease (\textit{evil winds [likhie povetriia],
possibly meaning miasmas, that can infect cattle who then pass the disease on to
humans), and specifies a treatment and, in this case, a prophylactic (for both man and
beast).\textsuperscript{54} Five days after the original report was produced, on the 11\textsuperscript{th}
July 1643, doctors Graman and Belau were called upon to expand their statements on angina and these
‘evil winds’, specifically the treatments thereof.\textsuperscript{55} The angina report thus demonstrates
an interest in both treatments and more abstract statements about disease.

\textsuperscript{51} ‘годны те лекарства от жару у кого жар в гортани и теми лекарствы рот
полощут’, RGADA f. 143, op. 1, ed. kh. 210; Mamonov, Materialy, i, p. 125.
\textsuperscript{52} Angina is here used in the contemporary, Latin sense of an acute throat infection
causing breathing difficulties, not angina pectoris, the modern heart condition.
\textsuperscript{53} ‘де от такие болезни пособи человеку вскоре не будет и от таких де
болезней многие люди задыхаются’, RGADA f. 143, op. 1, ed. kh. 131;
Mamonov, Materialy, i, pp. 44-45.
\textsuperscript{54} RGADA f. 143, op. 1, ed. kh. 131; Mamonov, Materialy, i, pp. 44-45.
\textsuperscript{55} RGADA f. 143, op. 1, ed. kh. 133a; Mamonov, Materialy, i, p. 46.
Such was also the case with Doctor Belau’s report on worms. As a part of his report, Belau gave a general characterisation of worms as an affliction, including symptoms, causation, and types of treatment. These texts should be contrasted with the view of Apothecary Chancery knowledge production proposed by Unkovskaya. Unkovskaya has stated that the work of foreign practitioners in producing reports ‘was confined to naming a disease and prescribing for it’. Clearly, these reports go much further, providing a variety of other types of information. Thus, in contrast to the assertions of Unkovskaya, some reports did include abstract information.

A notably prolific author of such abstract reports was the English Physician Samuel Collins, who produced several texts for the Apothecary Chancery. One such text is Collins’ discourse on obesity, prompted by concerns over the health of Tsar Aleksei Mikhailovich. Despite the practical reason for producing the text, it contains much information that is abstract, such as general characteristics of the causation of the affliction. In the obesity report Collins drew upon contemporary debates and medical ideas from elsewhere in Europe: as Michael Stolberg has recently demonstrated, obesity was a recognised medical condition in the early modern period, attracting the attention of a number of contemporary medical authors. Indeed, Stolberg goes so far as to state that ‘[v]irtually every major early modern medical author had something to say about obesity’. Stolberg has also found that early modern texts on obesity are markedly similar in their descriptions of the ailment, a fact he links to their reliance on Hippocrates’ views. Collins also relies on Hippocrates, as he explicitly states at the start of his text. In contrast to the reports on corpses and medicaments, Collins thus primarily drew on contemporary abstract discussions, rather than an examination of a specific case, for his report.

Collins again relies on contemporary discussions in his 1664 report on the uses of coffee and deer horn. Collins begins by stating that coffee is widely consumed by the Turks, the Persians, the Indians, and the English, claiming that there are now more than

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56 RGADA, f. 143, op. 1, ed. khr. 127; Mamonov, Materialy, i, pp. 39-40.
59 Michael Stolberg, “Abhorreas pinguedinem”: Fat and Obesity in Early Modern Medicine (c. 1500–1750), [Hereafter ‘Obesity’] Studies in History and Philosophy of Biological and Biomedical Sciences, 43 (2012), 370-78.
62 RGADA f. 143, op. 2, ed. khr. 740; Mamonov, Materialy, iii, pp. 787-89.
200 coffee shops in London alone. Collins’ claim is entirely plausible: Mark Pendergrast dates the earliest English coffee house to 1650, and estimates that by 1700 there were around 2,000 such establishments in England. Coffee, long-established as a popular beverage in North Africa, especially Ethiopia, was introduced into Europe in the late sixteenth and early seventeenth centuries, as part of the growing trade in exotic foods and drinks. Its introduction was controversial, as its effects were unknown, and it was seen by some Europeans as a heathen drink. Concern over the beverage was so high that Pope Clement VIII was asked to issue a decree on the matter: he approved its use by Christians in 1600. Medical men also debated the virtues and vices of coffee across the course of the seventeenth-century, coming to mixed conclusions. As coffee at this time was a new substance for Russia, probably introduced not long before Collins’ report, such assertions of its widespread consumption were likely aimed at convincing the reader that coffee was not a harmful substance. Collins then moves on to list the properties of coffee: he specifically notes that it dries up excess moisture [mokrost’], and so aids a number of ailments, including pains in the stomach and head. He also provides information on the correct way to prepare coffee for consumption. Once again, Collins relies upon contemporary, abstract medical ideas to compose his report.

In certain cases, reports relied upon both abstract knowledge and upon a physical examination. The 1679 post-mortem report on Vorotynskii’s death stresses the cause of death as ascertained by a physical examination of the corpse. In this case, however, the basic cause of death was accompanied by some further comments based on wider medical knowledge, specifically addressing fears that Vorotynskii might have infected others:

without doubt this disease began from perceptible [lit. known] stiffness and colic in the airs, which colic was the cause of today’s suffocation.

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65 RGADA f. 143, op. 2, ed. khr. 734.
66 See above, pp. 112-13.
67 ‘malo procul dubio exorto ab insigni cruditate circa hypochondria haerente, quae cruditas frequens est hodiernae Sufficationis Hypochondriacae’, RGADA f. 143, op. 2, ed. khr. 1294; Mamonov, *Materialy*, iv, p. 1304. ‘без сумнения же болезни сей наченшейся от знатной жестости и колотья в воздухах, которое колотье
The report then goes on to make a statement about what did not cause the death:

concerning the other [matter], [there] is no kind of scandal here, nor poison taken, nor falling sickness on the basis of science known to us, about which enlightenment and examination [we] were questioned.  

Although no medical authorities or authoritative medical texts are explicitly named in this text, the mention of ‘science known to us’ does indicate the reference of facts gained from the examination against formal medical knowledge. It was this application of general medical knowledge to specific cases that shaped the composition of Apothecary Chancery reports.

Similarly, the unicorn reports also contain both statements about an examination of the object itself, alongside broader statements about the unicorn and the use of the horn as a medicament informed by literate medical knowledge. Statements about the unicorn are wide-ranging, and, like Collins’ work on obesity and coffee, follow trends seen in other European texts. Odell Shepard, in his noteworthy study of the unicorn in Europe, considers that at least twenty-five books or chapters in natural-philosophical tracts were dedicated to the problem of the unicorn during the sixteenth and seventeenth centuries. Apothecary Chancery physicians were able to draw upon these texts when composing their reports. Both the European and the Apothecary Chancery texts describe the physical features of the unicorn, its horn and its habitat, and indeed one of the Apothecary Chancery texts explicitly relies on Western sources: Lichifinus describes the Indian unicorn on the basis of statements by Marco Polo, and also Andrea Bacci, a sixteenth-century papal physician. Another common feature of both the Apothecary Chancery and European documents on the unicorn was the enumeration of the horn’s

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68 ‘De caetero nullam hic neque veneni accepti neque maligni et contagiosi esse suspicionem ex Artis fundamentis certi sumus, ad hanc visitationem reduisti’, RGADA f. 143, op. 2, ed. khr. 1294; Mamonov, Materialy, iv, pp. 1198-99.

69 ‘О прочем же, никакому зазору зде быти, ни отравы взятой, ни падучей болезни от основания науки известны есмы, на сем посвещении и досмотр быв вопрошаемы’, RGADA f. 143, op. 2, ed. khr. 1294; Mamonov, Materialy, iv, p. 1304.


71 RGADA f. 143, op. 2, ed. khr. 194; Mamonov, Materialy, ii, p. 160.
medicinal properties. In many ways Apothecary Chancery reports on the unicorn closely follow Western texts.

One notable difference between the Apothecary Chancery and Western European texts in describing the unicorn is the matter of the colour of its horn. This was long a controversial topic, with various authors proposing different colours. However, the debate over the colour of the horn was largely resolved by the late sixteenth century with the horn generally thought to be white, and so it seems probable that the Apothecary Chancery physicians chose not to mention it as they considered the debate to be concluded.

As the alicorn was commonly purchased for its anti-poisonous properties, experiments to test the veracity and qualities of the horn, in particular its power against poison, was a common topic found in most European texts on unicorns. Again, this topic is also found in Apothecary Chancery texts. This trope is particularly important, as it combines abstract ideas about the unicorn horn with examinations of specific horns. Engelhardt and Lichifinus both describe an experiment whereby a unicorn horn or powdered horn is used to draw a circle, within which is placed a spider. If the horn is genuine, the spider will be unable to leave the circle. This experiment was well known across early modern Europe: Basil Valentine, the German alchemist of the fifteenth century, the noted French physician Ambrose Paré (1510-1590), the English playwright John Webster, and the Russian Tsar Ivan IV were all aware of it. Engelhardt also describes two other experiments known in European texts. In one experiment the horn and a piece of bread were put in a bowl of water. If the horn were genuine, then the bread would float towards the horn. Similarly, if one put the horn and a small iron vessel in a bowl of water, the iron vessel would float away from the horn. Again, Basil Valentine describes a similar experiment, but specifies that the vessel should be made of silver. Experiments described in the Apothecary Chancery unicorn texts follow European trends.

As well as describing experiments, the Apothecary Chancery also carried out an experiment on the Artem’ev horn. On the 25th June 1658 Doctors Lichifinus and Engelhardt and apothecaries Christian Eichler and Robert Benyon carried out the

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72 Shepard, Lore, p. 123.
73 Shepard, Lore, pp. 27, 34, 37, 102–03.
following experiment on three doves: the first dove was given arsenic, a popular poison in the early modern period; the second was given arsenic and then unicorn horn (presumably powderised); the third was given the horn and then arsenic. The first time around, all the doves survived. The experiment was then repeated, and the first and second doves died, and the third survived. The experiment was judged to be a success, and the horn was declared to be genuine and to have power. The dove experiment carried out by the Apothecary Chancery was also described and performed elsewhere in Europe: the Italian doctor Girolamo Cardano wrote about it in 1559, and Shepard considers that it then became the most popular method by which to test the horn. Certainly, it was carried out several times: in 1636 the apothecary John Voldenburg carried out the experiment in Copenhagen before an audience including professors and members of the scientific community; the Cardinal of Trent carried out the experiment on two doves, as did Ambroise Paré. Thus all the experiments proposed and carried out by the Apothecary Chancery at the Russian court followed common European practice. Apothecary Chancery reports were composed using a combination of abstract Western medical knowledge and examinations, filtered by the medical practitioners composing the text.

Writing Reports

Having compiled the information relevant to the topic, Apothecary Chancery physicians then wrote or spoke their report. The language and style in which these reports were written by the medical practitioners displays distinctive features, an exemplar of which is provided by Collins’ 1664 report on obesity. Collins creates an authoritative portrait of obesity, listing the main complications of obesity, and also the treatment: a combination of diet, exercise and medicines. Each element, in both the Latin original and the Russian translation, is expressed as an absolute fact:

Treatment, or prevention [of obesity], consists of moderation in eating and drinking [and] in exercise [lit. instruction] and medicine.
Collins uses the indicative, and not the subjunctive mood, creating the impression of a factual and not an opinion-based text. Collins’ discourse on obesity also contains another significant feature: the lack of personal forms indicating subjective opinions. At no point in his text does Collins link the knowledge presented in the text back to the author; the knowledge is presented as independent of the expert. The description of and treatment for obesity is not presented as open to interpretation, dependent upon subjective judgement, or even subject to change according to the specific conditions of the patient and the illness or injury. Knowledge is here presented in an objective, impersonal manner.

The objective, impersonal style of writing evident in Collins’ work is also present in Apothecary Chancery reports written by other physicians. The 1645 examination of medicines provided to Count Valdemar states

> those medicines are suitable for [treating] fever and whosoever has fever in the larynx [they] take such medicines by mouth.\(^{80}\)

Once again we see the use of both the indicative, and of impersonal forms, just as in Collins’ text. Other examples could also be provided from the 1679 Vorotynskii post-mortem, the 1643 report on angina, and Belau’s 1643 report on worms, all of which adhere to this objective, impersonal manner of expression.\(^{81}\) These reports all present certain, absolute, impersonal conclusions, not subjective opinions, a manner of expression created in the Latin originals and faithfully conveyed in the Russian translation. Given the generally collective nature of report production in the Apothecary Chancery, it might be suggested that the impersonal and objective style of the texts came from their collective nature; however, it should be remembered that Collins used such a style even in his Latin original, which he alone penned. The impersonal and objective manner of expression was thus widespread, even normative, in Apothecary Chancery reports, for reasons going beyond collective production.

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\(^{80}\) ‘годны те лекарства от жару у кого жар в гортани и теми лекарствы рот полощут’, RGADA f. 143, op. 1, ed. kh. 210; Mamonov, Materialy, i, p. 125.

\(^{81}\) 1679 Vorotynskii post-mortem, RGADA f. 143, op. 2, ed. khr. 1294; Mamonov, Materialy, iv, pp. 1198-99. 1643 report on angina, RGADA f. 143, op. 1, ed. kh. 131; Mamonov, Materialy, i, pp. 44-45. Belau’s 1643 report on worms, RGADA f. 143, op. 1, ed. khr. 127; Mamonov, Materialy, i, pp. 39-40.
The style of expression found in Apothecary Chancery reports is in direct contrast to that observed by Daston to be typical for such texts produced elsewhere in seventeenth-century Europe. In most European texts, knowledge was explicitly linked back to the author or authors, whose background and training were highlighted as part of a strategy to legitimise the ideas presented in the text. In direct contrast, the author is almost non-existent in the Apothecary Chancery reports: there are no personal forms, and no subjective constructions that would stress the role of an actor in constructing the knowledge. Following Daniel E. Collins’ approach to chancery documents, it can be assumed that such a manner of expression was deliberately chosen to fill some contextual need. The purpose of Apothecary Chancery reports was to convey knowledge to decision-makers; for the readers of the Apothecary Chancery reports, who had composed the texts was less important than the information contained in them. It thus seems likely that the objective, impersonal style of Apothecary Chancery reports was a deliberate strategy to convey only the most salient details to the relevant decision-makers. Chancery procedures thus affected not only the topic of reports, but the very language in which they were written.

Significantly, the Apothecary Chancery unicorn documents do not follow the tendency of other Apothecary Chancery reports towards indicative constructions; on the contrary, they report opinion. Both Engelhardt and Lichnfinius present the information they have gathered, on the marine and Indian unicorns respectively, in terms of hearsay. Both reports here make explicit use of the construction ‘they say’. Engelhardt notes that

Some say that those horns grow on the water beast and the sea horse.

... and what power belongs to that horn, all philosophers speak with one voice, that that unicorn [horn] is proof against any poison and curse and plague and pox and scab and any evil illness because by its own power [the horn] creates sweat from a person and through that sweat drives any illness out of the heart... And when that horn is placed on a gate, they said, that it

83 Collins, *Reanimated Voices*, see in particular p. xvi.
protects from any poison, and impure thought, as in thoughts can be learnt and with this extinguish.\textsuperscript{85}

Lichifinus mentions that:

All say that [the unicorn] is born in eastern India, in the wild forests.\textsuperscript{86}

In stark contrast to the certainty of other reports, the unicorn texts repeat hearsay, not fact.

Daniel E. Collins has found that such changes to the standardised language of chancery documents were occasioned by a significant contextual difference: atypical constructions were used to highlight notable deviations from what was expected from the testimony.\textsuperscript{87} Could the discussions of the alicorn have contained some unusual element that could explain the changed manner of expression? Typically, physicians were expected to describe a medicament’s properties and assess its utility in medicine; reports on unicorn horns, in contrast, stray into rather different areas, such as the exact origins of the unicorn. Noteworthy is the contemporary state of ideas about the unicorn in Europe: many people continued to maintain that it was efficacious, but increasing numbers of physicians and other learned men began to doubt its properties, and even the very existence of the unicorn.\textsuperscript{88} Circumstances would seem to confirm the supposition that the objections to the horn constituted a significant contextual difference that needed to be conveyed in the reports. Lichifinus and Engelhardt later helped carry out an experiment on the horn to establish its quality, a unique occurrence.\textsuperscript{89} It thus seems that Lichifinus and Engelhardt had significant doubts about the value of unicorn horn, doubts that caused an exceptional shift in the language of expression of the reports.

\textsuperscript{85} ‘а что належит тому рогу сила, и все философы едиными усты говорят, что тот инрог противен есть всякой отраве и порчи и моровому поветрею и оспе и коросте и всякым эльм болезнем, потому, что своею силою, из человека поть учинить, и через тот поть всякую болезнь от сердца отгонит . . . А как тот рог на вороту носят, сказывают, что от всякой отравы хранит; и помышление блудное, как в мысли иметь учнет, и тем погашает’, Mamonov, Materialy, ii, pp. 160-62; RGADA f. 143, op. 2, ed. khr. 194.
\textsuperscript{87} Collins, Reanimated Voices, see in particular p. xvi; Collins, ‘Speech Reporting’, pp. 278-83.
\textsuperscript{88} Shepard, Lore, pp. 155-190.
\textsuperscript{89} RGADA f. 143, op. 2, ed. khr. 306; Mamonov, Materialy, iii, p. 696.
The possibility of scepticism on the part of the Apothecary Chancery physicians is enhanced by another sentence from Lichifinus’ text, in which he states:

[m]any doctors informed us [of things concerning the unicorn], in which it is impossible to believe, but, in short, he, the doctor, will complete his business.  

On the basis of this statement, Sabine Dumschat has argued that Lichifinus, in particular, opposed the use of the alicorn, whereas his colleagues in the Apothecary Chancery were more positive. She proposes that Lichifinus’s text amounts to an attack on his colleagues, as he refers to ‘many doctors’ as promoters of the horn. In 1657, when Lichifinus’ text was written, the only physicians working in the Apothecary Chancery were Lichifinus himself, Graman and Engelhardt. There were thus potentially only two other Apothecary Chancery physicians for Lichifinus to have been discussing, not the ‘many’ he describes. Moreover, both Engelhardt and Graman also expressed scepticism about the unicorns: Engelhardt used the same technique as Lichifinus, reporting hearsay; Graman referred to the horn as a medicament used by savages [dikie liudi], a pointed comment to make about a substance used by the European elite. Engelhardt and Graman seem to have shared Lichifinus’ sceptical attitude toward unicorns; it thus seems unlikely that Lichifinus was referring to them when he mentioned ‘many doctors’ who had informed him of unbelievable things concerning unicorns.

Indeed, like Lichifinus, Engelhardt also included an explicit statement of scepticism about the unicorn:

[c]oncerning the monoceros, or unicorn, ancient philosophers have dreamed up varied and surprising things, and such [creations] are highly repugnant to

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92 Von Gaden and Sommer were also working in the Apothecary Chancery at that time, but as surgeons (only later would they be promoted to physician). Unkovskaya, Brief Lives, p. 120; Dumschat, Mediziner, pp. 332-33.
93 Mamonov, Materialy, iii, pp. 636-37.
current scholarship, and about such matters he, the doctor, finds it inappropriate to write, were it not for the fact that it is about such a matter that he has been commanded to write, and he does so only in connection to this command.

Engelhardt’s description of ancient ideas about unicorns as dream-like suggests that he considered the statements of antique texts on this animal to be so extraordinary as to be unbelievable. The ancient texts were indeed problematic as sources on the unicorn: the Roman naturalists Pliny and Claudius Aelianus, and the Greek physician Ctesias of Cnidus all described the unicorn differently; Aristotle devoted little attention to the subject, and Galen ignored it entirely. It thus, contrary to Dumschat’s assertions, seems highly unlikely that Lichifinus was referring to his colleagues Graman and Engelhardt in his criticism of physicians with positive views of the unicorn horn, as they shared his scepticism.

To whom, then, was Lichifinus referring? Lichifinus describes these ‘many doctors’ as informing a plural ‘us’, even though he is referred to in the singular later in the same sentence. It therefore seems likely that Lichifinus is speaking about the collective experience of himself, Engelhardt and Graman, possibly prior to joining the Apothecary Chancery, in discussing the properties of the alicorn with colleagues. Lichifinus’s statement is an indictment of other European physicians, not of his Apothecary Chancery colleagues Graman and Engelhardt, with whom he broadly shared the same, sceptical views on the alicorn.

A second significant feature of the unicorn texts is the use of pronouns and personal forms, as demonstrated in both Lichifinus’ and Engelhardt’s texts. Such statements are noteworthy for two reasons. Firstly, it shows these texts once again deviating from the institutional manner of expression, here by using personal forms

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96 Shepard, *Lore*, pp. 34, 121, 139.


98 See above, pp. 130-31.
rather than maintaining an impersonal manner of expression. Secondly, the author is referred to in the second person, not the first. This feature makes it likely that the shift to personal forms in the unicorn texts was in part determined by the scribes. The majority of Apothecary Chancery reports used the indicative mood and impersonal sentence constructions to convey objective knowledge; in stark contrast, the unicorn horn documents use subjective statements and personal forms in order to underline a sceptical attitude towards the horn on the part of the physicians. Both modes of expression – the institutional standard and the atypical language of the unicorn texts – show how the specific context of the Apothecary Chancery affected the language in which reports were composed.

Translating and Editing Reports

Apothecary Chancery medical practitioners, as the compiler of reports, necessarily had a large degree of influence over their content and manner of expression; scribes and translators, as responsible for producing the final Russian version of those texts, also had significant control over both content and language. Such changes to texts could be caused by deliberate editing, or by inaccurate translation. The unicorn documents provide examples of both.

In Lichifiniius’ and Englehardt’s statements of scepticism about the unicorn, their doubts are expressed in the third person, phrased as ‘he the doctor’. The use of the pronoun ‘he’ and the noun ‘doctor’ in both reports deviates from the norm of impersonal constructions in Apothecary Chancery texts. As noted by Daston, it was common elsewhere in Europe for scholars to refer to themselves in a text using the first person. Why would both Lichifiniius and Engelhardt choose to use the third person, rather than reverting to the common European practice of using the first person? Another possibility is that the phrase was inserted into the Russian translation of these reports by a scribe. Here it is appropriate to return once again to Daniel E. Collins’ views about how unusual testimony was highlighted: in court cases scribes would use such third person constructions to emphasise that unexpected utterances were indeed the opinion of the witness. Given the apparent obsession of the Russian court with unicorn horn it could be that the use of the phrase ‘he the doctor’ was a deliberate mechanism of the scribes for foregrounding controversial aspects of written testimony;

99 This is discussed below, pp. 132-33.
100 See above, pp. 130-31.
the scribe wanted to emphasise that it was the physicians who had made such a statement, and so distance himself from it. As the Latin originals have not survived, it is impossible to firmly state whether it was the physicians or the scribes who introduced this use of the third person into the text. Nevertheless, the use of a similar device by other Muscovite scribes would seem to suggest that this phrase was inserted by the scribe, and not by the physicians. The deviation from the standard, impersonal manner of expression found in the unicorn horn reports was thus apparently due in part to the Russian scribes.

Translation could also significantly alter a text. The Apothecary Chancery had well-known translation problems: it was difficult to find people who knew both Russian and a Western European language, and anyone that did was also in demand by the Ambassadorial Chancery. The establishment of the Slavo-Greco-Latin Academy in 1685 likely helped with such issues, as it provided well-trained translators. Nevertheless, demand for translators seems to have been greater than supply, reflected in a significant gap between the best and worst translations.

Many of the Apothecary Chancery reports show good quality translation, with the Russian text being both comprehensible and a close rendering of the Latin original. An instructive example is the 1690 report on the university of Padua. Despite dealing with an institution with no Russian equivalent, the translation accurately conveys the text:

Ad mandatum Serenissimorum nostrorum nos infra subscripti Doctores et Medici jurati perlustratimus testimonia Academica Illustris Gymnasi, Patavini in causa rectus ad nos delatorum.

Богу преблагому и величайшему по указу пресветлейших наших, мы ниже подписанные дохтуры и медики заприсяженные посмотрели свидетелства академиская славного училища Падвинского пришествия ради вновь к намъ.

Also typically, the Padua report, like most reports, was not significantly edited; all sentences present in the Latin original also appear in the Russian translation. However,

103 See Dumschat, Mediziner, pp. 365-73.
104 RGADA f. 143, op. 3, ed. khr. 322. See Chapter Three, pp. 99-104.
there were notable exceptions to these general rules, which reveal important aspects of
the report production process.

One document shows an unusually bad translation. In Lichifinus’ 1657 report on
unicorn horn, he describes an experiment to verify the horn. The Latin original of this
text does not survive, but the odd phrasing of the Russian text raises questions about the
quality of the translation

Тако–ж в ящику будет есть порча, и инрог у того будет, тотчас
разламается на части, и многих иных дел учинит, о которых которые
уведали, знают.105

And so in a box is placed a curse, and a unicorn [horn] will be with it, and
immediately [the curse] will be broken into pieces, and many other ways are
made about which those who have seen, know.

In its basic details Lichifinus’ experiment is similar to one described by the sixteenth-
century Italian physician, David de Pomis. De Pomis proposed placing part of a unicorn
horn in a box with scorpions. If the horn were genuine, then the scorpions would die.106
Chancery translators were typically Polish, or from elsewhere in northern Europe, and
so may well have not known what a scorpion was. The word used instead – porcha –
could be loosely interpreted as meaning ‘an accursed thing’, which certainly fits with
the meaning of the de Pomis text. Also, ‘breaking apart’ could be an analogy for
destruction or death. It seems likely that Lichifinus described either de Pomis’ exact
experiment, or one strikingly similar, and that the sense of the text was lost in
translation. Knowledge produced in the Apothecary Chancery could thus differ from the
meaning of the primary composer of the report because of translation problems.

Transcription of oral reports could also significantly shape the final form of the
report. On 1st January 1658 a priest’s wife was found dead, and three Apothecary
Chancery physicians – Lichifinus, Engelhardt and Graman – examined the body for
signs of plague. Engelhardt said:

105 RGADA f. 143, op. 2, ed. khr. 194; Mamonov, Materialy, ii, p. 160.
106 Gotfredsen, Unicorn, p. 158.
That woman had scrofula of the stomach . . . and that [scrofula] does not cause the plague.\textsuperscript{107}

Graman agreed, stating that:

That woman had scrofula of the stomach . . . and that [scrofula] does not cause the plague.\textsuperscript{108}

A significant feature of these two statements is the high level of similarity between them; they are almost identical. It likely indicates that these were not the exact words of Engelhardt and Graman, as the sole difference between them is orthographical (variant spellings of scrofula). Evidently, the scribe transcribing Engelhardt’s and Graman’s statements paraphrased their words in the same manner as observed by Daniel E. Collins for other Muscovite documents which transcribe speech.\textsuperscript{109} Despite the lack of an original for comparison, it is clear that oral reports were subject to the same sort of minor adjustments by scribes found in written reports.

Some of the written discourses show signs that the scribes or bureaucrats had made much larger alterations to the physicians’ texts in the process of translating them. Such alterations are particularly evident in two of Samuel Collins’ reports: a discourse on valerian from 1665, and a commentary on venesection from 1664. In the 1665 text on valerian root Collins covers the physical appearance, properties, methods of preparation and modes of consumption of the plant.\textsuperscript{110} In the Russian version of the document, alongside the translation of Collins’ report, is an additional section, introduced in the report as excerpts from a Russian herbal (described only as the herbal with 520 chapters) concerning the properties of valerian root. As the text specifies that the origin of the additional articles is a Russian herbal, Collins, who knew very little Russian, could not have chosen those excerpts to accompany his report; they must have been chosen by a Russian-speaking member of the Apothecary Chancery staff, very probably the scribe who prepared the final, Russian version of Collins’ report. The

\textsuperscript{107} ‘у той жонки болезнь была въ животе золотуха . . . а моровые болезни отъ тово не бываетъ’, RGADA, f. 143, op. 2, ed. khr. 300-03; Mamonov, Materialy, iii, pp. 694-95.
\textsuperscript{108} ‘у той жонки болезнь была въ животе золотикъ . . . а моровые болезни отъ тово не бываетъ’, RGADA, f. 143, op. 2, ed. khr. 300-03; Mamonov, Materialy, iii, pp. 694-95.
\textsuperscript{109} Collins, ‘Speech Reporting’, p. 283.
\textsuperscript{110} RGADA f. 143, op. 2, ed. khr. 741; Mamonov, Materialy, iii, pp. 791-94.
articles from the herbal complement Collins’ abstract description of the properties of the root by providing specific recipes for its use. Here, Russian scribes chose to use their ability to change the text of reports to include extra material.

Reports could also have material removed from them. Such was the case with Samuel Collins’ report on venesection, written on the 31st May 1664. In this text Collins’ focus is the use of astrology to determine the correct days to perform venesections, although he also discusses which veins should be cut, and which diseases can be treated with venesection. Unkovskaya has noted that parts of the Latin original of this text were not preserved in the Russian translation, although she does not specify which parts. These sections, she claims, were concerned with cosmology, and were not translated due to the ban she proposes existed in the Apothecary Chancery on the discussion of medical theory or natural philosophy in order to prevent heretical ideas being communicated to Muscovites. Comparing the Latin and Russian versions reveals four sentences present in the original Latin that are absent from the Russian:

You have been weighed on the scales and found wanting.

This first missing sentence is from Collins’ discussion of the feast of Belshazzar, an event recorded in the Bible, in which words from God appeared on a wall. The Russian translation of Collins’ text retains the reference to the feast, but excludes the quote.

Similarly, the Russian translation preserves a description of God speaking to Job, but removes Collins’ quote of God’s exact words:

Can it be that you could bind the delights of the Pleiades? Or could dissolve the cords of Orion?

Here Collins is again directly quoting the Bible (Job 38. 31), a passage in which God enumerates his powers over the natural world.

Two other sentences were entirely absent from the Russian translation, one from the main text:

111 RGADA f. 143, op. 2, ed. khr. 738.
113 ‘Appensus fuisti Lancibus et inuentus es minore pondere’, RGADA f. 143, op. 2, ed. khr. 738. On Belshazzar's feast see Daniel 5. 27.
Of the victory of Deborah and Barak it was sung that the stars themselves fought in their ramparts against Sisera.  

The other is a marginal comment placed near the description of the David incident:

Saint Seth with his sons is said to have first taught astronomy. Josephus. Antiquities of the Jews.

Deborah was a prophetess who foretold the victory of the Jews over the Canaanite army led by Sisera. Seth was the third son of Adam and Eve who, according to Flavius Josephus, discovered many of the secrets of astronomy, and recorded them on pillars for the edification of later generations. Seth is clearly mentioned as Biblical precedent for the practice of astronomy, and, by extension, astrology. The song of Deborah and Barak, like the interpretation of the writing on the wall by Daniel for Belshazzar, demonstrates the communication of God with man through signs. The existence of such signs is here evidently meant to support the practice of astrology, which seeks signs in the world in order to predict events and inform behaviour. Moreover, as demonstrated by God’s words to Job, God has power over the movements of the stars. Reading the stars as astrologers do is thus entirely compatible with Christianity, as it constitutes seeking guidance from God through the signs he has left in the universe. In using Biblical references to support the use of astrology, Collins was following common Western practice. Collins undoubtedly included these sentences to support the use of astrology for medical purposes, but Russian officials judged them to be inappropriate and removed them from the final text.

Significantly, there is another set of Apothecary Chancery documents from which Biblical elements may have been removed: the unicorn reports. When the Greeks were

translating the Bible from Hebrew into Greek they rendered the Hebrew word Re’em as *monoceros*, or unicorn; modern translations of the Bible render this word as ‘wild ox’.

Consequently, the word ‘unicorn’ appears in the following Biblical verses:
Numbers 23. 22; Deuteronomy 33. 17; Psalms 22. 21; Psalms 29. 6; Psalms 92. 10; Isaiah 34. 7; Job 39. 9-12. Thanks to the initial (mis)translation, unicorns then appeared in different translations of the Bible, including the East Slavic one. Western texts on the unicorn commonly cite the Bible. To the devout early modern Christian the Bible’s standing on the unicorn represented absolute authority: the Bible mentioned the unicorn, thus the unicorn must exist. Even Ambroise Paré, who had significant doubts about the unicorn and the medicinal properties of its horn, stated that it must exist, as the Bible says that it does.

In the seventeenth century it was difficult, if not actually impossible, to deny entirely the existence of unicorns because they were mentioned in the Bible. Biblical citations were thus a significant feature in the development of Western European unicorn texts.

In stark contrast to Western European texts, Apothecary Chancery reports on unicorn horn nowhere mention the Bible. Given the central role the Bible played in supporting the existence of the unicorn, such an absence is striking. It is unthinkable that Graman, Engelhardt and Lichifinus did not know that the Bible mentioned unicorns: as educated Protestants they would have been very familiar with the Bible. The only possible conclusions are that either the physicians themselves consciously decided not to mention the Bible, or that the scribes removed any Biblical citations that were present in the original Latin texts.

It thus seems likely that the Apothecary Chancery either entirely forbade, or strictly regulated, the mention of religious matters in their reports. It should be noted that the majority of Apothecary Chancery medical practitioners were not members of the Russian Orthodox Church. The Russian authorities were in many ways tolerant of

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other Christians in their service. Tolerance was, however, limited: although German Protestants were allowed to build their own churches, Polish Catholics were not. Biblical references in an Apothecary Chancery report would have brought Russians into unacceptably close contact with non-Orthodox religious ideas, and so they were removed.

The removal of Biblical elements sheds light on the motivation for editing in the Apothecary Chancery. Unkovskaya has claimed that editing of texts in the Apothecary Chancery was due to concerns over medical theory and natural philosophy. Clearly the Russians were prepared to edit Apothecary Chancery reports when considered necessary, but the evidence of the venesection and unicorn texts shows this to be focused on religious and not medical or natural philosophical concerns. Moreover, other documents also mention medical theory, albeit briefly. Particularly significant from this point of view is the report from 1690 on newly arrived graduates from Padua, in which mention is made of both Galenism and Chemical Medicine. Several other documents, including some composed by Collins, make mention of medical authors and their work on diseases. Unkovskaya's views are thus partly supported, as the deletion of Biblical references from the Collins’ text is likely to have been due to concern over heresy; there is no direct evidence for a ban on the discussion of medical theory. For the most part, the final, Russian version of Apothecary Chancery reports closely followed the originals composed by the physicians. On occasion, the texts were adjusted or edited when the Russian scribes felt that was appropriate, either to make a certain point clear, or to remove inappropriate information. Scribes and translators thus could significantly shape the final, Russian version of Apothecary Chancery reports.

**Dissemination and Use of Reports**

Once the final Russian version of the report had been prepared by Apothecary Chancery translators and scribes, it would be sent on to its intended recipient. Commonly, this would be someone in the chancery or court system, but on rare occasions reports could be sent elsewhere. Such was apparently the case with the post-mortem report of Charlotte Christine of Brunswick-Lüneburg written in 1715. Charlotte Christine was the wife of Peter the Great’s eldest son, Tsarevich Aleksei, and the first foreigner to marry

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123 Oparina, *Inozemtsy*, p. 16.
125 RGADA f. 143, op. 3, ed. khr. 322. See Chapter Three, 99-104.
126 See above, pp. 122.
into the Russian royal family since Sophia Paleologa wed Ivan III in 1472. She was a member of the European royalty, related to Marie Antoinette and educated at the court of August II, king of Poland. Her elder sister, Elizabeth Christine, was married to the Holy Roman Emperor Charles VI, making Charlotte Christine a good choice for a diplomatic marriage, especially as Russia was preparing for war against the Turks and needed Austria as an ally. The death of Charlotte Christine at age twenty-one thus presented a potential diplomatic problem for the Russian court.

Charlotte Christine’s post-mortem has been mostly overlooked by studies of the Apothecary Chancery, and is not published in Mamonov’s collection, possibly as it is written in Latin and German, with no accompanying Russian translation. As both the German and Latin copies are bound together in a booklet, it seems likely that they constitute a complete file, and that no Russian translation was produced of this report. Why would the Apothecary Chancery produce a report inaccessible to the vast majority of chancery bureaucrats and the tsar’s advisers? As Charlotte Christine was a foreign noble, and a rather well connected one at that, it seems probable that the report was prepared in order to be sent to her family, perhaps her brother-in-law the Holy Roman Emperor, in order to calm potential concerns over her death, and so the text was not primarily for the consumption of the Russian court.

The Charlotte-Christine post-mortem is unusual; most reports were circulated within the chancery system, and were used by their recipients as a part of the decision-making process. Such was the case with a group of documents from late April and early June 1645 regarding the treatment of Tsar Mikhail Fedorovich. On the 26th of May the report of his illness and proposed medicaments were taken to the tsar by the Apothecary Chancery director F. I. Sheremet’ev.

The doctors gave that report and [the report] was taken up to the tsar in [his] chambers and Fedor Ivanovich Sheremet’ev took [that] report and powder and sugar and balsam [to the tsar].

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127 On Charlotte’s marriage, life at the Russian court and death, see Bushkovitch, Struggle, pp. 341-44.
128 RGADA f. 143, op. 2, ed. khr. 1635.
129 ‘Такову скаску подали доктора и отнесена в верх к государю в хоромы принял скаску и порошок и сахар и балсам боярин Федор Иванович Шереметьев’, RGADA f. 143, op. 1, ed. khr. 206; Mamonov, Materialy, i, pp. 120-23.
The report was sent to the patient himself, in order for him to approve the course of treatment. This was typical for treatments of the tsar, and indeed conveying such reports to the tsar personally was a key duty of the Apothecary Chancery director, showing the latter’s role in disseminating reports. In this case, the treatment was approved of, but the very process of providing the patient with information on the proposed treatment raises the possibility that it could be rejected.

Russian officials in fact did reject the recommendations of their medical experts on several occasions. Notably, although the Apothecary Chancery put much effort into the production of reports questioning the utility of unicorn horns in 1657/8, the court nevertheless purchased those horns. This fact is significant for the interpretation of unicorns as medicaments in Russia. Historians have used the unicorn texts to support their arguments on the professional abilities of physicians at the Russian court: the unicorn texts have been harnessed by historians who see Apothecary Chancery physicians as charlatans and dropouts, with Pavel Miliukov stating that the ‘popularisation’ of the alicorn in Russia demonstrates the backwardness of Apothecary Chancery physicians. Miliukov’s stance does not tally with evidence from the rest of Europe. The unicorn trade was certainly in decline by the mid-seventeenth century, but it cannot be said that only ‘backward’ medical practitioners advocated its use; as discussed above, the debate on the horn was ongoing in Europe. Moreover, documents clearly show that it was the Russian court, and not the foreign physicians, which was driving the purchase of unicorn horns for medicinal purposes. In contrast to Miliukov’s assertions, foreign physicians did not deliberately introduce unicorn horn into Russia, but did so reluctantly, on the explicit orders of their Russian masters. Their reluctance was noted, but ultimately ignored. Russians valued medical expertise enough to require the production of reports, but clearly did not see the judgements contained in those reports as conclusive.

Another significant set of documents in which physicians’ recommendations were disregarded was the plague post-mortems. Such documents were produced in 1658 concerning the death of a priest’s wife, in 1677 concerning the deaths of Apothecary

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130 See Chapter Two, pp. 51-54.
133 See above, 116-20.
Chancery physician Laurentius Blumentrost’s wife and daughter, and in 1679 concerning the death of the Patriarch’s groom.\textsuperscript{134} In 1658, despite the categorical statements of both Engelhardt and Graman that plague was not the cause of death, all those connected with the case were nevertheless quarantined.\textsuperscript{135} It would seem that the danger of a plague outbreak in the capital was so serious that all possible precautions were taken, even if deemed unnecessary by medical experts. Here, context served to overrule the experts’ opinions.

Levin has interpreted the existence of the Apothecary Chancery as an endorsement of the Western practice of medicine by the Russian court.\textsuperscript{136} The Apothecary Chancery reports make an important qualification to Levin’s argument: Western medicine was endorsed both as a system of therapy and as an explanatory mechanism, but it was not seen as infallible. Apothecary Chancery reports were produced on the demand of courtiers and chancery heads, and were read by them as a part of their deliberations. The documents themselves, and the opinions of the physicians contained therein, were thus only one part of the process, which undoubtedly also involved other considerations, such as the dangers of plague. The occasional rejection of the physicians’ views should be seen in the context of the consumption of medical knowledge in Muscovy: Western medical expertise was considered to be of great utility, but it was always subordinated to the needs of the Russian court.

**Conclusion**

Russians officials and Russian chancery procedures had a significant impact upon the production of medical knowledge in the form of Apothecary Chancery reports. First and foremost, Russians selected the topics upon which reports were to be produced. Topic selection was the preserve of the Apothecary Chancery director, and higher Russian officials like the tsar; it was their choice of topics that skewed knowledge production towards practical matters of the department and the court. The Russians thus partly limited knowledge production through determining the topics upon which reports were to be written. Also significant is the reception of these reports; sometimes Russians

\textsuperscript{136} Levin, ‘Administration’, p. 380.
would simply ignore the recommendations made there, underlining the subordination of knowledge production to Russian needs.

Editing and translation were also significant elements in the knowledge production process. Reports were composed by Western experts, then translated and edited by scribes. Vital to the process of editing was the work of Russian scribes, who, following the work of Daniel E. Collins, must be seen as important contributors to the production process. Scribes removed or added sections into reports, adjusting their contents according to the needs of the court. Editing is thus significant for two reasons. Firstly, it was a vital part of the collective production of reports, shaping their content. Secondly, it was another way in which the Russians could maintain control over knowledge production. Russians limited knowledge production in Muscovy through topic selection and editing, not through an explicit ban on certain types of knowledge, like medical theory.

The language of these reports is also noteworthy. The overwhelming majority of texts produced by the Apothecary Chancery, both drafts written by the experts themselves and translations produced by scribes, adhere to an objective, impersonal manner of expression, in direct contrast to the standard mode of expression observed by Daston in contemporary Western texts. As knowledge was produced collectively, as part of an institution, an institutional style of expression emerged. There were, however, exceptions to this general practice, when personal and subjective forms were used. The shift in language use, like the shifts highlighted by Daniel E. Collins, acted to highlight disagreements, primarily the disagreement between Russian officials and foreign experts over unicorn horns. Collective production and Russian procedures thus even affected the language in which reports were expressed. The following chapter explores a different type of knowledge production engaged in by the Apothecary Chancery: the composition of medical books.
Chapter 5: Medical Books and the Apothecary Chancery.

Medical texts, meaning works describing medical theory, medical practice, or the properties of medicinal ingredients, were a vital part of how medical knowledge circulated in early modern Europe. Through these texts, ideas originating in ancient Greece, the Medieval Arabic lands or early modern European states could be disseminated to medical practitioners working all over Europe. Some such texts were also in circulation in Muscovy. Scholars have devoted attention to Russian-language medical works, focusing on such problems as which was the earliest Russian medical text, and to what the extent such texts are Russian, rather than simple translations.¹ This approach, however, ignores the complex cross-cultural nature of medical knowledge production in seventeenth- and early eighteenth-century Russia. Alongside reports, from the 1670s on, the Apothecary Chancery also produced medical knowledge in the form of medical books, specifically pharmacies, a type of early modern medical text which sets out how to prepare medicinal preparations; commonly, pharmacies, also known as pharmacopoeias, were (and still are) issued by official bodies, in which case the text serves to specify which medicines are sanctioned.² These sources, which have been almost ignored by historians, shed light on the consumption of knowledge produced by foreign experts in Russia.

A central question is that of the audience of these texts: they appeared during a period of significant changes in attitude towards literacy in Russia, and a great expansion of the numbers of readers. Such investigation of text and readership is often difficult; here, the investigation will be based on introductions to the Apothecary Chancery pharmacies, as they explicitly state their intended readership. These introductions reveal a different circle of dissemination than that of the Apothecary

¹ For surveys of the historiography, see Gruzdev, Travniki, pp. 5-17; Ippolitova, Travniki, pp. 23-49.
² All the Apothecary Chancery medical texts considered here are known only in manuscript form; it does not appear that they were ever printed. Printing was limited in seventeenth and early eighteenth century Russia, and medical works were not printed until later in the century. On printed Russian-language medical books, see S. M. Grombakh, Russkaia meditsinskaia literatura XVIII veka (Moscow: Akademia meditsinskikh nauk, 1953); Andreas Renner, Russische Autokratie und europäische Medizin. Organisierter Wissenstransfer im 18 Jahrhundert (Stuttgart: Franz Steiner Verlag, 2010). Printing was strictly controlled by the state in early modern Russia, and indeed was used to ensure that vital documents were not falsified or their meanings corrupted. See Simon Franklin, ‘Printing and Social Control in Russia 1: Passports’, Russian History, 37 (2010), 208-37; Simon Franklin, ‘Printing and Social Control in Russia 2: Decrees’, Russian History, 38 (2011), 467-92.
Chancery reports. As was demonstrated in the previous chapter, reports were for the sole use of chancery officials. Medical books were aimed at Russian apothecary students, patrons in the Russian courtly and provincial elite, commanders of the Russian army, and households. This chapter considers the changes this shift to producing medical books brought to the production and dissemination of medical knowledge by the Apothecary Chancery.

**Medical Texts and Education**

Early medical text production by the Apothecary Chancery was linked to education. From 1654 the Apothecary Chancery, which had previously exclusively used foreign medical practitioners, also trained Russians as apothecaries and surgeons. During the same period the Apothecary Chancery also relied upon Russians to act as ‘herb collectors’ *travniki*, gathering ingredients from around Moscow for use in the department. These groups of Russian-speaking staff required access to texts containing relevant medical knowledge: surgeons needed works on injuries and surgical techniques; apothecaries needed recipe books and manuals on apothecary techniques like distillation; herb collectors needed herbals, describing useful herbs to aid identification. Before the seventeenth century, the numbers and types of medical works in Russian were severely limited. It was thus necessary to acquire or produce such texts in Russian. This relationship between training and the production of medical works is made explicit in an order given by the tsar in 1678, concerning the transfer of translators from the Ambassadorial Chancery to the Apothecary Chancery, in which it is stated that medical texts should be translated into Russian so that ‘Russian people can become accomplished surgeons and apothecaries’ [русские люди могут быть совершенными лекарями и аптекарями]. Both terms – aptekar’ and lekar’ – referred to positions in the Apothecary Chancery developed on the basis of Western European medical professions. In other words, the order specifically identifies Western European medical professions as the professions in which Russians must be trained via access to medical works. The initial impetus to produce Russian-language medical texts came from Russian officials.

The 1678 order requires a revision of certain ideas about medical education in Russia. In fact, little is known about what these Russian Apothecary Chancery pupils

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3 Zmeev, *Vrachebniki*, p. 2; Gruzdev, *Travniki*, pp. 11-17.
5 See Chapter Three, pp. 78-79.
were taught. They were primarily instructed by a working medical practitioner, in the manner of apprenticeships in the West. Documents attest to who was being taught in this manner (primarily Musketeers who were assigned by the department, rather than being volunteers), which medical practitioners did the teaching, and little else. It is even difficult to assess the success of the project, as existing documents do not allow us to track those trained in this manner in their later careers. It is known that the Apothecary Chancery only produced a handful such medical practitioners, some of whom were apparently not adequately skilled. Training Russians as medical practitioners in the Apothecary Chancery was clearly thought to be important, but may not have been a very successful project.

Due to the reliance upon foreign knowledge and foreign practitioners in training these Russian students, attention has been focused on the language problem. It has been established that Russian medical students were educated in foreign languages as a part of their training, as in 1678, when two Russian students were sent to learn Latin and German from a teacher in the German Quarter. This program of teaching Russians foreign languages to aid their medical studies may have been extensive: Unkovskaya believes tuition in prescription Latin for Russian pupils began before 1678, and was a requirement for many apothecary and surgery pupils. Teaching Russians Western European languages was thus undoubtedly part of the strategy for educating Russian medical practitioners. Studies of the Apothecary Chancery school have, however, overlooked the 1678 order, which clearly demonstrates that making medical texts available in Russian was also a part of that plan. Russian pupils were to learn foreign languages, but foreign medical knowledge was also to be made available in Russian.

All the medical texts available to the new Russian medical staff, whether in Russian or in a Western European language, were kept in the Apothecary Chancery library. This library, which was in existence from at least the 1660s, was composed of both medical and non-medical works, as book collections of boyar estates were sometimes sent to the Apothecary Chancery library, either when the boyar had died, or the estate confiscated due to disgrace. Medical works held by the Apothecary Chancery library were acquired both from booksellers within Russia, and by importing books

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directly from Western Europe. No contemporary library-list exists, and so the ownership of certain books by the Apothecary Chancery has primarily been established through court documents and ownership marks in the manuscripts themselves. Using such methods, E. A. Savel’eva has identified 124 works currently held by the Library of the Academy of Sciences that were previously part of the Apothecary Chancery library. Savel’eva’s catalogue thus helps determine the sorts of medical works available to the Apothecary Chancery staff. Of those books listed by Savel’eva, 41 are somehow relevant to medical practice.

Unsurprisingly, several are devoted to medical theory: there are volumes by Galen, as well as the noted Arabic physician Al-Razi, and more modern figures like Andreas Libavius and Saxonia Hercules. The presence of such theoretical works is significant to Unkovskaya’s proposed ban on medical theory discussions in the Apothecary Chancery. If, as Unkovskaya has proposed, Apothecary Chancery physicians were banned from discussing theory in their reports, why would the department acquire such theoretical texts? At this time there was only a limited Russian book market, and much of the Apothecary Chancery collection was imported, a complex and expensive project. Acquiring these texts indicates that their contents were both useful and desirable for the Apothecary Chancery. The presence of works on medical theory in the Apothecary Chancery library thus further undermines Unkovskaya’s argument about the ban on medical theory.

Savel’eva’s list also includes other works related to medical practice, specifically, 27 books relating to the properties of natural objects: pharmacies, herbals, and works on natural history. An eighteenth-century library list of the Apothecary Chancery’s successor, the Medical Chancellery, also includes a number of pharmacies. Although the Apothecary Chancery library was not exclusively devoted to medical works, there

12 Statistics compiled by me on the basis of Savel’eva’s catalogue.
14 Statistics compiled by me on the basis of Savel’eva’s catalogue.
were titles in that collection that would have aided the medical staff with their work, and pupils with their studies.

The presence of works describing medicines and their ingredients in the Apothecary Chancery relates to the purposes of the library. Medical texts were sent out of the Apothecary Chancery with various staff members to help them identify required ingredients, as was the case with surgeon Adolf Ekimov in 1682 and Ivan Sofoiev in 1693. Neither document specifies if the men were successful in their search, but this incident does show why herbals were of use; they could be used to identify medicinal plants. Bogoiaavlenskii and Zmeev both have proposed that works in the Apothecary Chancery library were used as textbooks for students, as well as reference works for staff members. As the Apothecary Chancery, according to the order of 1678, was particularly interested in training apothecaries, works on preparing medicines and the properties of plants would have also been useful to these students.

Alongside books of recipes, Apothecary Chancery apothecary students would have required texts on the techniques of preparing medicines, such as distillation. Distillation was a foreign technology: the earliest record of distilled spirits in the Russian lands concerns a trip made by Genoese merchants carrying *aqua vitae* to the court of Muscovy in 1426. *Aqua vitae* is a concentrated alcoholic spirit, which was used during the early modern period in the preparation of various medicines. It is also the predecessor of Russian vodka, which emerged sometime in the fifteenth century, and was declared a monopoly of the Russian government in 1478. The Russian court’s interest in vodka production and distilling continued well into the seventeenth and eighteenth centuries, when the latest distilling equipment was imported from Western Europe.

A particularly important work on distilling was the *Liber de arte destillandi* [Book of the Art of Distillation] of Hieronymus Braunschweig (first edition 1500), which was translated into Russian as the *Skazanie o perepushchenii vodok*. Although there is no direct evidence that the Apothecary Chancery owned this work, it was available in Russia from the sixteenth century, and copies were being made of it well

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16 RGADA f. 143, op. 3, ed. khr. 42; RGADA f. 143, op. 2, ed. khr. 1547.
into the eighteenth century. It is thus conceivable that the Apothecary Chancery could have obtained a Russian-language copy of it. Braunschweig’s work was the first European book solely dedicated to distillation, and is an early example of pre-Paracelsian chemical medicine, as it promotes the use of medicines produced by distilling and other chemical processes. This text, or one like it, would have been essential to Apothecary Chancery apothecary students.

Surgery pupils would have required rather different texts to those needed by the apothecary students, specifically, works on anatomy, osteology, and surgical techniques. By the late seventeenth-century Western anatomy books had begun to be translated into Russian. One such text was the Problemata Aristotelia [Aristotle’s Problems], a Pseudo-Aristotelian work of natural philosophy, compiled in late antiquity, and presenting knowledge (including anatomy) in the form of questions and answers. A translation of the Problemata into Russian was made in 1677 from the Polish edition of 1560. Another work of anatomy, Andreas Vesalius’ famous De humani corporis fabrica [On the Fabric of the Human Body] was translated in 1658 by Patriarch Nikon’s translator, Epifanii Slavinetskii. The Problemata exists in several manuscripts of the late seventeenth and early eighteenth century, whereas the translation of Vesalius does not seem to have been much copied. It is unclear whether the Apothecary Chancery owned either of these Russian-language anatomy books; it did own a Latin-language copy of Vesalius, as well as that of his near-contemporary and fellow Italian Spigelius Adrianus. The only medical book kept in the RGADA Apothecary Chancery collection is an anonymous undated Latin osteology. Although these are all works on the human body rather than on surgical techniques, these texts would have been of use in teaching Russian pupils surgery.


22 Bogoiaevskii, Vrachevanie, p. 98.


24 Savel’eva, Katalog, pp. 178-80.

25 RGADA f. 143, op. 2, ed. khr. 1637.
The Russian translations of Braunschweig’s and Vesalius’ works are also important for wider questions about Russian medicine. Demidov has argued that Russian translations of Western scientific works were rarely of the most important text in a given field, and usually represented the past activity of the West.\textsuperscript{26} The presence of early modern works on both distilling and anatomy in the Russian corpus of translated medical texts undermines Demidov’s argument. Although distilling was known in the late Middle Ages, it was in the early modern period, with the rise of chemical medicine and Paracelsianism, that it became particularly important. The corpus of medical texts translated into Russian by the end of the seventeenth century was undoubtedly limited, but the science of distilling, so important for the development of early modern medicine, was represented. Moreover, Demidov’s conceptualisation of the ‘past activity of the West’ being determined by the date of publication of a work is flawed; the work of both Braunschweig and Vesalius continued to be important long after their initial composition. Indeed, ancient works of medicine like Hippocrates and Galen continued to be vital to much early modern medicine. Here it is more helpful to consider texts in terms of their usage: the Braunschweig text was still in common use in the West when it appeared in Russia, and so does not represent the past activity of the West. Russian translations of Western medical works were certainly limited, but did nevertheless provide Russians with vital elements of contemporary medical practice.

At least some of the newly available Russian-language medical books were indeed courtesy of the Apothecary Chancery, as had been laid out in the 1678 order on translation. Chancery documents testify to several individual works being translated.\textsuperscript{27} This work required regular access to translators, something that was always a problem for the Apothecary Chancery.\textsuperscript{28} Indeed, in the 1678 order on translation, it is states that one Ambassadorial Chancery translator was to be transferred to the Apothecary Chancery, as the department then lacked a Polish and Latin translator; as a consequence of this lack of a translator, the document notes, many medical works had not yet been translated.\textsuperscript{29} Such considerations undoubtedly slowed the Apothecary Chancery’s translation project, but the department did succeed in producing several medical books.

\textsuperscript{27} 1672 translation of a German medical book, Zmeev, \textit{Vrachebniki}, pp. 72-73. 1679 ten medical books ordered to be translated, RGADA f. 143, d. 2, ed. khr. 1290.
\textsuperscript{28} See Chapter Four, pp. 132-34.
\textsuperscript{29} RGADA f. 143, op. 2, ed. khr. 1207; Mamonov, \textit{Materialy}, iv, pp. 989-94.
The production of Russian-language medical works was linked to wider changes in attitudes to literacy in seventeenth-century Russia. Demidov notes that the rise in literacy in Russia across the seventeenth and early eighteenth centuries coincided with a period of expansion of Russian territory, as well as governmental and military expansion and reform. Such changes, Demidov argues, necessitated a greater engagement with Western European scientific, technical and practical knowledge, to facilitate the efficient administration of an expanding state and a busy army.\(^{30}\)

Acquisition of practical texts for the court and chancery administration increased under Peter, with Petr Postnikov sending multiple volumes back to Russia from his foreign assignment in 1702, including works on European law, and military handbooks.\(^{31}\)

The growing importance of practical texts in Muscovite culture is also evidenced by attempts to produce manuals in different spheres of creative activities in the late seventeenth century. Thus, in the 1660s, the great icon-painter Simeon Ushakov (1626-86) decided to produce a textbook for his numerous students detailing the techniques a good icon-painter should use, including some Western techniques. However, this project never came to fruition. Simon Ushakov’s project, although never completed, was important as a part of the contemporary debate over the criteria with which to judge icon painting. Some churchmen rejected all foreign icons, as well as Russian icons with foreign influences. Ushakov, his fellow painter Iosif Vladimirov, and Patriarch Nikon took a different view. As laid out in Vladimirov’s letter to Ushakov of 1665/6, these men believed that religious art should be judged by its artistic merits, not its place of origin; a badly painted Russian icon was worse than a well-executed foreign icon.\(^{32}\)

More successful was the project of Nikolai Diletskii (c.1630-after 1680), the Kievan choral master. Having been trained in Poland, Diletskii brought a number of Western innovations to the Russian court that were greatly appreciated by tsars Aleksei and Fedor, both of whom were music-lovers. In the 1670s Diletskii produced a reference work for singers and instrumentalists, laying out his approach to music theory, which was heavily influenced by Western ideas.\(^{33}\) Like Ushakov, Diletskii thought Russians could benefit from a manual introducing them to Western approaches. By the late seventeenth century there was a significant group of men associated with the Russian court who were pushing for the acceptance of Western knowledge because of


\(^{31}\) A list of Postnikov’s acquisitions are published in Tsvetaev, \textit{Mediki}, pp. 61-63.

\(^{32}\) Hughes, ‘Moscow Armory’.

its practical benefits, a goal they hoped to achieve through the production of manuals. It was this focus on creating practical texts that lead to the compilation of the earliest Apothecary Chancery medical book.

*The Apothecary Chancery’s First Text: The Pharmacopoeia*\(^{34}\)

The earliest known medical book compiled by the Apothecary Chancery is the *Pharmacopoeia*, known in copies from 1700 on, although the main section of the text was apparently translated somewhat earlier (1676). This text is particularly significant to the history of the Apothecary Chancery and the creation of medical texts, as it is a composite text which includes recipes taken from the department’s files. Such crossover between Apothecary Chancery records and medical books reveals an important aspect of how the knowledge provided by the Apothecary Chancery was disseminated to Russians. Moreover, this text was designed to be used by Russian-speaking Apothecary Chancery medical staff and students, and so this text is vital to understanding how the Apothecary Chancery trained new medical staff.\(^{35}\)

The main section of the *Pharmacopoeia* starts with the statement

*Pharmacopoeia on the preparations of medicines, translated from Latin into Slavonic AD 1676*\(^{36}\)

Apart from its title (*Pharmacopoeia*), the text itself gives no other clue as to its origin. The text following this heading consists of recipes organised by type of medicine.\(^{37}\)

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\(^{34}\) Nine manuscripts from the late seventeenth and eighteenth centuries containing the *Pharmacopoeia*, or a fragment of that text, have been consulted in the preparation of this chapter. GIM [Gosudarstvennyi istoricheskii muzei *sobranie rukopisei E. V. Barsova*, No. 2238 (*Pharmacopoeia*, 18\(^{\text{th}}\) century); GIM *sobr. Barsova*, No. 2241 (*Pharmacopoeia*, 18\(^{\text{th}}\) century); GIM *sobranie rukopisei A. S. Uvarova*, No. 312 (*Pharmacopoeia*, late 17\(^{\text{th}}\) century); GIM *sobr. Uvarova*, No. 320 (Collection including *Pharmacopoeia*, late 17\(^{\text{th}}\) century); GIM *sobranie rukopisei I. A. Vakhrameeva*, No. 534 (*Pharmacopoeia*, 18\(^{\text{th}}\) century); GIM *sobranie rukopisei I. E. Zabelina*, No. 674 (*Pharmacopoeia*, 18\(^{\text{th}}\) century). RGB [Rossiiskaia gosudarstvennaia biblioteka] f. 37 (Bol’shakova), No. 228 (*Pharmacopoeia*, 1700); RGB f. 310 (Sobranie V. M. Undolskogo), No. 698 (*Pharmacopoeia*, early 18\(^{\text{th}}\) century). RNB [Rossiiskaia natsional’naia biblioteka] Kollektiia SanktPeterburgskiaia Dukhovnaia Akademiia, No. 410 (Collection including *Pharmacopoeia*, early 18\(^{\text{th}}\) century).

\(^{35}\) Gruzdev, *Travniki*, p. 25; Bogoiavlenskii, *Vrachevanie*, pp. 100-01.

\(^{36}\) Формокопия о составлении лекарств переведенная с латынского языка на словенский от р[о]ждества христова 1676’, RGB f. 37 (Bol’shakova), No. 228, l. 7.
There are recipes for plasters, ointments, powders, syrups, sugars, oils, vodkas, elixirs, and other alcoholic spirits. This is typical for the medical texts ascribed to the Apothecary Chancery; unlike the reports, which commonly cover disease origin and symptomology, these medical texts exclusively present recipes and treatments. The focus on complex recipes and treatments that use specialist techniques, which will here be referred to as pharmaceutical knowledge, is important to the purpose of this text. As discussed above, distillation was a technique requiring training and specialist equipment; alcohols and elixirs could only be produced by experts with access to such equipment. The content of this text – recipes requiring specialist equipment and training – highlight its usefulness to the Apothecary Chancery as a training aid and reference work for its staff.

The relationship of the *Pharmacopoeia* to the Apothecary Chancery is underlined by the fact that the Russian State Library manuscript of 1700 includes a number of Apothecary Chancery records appended to the main text. The records are all descriptions of patient treatments and prescriptions dated 1654-81, dealt with by different medical practitioners: Doctors Hartman Graman and Stefan von Gaden (with his assistant Ivan Venediktov), apothecaries Roman Benyon and Christian Eichler. As the Apothecary Chancery records were not generally accessible to those outside the chancery system, it seems likely that the text was compiled by an Apothecary Chancery employee. Furthermore, it is unlikely that the department would have allowed its records to have been so directly used in a text accessible to anyone; they were sensitive documents for internal use only. It is highly likely that the *Pharmacopoeia* was compiled by an Apothecary Chancery medical practitioner for use within the department.

Tracing the origin of the Latin recipe book without a definite text mentioned in the translation is extremely difficult. During the early modern period texts were frequently changed as they were translated. As Peter Burke notes ‘what were described at the time as “translations” often differed from the originals in major respects, whether they shortened the texts or amplified them.’ Following Garneu, Burke refers to such texts as ‘trandaptions’. That the *Pharmacopoeia* was translated from the Latin is not

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38 On the contents of reports, see Chapter Four, pp. 120-26.
39 See above, pp. 148-49.
40 RGB f. 37 (Bol’shakova), No. 228, II. 155, 43-44, 34-34ob, 41ob-42, 48-48ob.
41 Peter Burke, ‘Cultures of Translation in Early Modern Europe’, in *Cultural Translation*, ed. Burke and Po-Chia Hsia, 7-38 (pp. 31-33).
necessarily helpful in identifying the source text; it was common for early modern natural philosophical and medical texts to be translated into several languages, almost always including Latin. Thus, although the Russian text clearly states that it was translated from the Latin, the original text could have been composed in any European language. The form and content of the Russian Pharmacopoeia thus do not provide sufficient information for establishing its Western sources.

There were a great number of pharmacopoeias available in Europe by the late seventeenth century. A number of works could have served as the basis for the Russian Pharmacopoeia. The following Latin-language Pharmacopoeia texts were available, or may well have been available, to the Apothecary Chancery in the 1670s:

- *Pharmacopoeia medicochymica*[^44]
- *Pharmacopoeia Galeno-Chemica*[^45]
- *Pharmacopoea de Boderon*.[^46]
- *Pharmacopoea Augustana*.[^47]
- *Quercetani Pharmacopoea Dogmatica*.[^48]

[^44]: *Pharmacopoeia medicochymica* siue *Thesaurus Pharmocologius, quo Composita quaque Celebriore; Hinc mineralia, vegilabilia et animalia chymico-medice, describuntur, atque ni super Principia physica Hermetico Hypocratia candide exhibentur*, by the German chemist Johann Schröder (1600-64). First suggested as a possibility by Zmeev. See Zmeev, *Vrachebniki*, p. 96. There are extant orders to translate this text, from 1662 and 1670, but it is unclear whether those orders were fulfilled. Moreover, these orders significantly predate the period of composition of the Russian Pharmacopoeia. For the 1670 order see RGADA f. 143, op. 2, ed. khr. 903.
[^45]: *Pharmacopoeia Galeno-Chemica post Renodaeum Quertanum aliosque huiss generis celeberrimos utriusque medicinae doctores practicos adornata selectissimisque medicamentorum compositionibus, experimentis, et observationibus Spagyricis rarissimis et novis, nec non morborum omnium appropriatis remedii probatissimis aducta. Accesserunt institutiones pharmaceuticae Methodo elegantissima praeparandi*, Frankfurt, 1651, Johannes Daniel Hortius. A copy of this text is included in the modern catalogue of the Apothecary Chancery library, where it is the only text with the word ‘pharmacopoeia’ in the title. Savel’eva, *Katalog*, pp. 93-94. It is also mentioned in an early eighteenth-century list of works held by the Medical Chancellery, the Apothecary Chancery’s successor. See Khoteev, ‘Biblioteka’, pp. 44-47. However, it is unclear exactly when this text entered the Apothecary Chancery collection.
[^46]: This text was held by the Medical Chancellery. Khoteev, ‘Biblioteka’, pp. 44-47. It has not proved possible to identify this text.
[^47]: This text was held by the Medical Chancellery. Khoteev, ‘Biblioteka’, pp. 44-47. This is a city pharmacopoeia, from Augsburg, Germany, first produced in 1597. Such city pharmacopoeias were typically revised multiple times, and there is no way to establish which edition the Medical Chancellery owned.
Various works thus may have served as sources for the Russian *Pharmacopoeia*. It is also possible that the Latin text from which the Russian *Pharmacopoeia* was taken was written or compiled in Russia by an Apothecary Chancery physician, specifically for translation into Russian, in the manner in which the longer Apothecary Chancery reports were produced. If this was the case, only the discovery of the Latin manuscript could definitively establish its origin. At the present state of research, it is only possible to state that the main text of the Russian *Pharmacopoeia* was produced from an unknown Latin pharmacopoeia available in the Apothecary Chancery library in 1676.

Authorship of the *Pharmacopoeia* has also yet to be firmly established. Zmeev and Prussak have both identified the compiler as the Ivan Venediktov recorded as von Gaden’s assistant. Zmeev makes this assumption based on one section of text from the *Pharmacopoeia*:

> On the 41st [sic] February 1651. Doctor Stefan Ievlevich sent me, surgeon Ivan Venediktov to the house of okol’nichii Boris Gavrilovich Iuzhkov to treat his servant Tikhon.

Venediktov himself is a rather mysterious figure, who does not feature in most Apothecary Chancery histories. It is significant that Vendiktov is described as a surgeon; many surgeons in the Apothecary Chancery only had a basic literacy. In order to translate a Latin text, Venediktov would have required significant skill, even with the assistance of a professional translator. Moreover, we know little about the process

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48 This text was held by the Medical Chancellery. Khoteev, ‘Biblioteka’, pp. 44-47. This text is most likely the work of Joseph Duchesne or du Chesne, also known as Josephus Quercetanus (1544-1609). Duchesne wrote his pharmacopoeia in 1607, and so this text could well have been available to the Apothecary Chancery in 1676.

49 This text was held by the Medical Chancellery. Khoteev, ‘Biblioteka’, pp. 44-47. This text is a copy of the official pharmacopoeia of the city of Amsterdam, first compiled on the initiative of the mayor (and trained surgeon), Nicolaes Tulp (1593-1674), in 1636.

50 See Chapter Four, pp. 110.


53 Zmeev has managed to establish some biographical details for him. See Zmeev, *Vrachebniki*, pp. 119-21.
of composition of this text, especially as the original Apothecary Chancery report from which that section was taken is no longer extant. It is very possible that the first-person mention of Venediktov was taken from the original report. If that were the case, that section of text could easily have been copied verbatim from the report, and so have no probative value in determining authorship of the Pharmacopoeia. In that case we are left with no significant link between Venediktov and the Pharmacopoeia, and must look elsewhere for the compiler of this text.

Another candidate for authorship of the Pharmacopoeia is Daniel Gurchin, as proposed by Panich.\textsuperscript{54} Prussak also sees Gurchin as linked to the Pharmacopoeia, but states that Gurchin produced a second version of the Pharmacopoeia, sometime after Venediktov’s version.\textsuperscript{55} Little is known about Daniel Gurchin, who is only mentioned once in the Apothecary Chancery records, in a document from 1703.\textsuperscript{56} It is unknown when he entered the service of the Apothecary Chancery, how he was recruited for that duty, or when he left. In 1701 he was the second man to open a private apothecary shop, endorsed under new regulations.\textsuperscript{57} A. V. Oreshnikov has proposed that the Apothecary Chancery’s Daniel Gurchin was the same Daniel Gurchin (also known as Daniel Hurczyn, a Pole) who wrote the poem *Triumph of the Polish muse* (*Triumf Pol'skoi muzi*), on Peter’s victory over Sweden in 1706. Oreshnikov’s supposition is solely based on the similarity of names, and their period of activity but, given the limited circle of literate men in Russia at the time, it seems probable.\textsuperscript{58} Gurchin can definitively be linked to a number of later medical books, including the *Reestr iz dokurskikh nauk*, which was composed on the basis of the Pharmacopoeia.\textsuperscript{59} Thus it is highly likely that Panich is correct in identifying Gurchin as the sole compiler of the Pharmacopoeia.

Alongside the Latin Pharmacy and Apothecary Chancery records, the Russian State Library manuscript from 1700 also includes multiple additional recipes in Latin

\textsuperscript{55} Gruzdev, *Travniki*, p. 25; Bogoiaevskii, *Vrachevanie*, p. 100-01.
\textsuperscript{57} See Chapter Six, pp. 187-88.
\textsuperscript{58} Oreshnikov, ‘Gurchin’, pp. 55-67.
and Polish, attached to the end of the manuscript.\textsuperscript{60} The addition of recipes to the end of a manuscript was common practice in Russia, as in the rest of Europe, but it is unusual to find additional recipes in a different language from the rest of the text. Often additional recipes are added by the owners of a manuscript, with each owner’s recipes forming a discrete section. The recipes in Latin and Polish do not form such discrete sections: they are interspersed between other additional recipes in Russian. The most likely scenario for producing such a mixture of languages is that the manuscript was kept for some period of time in a household or institution in which both foreigners and Russians had access to the text. Only two institutions in seventeenth century Russia provided such an environment: the Ambassadorial Chancery and the Apothecary Chancery. Given the medical character of the book, it is highly likely that the 1700 RSL manuscript was the property of the Apothecary Chancery, further linking the Pharmacopoeia to that department.

If the 1700 copy of the Pharmacopoeia was indeed the property of the Apothecary Chancery, the additional recipes reveal more about the use of this text. Additional recipes are a sign of active engagement with a text, showing that it in frequent use as a repository of knowledge. The appearance of such multi-lingual additions in the text around 1700 shows that at that time this work was accessible to and being used by the staff of the Apothecary Chancery as a reference work on the production of medicines. The Pharmacopoeia was thus apparently in active use by medical professionals at the Russian court. Moreover, the additional recipes show a continuous engagement with pharmaceutical knowledge in the Apothecary Chancery by many practitioners, including, apparently, Russians. Within the Apothecary Chancery pharmaceutical knowledge was constantly circulating and being added to, a process in which the Russians themselves took part.

As the Apothecary Chancery began to train and employ Russians as medical staff, Russian-language medical books containing practical knowledge became of vital importance. All these works were foreign in origin, but some, like the Pharmacopoeia, were adapted to the specific purposes of the Apothecary Chancery, like training Russian medical practitioners. These pupils, native medical practitioners with knowledge of Western medicine, were an entirely new form of Russian servitor, and a group fundamentally shaped by their reliance on foreign ideas and practices. Dissemination of pharmaceutical knowledge via the Pharmacopoeia was thus similar to that of the internal Apothecary Chancery reports, as it extended only to employees of

\textsuperscript{60} RGB f. 37 (Bol’shakova), No. 228.
the department; it was dissimilar in that the particular servitors it was designed to reach were themselves new additions to the chancery system.

**Texts for Patrons**

Following their creation of a work for Russian-speaking medical students, in the 1690s the Apothecary Chancery began to produce medical books for other sections of Muscovite society. The earliest such works were composed for and presented to Russian patrons, in particular members of the provincial and courtly elites. The utility of presenting texts to Russian patrons was related to changes in attitudes to both literacy and Western knowledge among that elite.

Up until the sixteenth century, the ability to read and write had essentially been seen as a skill, with no significant cultural importance attached to it. By the eighteenth century there was a growing acceptance of literacy as an essential characteristic of a boyar. From the early seventeenth century onwards, it became increasingly common for boyars to have private libraries. Religious works made up a very significant percentage of works in these libraries, with various historical, moral and some literary works also being present. The Classics did not make a significant impact on Russian book culture during this period. Despite absences of certain types of text common elsewhere in Europe, the range of books available to Russians did increase across the century, as did the proportion of foreign-language works in Russian libraries.61 Although the range of works available in Russian libraries was rather limited, the growth of boyar libraries across the seventeenth century nevertheless testifies to the perception of book learning as a cultural, rather than simply practical activity.

Boyar libraries essentially aped those of their tsars, and all the seventeenth century tsars had significant book collections, which were often begun at childhood. In 1625 Prince Dolmatskii produced the first Russian-language theoretical text on geometry, basing his work on previous Western works on the subject. Demidov believes that this work was presented to the future tsar Aleksei Mikhailovich as a textbook.62 As an adult, Aleksei Mikhailovich continually expanded his library. Daniel Waugh considers that Aleksei’s Privy Chancery library was effectively his working library, which included a wide range of books, mostly on practical subjects.63 The teacher Johan

63 Waugh, ‘Library’.

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Verner Paus wrote a geography book for Tsarevich Aleksei (eldest son of Peter the Great). As book learning became more prestigious, so making a patron like the tsar a gift of a book dedicated to them became more common. The late seventeenth to early eighteenth centuries thus mark a significant shift in literate culture in Russia from a limited and marginal pursuit to a central part of court life, demonstrated by marked increase in the numbers and types of text, book collection, and the pursuit of patronage through the gifting of texts.

Far from all Muscovites shared this positive and practical attitude towards Western knowledge indicated by the growing popularity of libraries and foreign texts. Anti-foreigner polemics, texts that condemned both foreigners and foreign ideas, had been common throughout the sixteenth century, and remained a popular genre well into the seventeenth century, particularly amongst certain clergymen. This period also saw the production of the so-called satirical leechbooks, texts that used the format and language of recipe books to mock the content and worth of their serious counterparts. Satirical leechbooks had xenophobic elements, but the main focus of their mockery was apparently medicine itself, rather than foreigners.

Distrust for Western medicine was not fueled by religious sentiments alone. One of the plays included in the initial repertoire of the first Moscow public theatre (opened in 1702) was the French dramatist and comedic writer Molière’s ‘Le Médecin malgré lui’ [written 1666, translated as either The Comedy of the Doctor Drubbed or The Doctor In Spite of Himself, *Komedia o doktore bytom* or *Lekar ponevole*], which satirised contemporary medical practice. The play follows a woodcutter, Sganarelle, who is tricked into believing he is a famous doctor despite his total ignorance of medicine. In one scene Sganarelle explains a condition to a patient, who remarks that he was surprised at Sganarelle’s insistence that the heart was on the right and the liver on the left, when he understood that the reverse was true. Sganarelle replied: ‘[y]es, it used to be so but we have changed all that. Everything’s quite different in medicine nowadays’. Molière was here satirising the proliferation of new ideas during the

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65 See for example *Pamiatniki literatury drevnei Rusi*, 10 vols (Moscow: Khudozhestvennaia literatura, 1994), iii, pp. 9-17.
Scientific Revolution that contradicted earlier medical practice. The inclusion of this play in the Moscow theatre’s repertoire exposed the Russian elite to Western scepticism of medicine, which may have contributed to existing feelings of distrust towards medicine in certain sections of Russian society.

Despite such doubts over foreign medicine, the leechbook format was sufficiently popular in Russia to inspire the production of religious texts using the same format, works which arranged religious aphorisms in the form of recipes for the improvement of spiritual health. According to Sedov, Fedor Alekseevich owned one such text, called ‘On spiritual medicine’ [O dushestvom lekarstve]. Such emulation of a format implies significant currency to the format within Russia; even those uncomfortable with Western medical texts acknowledged their importance. Attitudes to foreign medical practitioners and foreign medicine thus echo the general trend identified in recent works about foreigners in Moscow. Previously, Muscovite attitudes to foreigners were seen as overwhelmingly xenophobic. Works by T. A. Oparina and S. P. Orlenko have revised this view, by demonstrating that there was a range of different attitudes towards and interactions between Russians and foreigners. Medicine can be seen as one other area in which Muscovites took a range of attitudes to foreigners and foreign ideas. Addressing medical works based on foreign knowledge to Russian patrons thus grew out of the growing Muscovite acceptance of literacy in general, and of the more tolerant attitudes towards foreigners and foreign medicine in particular.

Reestr iz Dokturskikh nauk
The earliest Apothecary Chancery medical book dedicated to a specific patron is the Reestr iz dokhturskikh nauk [Extract from Doctors’ Knowledge], first compiled in 1696. Gifting a prince or patron with medical advice or even an individual remedy was well-
established practice in Europe by the seventeenth century. The existence of the Reestr shows that the practice had also reached Muscovy. Panich has shown that the Reestr was jointly compiled by Archbishop Afanasii of Kholmogory and Daniel Gurchin on the basis of the Pharmacopoeia. Most of the recipes contained in the Reestr are taken from the Pharmacopoeia; the Reestr just rearranges them. Indeed, there is such a high degree of similarity between the texts that Panich considers the Reestr a variant of the Pharmacopoeia. As such, the Reestr contains much of the same pharmaceutical knowledge, knowledge about complex recipes and the preparation of medicines that was included in the Pharmacopoeia. Afanasii’s Reestr was thus effectively an Apothecary Chancery pharmaceutical text.

The Apothecary Chancery’s Pharmacopoeia, although the most important source for the Reestr, does not furnish all its content. Nor can those recipes not derived from the Pharmacopoeia be otherwise traced back to Gurchin. N. A. Bogoiaavlenskii has proposed that the Reestr was composed on the basis of an ancient Russian text. To date, no such early text has been found to support this hypothesis. In contrast, Panich proposes that the additional recipes were taken from local folk knowledge, a proposal she bases solely on the lack of an identified textual source for some recipes. Although Panich’s proposal is a viable possibility, there is a problem with her approach. Lack of an identified textual source does not necessarily mean those recipes were taken from an oral source: it is also possible that Afanasii took elements from one or more other medical works as yet unidentified. The material from the Pharmacopoeia used to create the Reestr was supplemented from another source, but whether that source was folk knowledge or one or more as yet unidentified medical works cannot be established at this time.

The cooperation of a foreign Apothecary Chancery medical practitioner with a Russian Church official to produce a medical text is significant. Firstly, it shows that, like the reports, Apothecary Chancery medical texts were at least sometimes produced collectively. Afanasii adapted Gurchin’s text, making the resulting work a product of

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75 Panich, Tvorchestvo, pp. 124-26, 130-33.
76 See above, pp. 152-53.
77 Bogoiaavlenskii, Vrachevanie, p. 102.
78 Panich, Tvorchestvo, pp. 124-26, 130-33.
79 See Chapter Four.
their joint effort. Secondly, in the case of the Reestr, that cooperation crossed significant boundaries: Afanasii was not part of the Apothecary Chancery, nor even part of the wider chancery system, but an Archbishop. By the seventeenth century there were strong ties between the state and the Church, as evidenced by the so-called patriarchal chanceries, state departments that administered Church business. Nevertheless, such cooperation between a chancery servitor and a member of the Church was highly unusual. The Reestr continues the tendency for Apothecary Chancery knowledge production to be collective and cooperative, but expands the circle of people who took part in that production.

Also significant is the intended recipient. The original Reestr was dedicated to Fedor Matveevich Apraksin, then governor [voevoda] of Dvina:

1695, 20th September. [This] Extract from Doctors’ Knowledge was composed by the great Lord [and] Right Reverend Afanasii, Archbishop of Kholmogory and Vazhesk, which medicines should be owned to [combat] human weaknesses and for what purpose those medicines are, and how to make vodkas against human weaknesses and from which herbs, and so [how to make] medicines and from which things, and what power they have, as is appropriate for Your Excellency the Count and Close Steward Fedor Matveevich Apraksin to have. For each medicine there are chapter headings, and by [these] chapter headings articles can be found [which are of use] in [times of] suffering, [and] which include [information on] the power and efficacy [of the medicine].

In his capacity of voevoda, Fedor Matveevich Apraksin served as a provincial agent of the Muscovite administration. Apothecary Chancery texts were commonly circulated within the Muscovite administration, but normally only within the central

80 ‘Седм тысячъ двести четвертаго, сентябрь в двадесятый день. Сочиненный реестр из докторских наук великим господином преосвященным Афанасием, архиепископом Холмогорским и Важеским, которые суть к человеческим немощам прилично держать лекарства и те лекарства к какой причине быти прилежат, и как к немощам человеческим составить водки и из каких зелий, так те же лекарства из каких вещей и какую они имеют силу, ибо тому прилично быти у Вашего графского сиятелства и близкаго столника Феодора Матвеевича Апраксина. К коему лекарству положени главы, и по главам дозирати велику к нужде скорбей статью, которая за собою объявит силу и действие’, Panich, Tvorchestvo, pp. 129-30.
administration, meaning the central chanceries, the tsar and his advisers. Although the Apothecary Chancery did correspond with provincial authorities, they did not typically supply them with reports in the way they did for the central governmental organs. The Reestr thus represents a shift in the dissemination of Apothecary Chancery texts.

The shift towards providing knowledge for a provincial administrator is likely linked to Afanasii. The co-compiler of the Reestr, Afanasii (born Aleksei Artem’evich Liubimov, 1641-1702), was originally from Tiumen’ in Siberia, and wrote texts on a variety of subjects: religious, medical, natural-philosophical, and geographical. As a clergyman, he was a noted reformer. He had a personal interest in medicine, possibly in part due to his own poor health, and was known to send both medicines and medical advice to friends and fellow clergymen. His interest in medical matters and personal need for medicines led him into a correspondence with the Apothecary Chancery, from which the Reestr project was apparently conceived. Significantly, Kholmogory, Afanasii’s archbishopric, was located near Archangel, the key port for Western merchants trading with Muscovy; some Western merchants had homes in Kholmogory. Dvina, the region over which Apraksin had responsibility, was near Afanasii’s Archbishopric, as both were located in Northern Russia along the trade route to Archangel. It would thus seem that Afanasii dedicated the Reestr to Apraksin due to their links as provincial leaders.

The involvement of an external figure, Afanasii of Kholmogory, in the production of medical texts, was a notable development. Firstly, it showed that the collective production characteristic of Apothecary Chancery reports is also applicable to medical texts. Secondly, it shows that the involvement of Russians in knowledge production was not limited to chancery servitors. Finally, Afanasii’s involvement also shaped the dissemination of knowledge, by making it available to the provincial as well as the courtly elite. The Reestr represents both an expansion of the circle of persons involved in knowledge production, and the circle of Muscovites to whom that knowledge was disseminated.

81 See Chapter Four, 139-42.
83 Panich, Tvorchestvo, pp. 10-13, 126-27.
84 See Oparina, Inozemtsy, p. 31.
In 1698, only two years after Afanasii and Gurchin produced the *Reestr*, Tsar Peter the Great was presented with a medical text dedicated to him, a royal version of the *Domestic and Field Pharmacy*; the text was later reproduced for his son, Tsarevich Aleksei. Although authorship is disputed, the text was compiled by either or both Daniel Gurchin and his colleague Laurentius Blumentrost. As both men were Apothecary Chancery practitioners, this text should be considered as linked to that institution. Despite the importance of the recipient of this medical text, there is no published edition, and little scholarly attention has thus far been devoted to it.

Both manuscripts begin with an extensive introduction, which in the copy of 1700 extends 1r-2v, addressing the reader and explaining why medicine should be of interest to them. The introduction states that God created the world with things that were to be of use to humans, like medicines:

> By God’s will food and wealth is given by the earth, especially in certain realms . . . but above all [the ability to] retain human health.

It further points out that other monarchs were interested in medicine, including Rudolph II, Holy Roman Emperor (1576-1612), and biblical kings like Solomon:

> [I] humbly remind [you of the validity of alchemy], if you allow [me], to discuss [such matters using] Biblical parables in the Book of Moses . . . how Moses made powder from unburnished gold and gave to people to drink in water, and how Tsar Solomon held this knowledge of ores and all herbs and their actions in great honor [as] written in the Book of Solomon.

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85 RNB, kollektsiia A. A. Titova, No. 3881 (Royal Domovaia i pokhodnaia apteka, early 18th century).
86 See below, p. 168.
87 References are made to this text in Prussak’s general medical text history and Sokolovskii’s article on the Apothecary Chancery: Prussak, ‘Obzor’, pp. 24-25; Sokolovskii, ‘Kharakter’, p. 85.
88 RNL, koll. Titova, No. 3881.
90 ‘покорно уничтоженно воспаметовать изволъ м[и]л[o]ственно разсуждати с библейныя притчи в Моисее Книге . . . какъ Моисе несожженное злато в порохъ сожесть и людемь вадаль пити в воде, и какъ Ц[а]рь Соломонъ сие познаванье руд
In order to legitimise their art through an authoritative tradition, alchemists linked the practise of alchemy to important historical figures. E. J. Holmyard specifically names Moses as one such figure, and Solomon, the wise king, would have also been a convenient representative for alchemy.\textsuperscript{91} Alchemy played a significant role in early modern medicine; its offshoot, chemical medicine, was one of the driving forces towards greater use of pharmaceutical techniques such as distillation in medicine.\textsuperscript{92} The promotion of chemical medicine in the royal \textit{Domestic and Field Pharmacy} can thus be linked to the pharmaceutical approach taken in other Apothecary Chancery texts.

The importance of pharmacy and chemical medicine is further emphasised later in the introduction, when the author states

\begin{quote}
I have always honored chemical and apothecary science since my youth and in Voronezh two years ago gave to his Imperial Majesty the \textit{Brief Description of Thirty Rules for Health} in Slavonic, and graciously received my humble job [and I] present this book called the \textit{Domestic and Field Pharmacy}.\textsuperscript{93}
\end{quote}

The introduction to the royal \textit{Domestic and Field Pharmacy} thus immediately establishes key points about its purpose. It is designed for a royal audience, first and foremost Peter the Great. Like the \textit{Pharmacopoeia} and the \textit{Reestr}, it contains pharmaceutical knowledge; unlike those texts, the \textit{Domestic and Field Pharmacy} explicitly advocates chemical medicine. The introduction also links these two points, as it lays out how famous contemporary, historical and Biblical kings were involved in chemical medicine. The \textit{Domestic and Field Pharmacy} thus presents pharmacy and chemical medicine as knowledge fit for a tsar.

Following the introduction is an untitled medical text consisting of thirty chapters, arranged by medicament. As this is the only untitled section of the manuscript, it would

\textsuperscript{92} See above on pharmacy, pp. 152-53; see Chapter Three on chemical medicine, pp. 90-91.
\textsuperscript{93} 'я химическую и аптекарскую науку из младых лету всегда чтися и на Воронеже за в года назд краткое описание тридесать правил к здравию наславенскомъ языкъ его Ц[а]рскому Величеству вручилъ м[и]л[ос]тиво приняль также еще мою иначинченную должность обявлю сию книгу называеа домовая и походная аптека', RNB koll. Titova, No. 3881, 1-2ob.
then appear to be the *Domestic and Field Pharmacy* mentioned in the introduction.\(^9^4\)

The *Domestic and Field Pharmacy*, as the title suggests, was originally intended to be used by laypersons and ordinary army servitors. In contrast, the version of the text included in these royal manuscripts shows a rather different type of text. Most of the recipes in the *Domestic and Field Pharmacy* conform to the pharmaceutical model: there is an emphasis on chemical ingredients that would only be available from a well-stocked pharmacy, such as sulphur and sal ammoniac. Some of the medicaments described in the text are high-status, even extravagant; there is a chapter on the use of gold.\(^9^5\) Although derived from a work for domestic and military use, inclusion of ingredients such as gold show that this text has clearly been adapted for its intended elite readership.

The section of the royal manuscript following the *Domestic and Field Pharmacy* is entitled the *Book of Preparing Medicines and Vodkas* [Kniga glagolemaia lekarstv stroenitu i vodam], and is attributed to Apothecary Chancery physician Laurentius Blumentrost in both the Russian National Library and State Historical Museum manuscripts.\(^9^6\) It consists, like the *Domestic and Field Pharmacy*, of thirty chapters, in which the method of producing various medicines is described. These medicines are described using Latin terminology, and were to be prepared using complex pharmaceutical methods.\(^9^7\) This text would then seem to have been chosen to accompany the *Domestic and Field Pharmacy*, as it shared the latter’s emphasis on pharmacy.

Following these two pharmacy sections is a much more unusual type of medical text for Russia, the *Brief Description of Thirty Rules for Health* [Kratkoe opisanie tridesiat pravil k zdraviu].\(^9^8\) As the title suggests, this text consists of thirty brief aphorisms on how best to preserve one’s health. Such collections of medical advice tailored to a patron were a common genre in Europe, an influential early example of which is Arnau of Vilanova’s *Regimen sanitatis*, written between 1305 and 1308 for king Jaume II of Aragon.\(^9^9\) Alongside advice on diet and the use of venesection, the

\(^9^4\) RNB koll. Titova, No. 3881, ll. 4-16ob. For a discussion of the non-royal version of this text, see below, pp. 172-74.

\(^9^5\) RNB koll. Titova, No. 3881, ll. 4-4ob.

\(^9^6\) GIM sobr. Uvarova, No. 172 (Royal Domovaia i pokhodnaia apteka, early 18th century), ll. 17-31ob. On Blumentrost, see Chapter Three, pp. 78, 86.

\(^9^7\) RNB koll. Titova, No. 3881, ll. 17-30.

\(^9^8\) RNB koll. Titova, No. 3881, ll. 31-32.

Brief Description of Thirty Rules for Health also includes rules detailing from which persons it is appropriate to take medical advice:

Do not listen to any unskilled neighbour or kinsman for advice on medicines.\(^{100}\)

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Do not allow yourself to be healed by young healers or old women, and if an illness or injury falls upon you, always seek the advice [of those] skilled in medical matters.\(^{101}\)

Irregular healers were of constant concern to European physicians as competitors, a concern that also existed in Russia: a number of unlicensed practitioners were prosecuted by the Apothecary Chancery, some of which were brought to its attention by its own staff; a number of these prosecutions were roughly contemporary to this document being presented to Peter.\(^{102}\) Such practitioners were also a problem in the recruitment of Apothecary Chancery staff, with physicians vociferously protesting the hiring of individuals it saw as unsuitable, which also occurred in the 1690s.\(^{103}\) The aphorisms concerning appropriate medical advice in the Brief Description of Thirty Rules for Health thus seem to have reflected a genuine concern on the part of physicians over irregular practice. It should also be noted that Peter did take action against some irregular medical practice, eventually establishing private apothecary shops with official licenses.\(^{104}\) Whether the physicians’ complaints were the cause of such developments or not, inclusion of this text in the royal Domestic and Field Pharmacy undoubtedly demonstrates an urge to shape Peter’s views on appropriate medical practice.

According to the introduction, the Brief Description of Thirty Rules for Health was first given to Peter in 1696, just after he became the sole tsar.\(^{105}\) Previous tsars had appointed high-ranking courtiers and close relatives to the head of the Apothecary

\(^{100}\) ‘непослушайте всякого неискусного соседа или сродственика в совете в лекарствах’, RNB koll. Titova, No. 3881, ll. 31-32.

\(^{101}\) ‘недавайте себя лечить молодым лекарям и старым бабам а будь в вас болезнь или рана припадет посоветуйте всегда в лекарстве искусно’, RNB koll. Titova, No. 3881, ll. 31-32.

\(^{102}\) See Chapter Six, especially pp. 182-83.

\(^{103}\) See Chapter Three, pp. 105-07.

\(^{104}\) See Chapter Six, especially, 206-09.

\(^{105}\) See above, p. 165.
Chancery; in stark contrast, Peter left the department in the control of an administrator from the very beginning of his reign, despite his personal interest in medicine. The compilers of this text, Blumentrost and Gurchin, as Apothecary Chancery employees, may have been concerned that the Apothecary Chancery would not play such an important role at court under Peter as it had done previously. The *Brief Description of Thirty Rules for Health* was thus presented to Peter for two reasons: to warn against irregular practitioners, and to promote Russia’s existing official medical institution, the Apothecary Chancery.

Authorship of the *Brief Description of Thirty Rules for Health* is disputed. The RNL text does not mention an author’s name; the GIM manuscript attributes it to Blumentrost. In contrast, Prussak claims that Gurchin wrote the *Brief Description of Thirty Rules for Health*. Luppov provides yet another possible origin for this text: he notes that James Bruce (1669-1735), the Scottish advisor to Peter the Great, had in his library a text called ‘30 aphorisms or rules for the preservation of health’. According to Luppov, the text was written by a certain Gekhma and published in Frankfurt-am-Main in 1696. Unfortunately, the Russification of what was presumably a German surname has obscured the identity of the author, and it has not been possible to establish the existence of such a text from any other source. Given the high degree of similarity between these two (unusual) titles, it is likely that the *Brief Description of Thirty Rules for Health* was copied or adapted from the ‘Gekhma’ text.

It is significant that Blumentrost and Gurchin are both associated with various parts of this royal medical text, although Blumentrost’s involvement can currently be established more firmly than Gurchin’s. Nevertheless, the latter’s role should not be entirely discounted, given his work on the *Reestr*, which demonstrates his willingness to collaborate with others. It is thus possible that Gurchin and Blumentrost worked together to create the text for Peter: Blumentrost contributed two sections of medical text, while Gurchin presumably helped with the translations and possibly also with the introduction. Like the Apothecary Chancery reports, medical books produced by Apothecary Chancery medical practitioners were collectively produced.

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106 See Chapter Two, p. 74.
107 GIM sobr. Uvarova, No. 172 (Royal *Domovaia i pokhodnaia apteka*, early 18th century), ll. 32-33ob.
110 See Chapter Four on reports.
The royal *Domestic and Field Pharmacy* and the *Reestr* written for Apraksin were designed to be consumed by the tsar and members of the Muscovite administration. In this way they are similar to the Apothecary Chancery reports, which circulated within the chancery system. Like the earlier Apothecary Chancery *Pharmacopoeia*, these books present pharmaceutical knowledge. At the same time, they extended the dissemination of pharmaceutical knowledge and thereby promoted pharmacy among different groups of elite Muscovites.

**Works for Soldiers**

By the first decade of the eighteenth century, the Apothecary Chancery was also producing more humble medical texts, specifically, those for use by soldiers. Medical texts designed for a lay audience were becoming more common during the late seventeenth and early eighteenth centuries, but those intended for soldiers were very rare. It should be emphasised that this context ‘soldier’ was unlikely to mean the rank-and-file foot soldiers of the army. Most of the Russian army was composed of men from humble backgrounds, who would not have been able to read. Their commanders were mostly Russian nobles (although there was an influx of foreign mercenaries under Peter). These noble commanders were, as a group, more literate than their men, although not all Russian nobles were literate by the early eighteenth century: of the nine nobles Peter appointed to his newly-created Senate in 1711, one was unable to sign his own name.\textsuperscript{111} Commanders, as noblemen, were also more able to afford manuscripts and medicines than ordinary soldiers, as both manuscripts and medicines were relatively expensive commodities in the early eighteenth century. It was to the commanders of the Russian army that these works for soldiers were no doubt addressed.

The reason for producing a soldiers’ (or commanders’) medical guide can be found in the medical provisions for the Russian army at this time. The establishment of the school for field surgeons in 1654 was meant to increase the numbers of regiments who had a surgeon with them, but the limited information available on the training of these field surgeons, and the numbers of surgeons assigned to army regiments, suggests that the Apothecary Chancery’s supply of these men still lagged behind demand in the second half of the seventeenth century.\textsuperscript{112} The small numbers of field surgeons may have had a detrimental affect on the Russian army: it has been proposed that the failure

\textsuperscript{111} Bushkovitch, *Struggle*, p. 303.

\textsuperscript{112} Unkovskaya, ‘Foreign Mysteries’, pp. 15-16.
of Prince V. V. Golitsyn’s campaigns in the Crimea in 1687-89, and of Peter’s siege of Azov in 1695, can be linked to inadequate medical provision.  

Problems with military medicine in the late seventeenth century are further reflected in changes made to medical organisation under Peter. Although the Medical Chancellery, the short-lived successor to the Apothecary Chancery, still provided some services for the military until its closure in 1725, increasingly the armed forces, navy as well as army, preferred to have their own medical services. The Military Statute of 1716 increased the scope of the army’s already-existing medical wing; the 1720 Naval Statute did the same for the navy. What had been clear for so long, that the Apothecary Chancery was not capable of providing sufficient services for the military, had finally come to a head, and was resolved by bringing all responsibility for military medicine under the sole purview of the military departments. Medical texts aimed at commanders were likely an attempt to compensate for the problems inherent to Russian military medicine in the late seventeenth and early eighteenth centuries, by providing the soldiers with the basic knowledge necessary to treat themselves.

*Pharmacy for Transport or Service*

The *Pharmacy for Transport*\(^\text{115}\) or *Service* [*Apteka obozovaia ili služivaia*], an early eighteenth-century pharmacy aimed at military servitors and baggage train staff, has a clear link to the Apothecary Chancery, as, according to the introduction, it was composed by Daniel Gurchin:

*Pharmacy for Transport or Service. Compiled in a concise fashion from various apothecary or surgical books, for the good of service persons, and their horses, with which in the absence of a surgeon [they] might help themselves during any of their own or their horse's infirmities. Produced with the zeal and toil of His Highness the Tsar’s apothecary Daniel Gurchin of the imperial city of Moscow in the year of our Lord 1708.*\(^\text{116}\)

\(^{113}\) Alexander, ‘Petrine Medicine’, p. 207.


\(^{115}\) Lit. baggage train.

\(^{116}\) ‘Аптека обозовая или служивая. Собранная вкратце с разныхъ книгъ аптекарскихъ [или лекарскихъ] на ползу служиваго чина людей, и ихъ коней, которою егда лекаря нетъ могутъ сами себѣ помочи дать во всѣхъ своихъ и конскихъ немощехъ. Издадеся тщаниемъ и трудами, его царскаго величества
The Russian National Library manuscript of the *Pharmacy for Transport or Service* is a short book, consisting of only sixteen chapters (pages 110-117ob of the eighteenth-century miscellany into which it has been sewn), although there is evidence to suggest that the end of the manuscript has been lost. A copy of 1779 cited by Oreshnikov is longer, but accessing this manuscript has proved impossible. The surviving sections of the Russian National Library manuscript includes recipes with mineral ingredients typical of pharmaceutical texts, such as saltpetre; indeed, one recipe is headed ‘chemical medicine’ [*meditsyna khimika*], suggesting a specifically chemical medical approach.

The *Pharmacy for Transport or Service*, like Gurchin’s earlier works, is based upon pharmaceutical knowledge.

An unusual feature of the *Pharmacy for Transport or Service* is its format. Most medical texts from Russia at this period are of the standard quarto or octavo size, with a few produced in folio editions. The 1779 manuscript of the *Pharmacy for Transport or Service* is likewise a standard quarto, but the Russian National Library manuscript of the *Pharmacy for Transport or Service* was not written on standard size paper. In its current state the text is cut off at the top and bottom of the page, indicating that the pages were originally longer than the current page height of 189cm. The text was cropped sometime after the composition of the text, presumably in order to neatly bind it into the eighteenth century miscellany of which it is currently a part (all the other texts included in this miscellany are standard quarto size). The page width of the manuscript varies slightly, between 72 and 74cm, approximately half the width of the pages of the rest of the volume. This unusual size of text, slimmer but taller, was presumably chosen in order to make the text more portable, in keeping with its purpose as a guide for soldiers and baggage train staff.

Gurchin was the second of eight men to be awarded official permission to open a private apothecary shop in Moscow, in 1702. When the *Pharmacy for Transport or Service* was composed, he was working as a private medical practitioner. Thus the question should be asked, did Gurchin produce this work as a part of his Apothecary Chancery duties, or as a private project? The *Pharmacy for Transport or Service*

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177 Oreshnikov, ‘Gurchin’, p. 54.
118 RNB koll. Pogodina, No. 1561, l. 116ob.
120 See Chapter Six, pp. 207-209.
certainly served Gurchin’s personal commercial ambitions by promoting the use of medicines that could be purchased at his shop. Conversely, it also fulfilled government objectives, as the text made medical knowledge available to the Russian army. Furthermore, soldiers could receive free medicines from the Apothecary Chancery, at least for ailments contracted during active service, and so Gurchin would gain no significant commercial benefit from targeting them as customers.\textsuperscript{121} It thus seems likely that this text fulfilled two aims: the government project of providing medical expertise to the army, and promotion of Gurchin’s apothecary shop.

Previously, Muscovites serving in the Russian army would only have come into contact with Western medical knowledge through being treated by the Apothecary Chancery. Texts like the \textit{Pharmacy for Transport or Service} brought soldiers (or rather commanders) into closer contact with Western medical knowledge, by providing it to them in written form, and in a compact and mobile format. The \textit{Pharmacy for Transport or Service} thus widened the circle of Muscovites to whom medical knowledge was disseminated by providing army servitors with pharmaceutical knowledge.

\textit{Domestic and Field Pharmacy}

The \textit{Domestic and Field Pharmacy} existed in two basic forms: a royal version, and a standard version.\textsuperscript{122} Only one manuscript of the standard \textit{Domestic and Field Pharmacy} survives, in a copy from the 1720s.\textsuperscript{123} There are differences between the royal and standard versions of this text. Although both versions concern pharmaceutical knowledge, the material is arranged differently. Unlike the royal versions prepared for Tsar Peter and Tsarevich Aleksei, which has one long section, the standard version of the \textit{Domestic and Field Pharmacy} is split into two sections: the first consists of ten recipes, arranged by medicament (powders and elixirs) and the second is arranged by disease, setting out fifteen ailments that can be treated by the medicines from the first section.\textsuperscript{124} The creation of multiple versions of one text according to audience was common practice in Europe. In 1605 Francis Bacon wrote the \textit{Advancement of Learning}, a text advocating the greater use and official regulation of natural philosophy. It was both enlarged and rearranged when translated into Latin as \textit{De augmentis scientiarum} in 1623. The former was addressed to the king and his entourage, the latter

\textsuperscript{121} See Chapter One, pp. 32-33.
\textsuperscript{122} On the royal version, see above, pp. 164-66.
\textsuperscript{123} BAN Petrovskoe sobranie, No. 75. It is possible this text belonged to James Bruce.
\textsuperscript{124} BAN, Petrovskoe sobr. No. 75.
to professional philosophers.\textsuperscript{125} The significant differences in form between the two versions of the \textit{Domestic and Field Pharmacy} may be explained by this process of adapting texts for different audiences.

There are competing attributions of the standard version of the \textit{Domestic and Field Pharmacy}. Prussak and Oreshnikov both claim that it was composed by Gurchin, conflating it with the \textit{Large Domestic Pharmacy \[Opteka domovaia bolshaia\].}\textsuperscript{126} In contrast, Sokolovskii states that it was a translation of the \textit{Haus und Reise Apotheke}, written by Laurentius Blumentrost senior.\textsuperscript{127} Prussak and Oreshnikov’s conflation of the \textit{Domestic and Field Pharmacy} with the \textit{Large Domestic Pharmacy}, and so their identification of Gurchin as the author, is unlikely to be correct. Manuscripts of the latter work give its date of composition as either 1705 or 1708, far too late to be the source of the \textit{Domestic and Field Pharmacy}, which was in existence at least as early as 1700.\textsuperscript{128} Sokolovskii’s identification of Blumentrost as the author is more plausible. Blumentrost definitely wrote the \textit{Haus und Reise Apotheke}, also known as the \textit{Pharmacotheca domestica et portatilis}, which was first published in Muhlhausen in 1667, and again (posthumously) in Leipzig in 1716.\textsuperscript{129} It has not been possible to consult a copy of this text, and so the identification of the \textit{Domestic and Field Pharmacy} with the \textit{Haus und Reise Apotheke}, such as Sokolovskii makes, cannot be conclusive. Nevertheless, the contextual evidence – that Blumentrost composed such a text before coming to Russia – makes him the most likely author of the \textit{Domestic and Field Pharmacy}.

Thus two Apothecary Chancery medical practitioners, apothecary Daniel Gurchin and physician Laurentius Blumentrost, were involved in producing medical texts for soldiers in the early eighteenth century. Although we cannot directly link the Apothecary Chancery itself to this development, the involvement of two of its staff members in this process is significant. The Apothecary Chancery had been involved in military medicine from at least 1632, providing medical experts for the Russian army.\textsuperscript{130} When the Apothecary Chancery had provided the Russian army with reports, they had been disseminated to secretaries and military chancery directors; soldiers themselves

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\textsuperscript{125} Pantin, ‘Translations’, pp. 167-68.
\textsuperscript{126} Prussak, ‘Obzor’, pp. 24-25.
\textsuperscript{127} Sokolovskii, ‘Kharakter’, p. 85; Dumschat, \textit{Mediziner}, p. 571.
\textsuperscript{128} RNB f. 550 (Osnovnoe sobranie rukopisnoi knigi), section VI, Quartos, No. 45 (\textit{Apteka domovaia bolshaia}, early 18\textsuperscript{th} century), ll. 86-162ob; Oreshnikov, ‘Gurchin’, p. 54.
\textsuperscript{129} Dumschat, \textit{Mediziner}, p. 571.
\textsuperscript{130} See Chapter One, pp. 32-33.
had not had direct access to medical knowledge from Apothecary Chancery reports. These early eighteenth-century medical texts thus represent a significant development in both Russian military medicine and the dissemination of medical knowledge, as now the Apothecary Chancery was providing medical knowledge directly to military servitors.

**Texts for Domestic Use**

In the 1690s and 1700s the Apothecary Chancery was linked to the production of medical texts for general household use. Household texts, although a common genre elsewhere in Europe, were rare in Russia; the sole exemplar before the seventeenth century was the *Domostroi*. The *Domostroi*, which may have been partly taken from a Western European text, exists in multiple manuscripts from the mid-sixteenth century on.\(^{131}\) It deals with a range of issues pertinent to an urban household of moderate means, including some advice on health and illness. The *Domostroi* promotes the view that health and illness were sent by God, and to try to heal oneself with medicines was wrong; one must instead pray for forgiveness and lead a good Christian life. It does mention folk healers, but these it condemns as sorcerers and forbids the reader from consulting these medical practitioners, or indeed having any dealings whatsoever with them.\(^{132}\) The main household advice text available to seventeenth-century Russians thus counseled them to stay away from medicines altogether.

Russian-language medical books were rarely aimed at a lay, household readership. One of the most common Russian-language medical texts in the seventeenth century was the *Blagoprokhladnyi vertograd*, originally translated into Russian from the low-German in 1534.\(^{133}\) An herbal, it listed plants and enumerated their physical attributes and qualities; such a text might have been held by a private collector, but it was not specifically designed to be used in the home. The *Blagoprokhladnyi vertograd* was typical of seventeenth-century Russian-language medical texts: the overwhelming majority was not explicitly aimed at a household readership. By the early eighteenth century, Russia had few household texts, and few medical texts aimed at a household audience. As there are multiple medical books linked to the Apothecary Chancery that


\(^{132}\) *Domostroi*, ed. V. V. Kolesov and V. V. Rozhdestvenskaja (St. Petersburg: Nauka, 1994), p. 15.

were explicitly aimed at a household audience, this set of texts represents a significant shift in Russian book culture.

**Pharmacopoeia for Domestic Use**

The Russian Pharmacopoeia had been originally compiled to educate medical practitioners; early eighteenth-century copies had a different purpose and intended readership, as explicitly laid out in the introduction:

> The book known as the Pharmacopoeia or Pharmacy, having within it a list of all medicines which are found in pharmacies [and a] description [of each medicine] in its [rightful] place, from which [description] any person [will be able] to use [those medicines] for themselves in the absence of a doctor, having with them a collection [of medicines in] a purpose-built casket or box in a cupboard arranged there, as is the custom for great persons.  

The foreword focuses on medicines as an essential part of self-medication, strongly suggesting that one should keep certain essential medicines at home. As made clear in the rest of the text, the word ‘medicines’ does not mean only the herbs or roots that could be acquired from any source. Rather, there is an emphasis on minerals, chemicals and other pre-mixed, pharmaceutically prepared medicines that can be acquired, as stated in the foreword, in apothecary shops. Before 1700 the only apothecary shop in Moscow (as opposed to market stalls that sold herbal preparations) was the shop, which was part of the New Pharmacy, opened in 1673 by the Apothecary Chancery. These stalls did stock some such pharmaceutical medicines, but this trade was outlawed as dangerous in 1701. Evidently, these ‘popular’ editions of the Pharmacopoeia aimed to increase Apothecary Chancery business by encouraging readers to purchase the pharmaceutical medicines they stocked.

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134 ‘Книга глаголемая фармакопендиа или аптека; имеющая в себе преписание всехъ лекарствъ: которые обретаются во аптекахъ: описание своим порядкомъ из которыхъ можетъ себе – каждый человекъ употреблять в не бытый доктора, имея оныя у себе в собрании на то устроенной шкатуне, или в посторонный келлий, в шкафе на оное устроенной смшеты; яко обычай, великимъ особамъ, иметь’, GIM sobranie rukopisei I. E. Zabelina, No. 674 (Pharmacopoeia, 18th century), l. 1-ob. See also GIM sobr. Vakhrameeva, No. 534; GIM sobr. Barsova, No. 2238.

135 See Chapter One, p. 20.

136 See Chapter Six, pp. 206-10.
The phrase ‘every person’, used in the introduction, is significant. As discussed above, even by the late seventeenth century few Muscovites were literate. The use of the phrase ‘any person’ parallels English self-help medical texts of the same period, which frequently state that they were ‘for the meanest capacity’, meaning the poorest and least educated groups in society. The literacy rate in England was far above that of Russia, but even so people from the poorest level of society (agricultural labourers) were illiterate, and so would not have been able to read such texts. In the case of the English texts, Mary Fissell concludes that the hyperbolic statement about the suggested readership of these texts was a form of advertisement, indicating to potential buyers that they need not be versed in medical matters to use it.\(^{137}\) Such an aim seems likely to also be true for the Russian *Pharmacopoeia*, highlighting the role of later copies as texts aimed at laypersons.

The mention in the *Pharmacopoeia* introduction of medicine chests being used by great persons was grounded in fact: a chest of medicaments was commonly sent with the tsar when he travelled outside Moscow.\(^ {138}\) This practice was also apparently taken up by at least some boyars, as several boyars’ list of possessions, commonly compiled after death, included such a casket of medicines [*aptechka s lekarstvami*]. The men known to have owned such medicine boxes were N. I. Romanov, A. S. Matveev, and V. V. Golitsyn, all of whom Orlenko identifies as being particularly open to Western practices. Indeed, the same lists also note other Western objects, such as clocks, furniture of foreign design, and foreign musical instruments.\(^ {139}\) It is thus seems likely that Orlenko’s conclusion that the ownership of a medicine box was an innovation practiced by Western-looking boyars is correct. Evidently, it was a practice the Apothecary Chancery wished to encourage. Although the original *Pharmacopoeia* was designed for the sole use of Apothecary Chancery medical students, later copies were explicitly aimed at widening the dissemination of Western medical knowledge, and so the use of pharmaceutical medicines.

*Large Home Pharmacy*

As well as adapting the *Pharmacopoeia* for a domestic audience, the Apothecary Chancery may also have produced medical texts specifically for household use. One


\(^{139}\) Orlenko, *Vykhodtsy*, p. 175.
such work is the *Large Home Pharmacy* [Opteka domovaia bolshaia], which survives in two eighteenth-century manuscripts.\(^{140}\) The earliest begins in the following manner:

The *Large Home Pharmacy*, with which any person, if there is no surgeon [available], can give help, not only to oneself, but also any cattle, in any infirmities. Collected from many medical works in the Imperial city of Moscow, 1705.\(^{141}\)

Here the date of composition is specified, but not the author. Oreshnikov and Zmeev believe that Daniel Gurchin compiled this text.\(^{142}\) The *Large Home Pharmacy* does provide some indication of a link to the Apothecary Chancery, which would also support the idea of Gurchin’s involvement. In the Russian National Library manuscript, it is noted that prices listed for the medicines are those given in the Apothecary Chancery’s shop.\(^{143}\) This comment is not included in the State Historical Museum manuscript. Mention of the Apothecary Chancery may indicate that the author of this text worked for the Apothecary Chancery, as Zmeev and Oreshnikov claim.

Zmeev’s proposal that Gurchin wrote the *Large Home Pharmacy* is primarily based on lexical and stylistic similarities between the *Large Home Pharmacy* and the *Pharmacy for Transport or Service*.\(^{144}\) Unfortunately, Zmeev does not provide the details of his analysis, only his conclusion, making evaluation impossible.\(^{145}\) Oreshnikov basess his identification of Gurchin as the author of the *Large Home Pharmacy* on an analysis of the 1779 manuscript. The 1779 manuscript included copies of the *Large Home Pharmacy*, Gurchin’s *Pharmacy for Transport or Service*, and the introduction addressed to Tsarevich Aleksei.\(^{146}\) Oreshnikov reasons that, as these three texts are included in one manuscript, they must all belong to one author (Gurchin). As Oreshnikov’s conclusions are all based on this one, late, manuscript copy, without

\(^{140}\) RNB f. 550, VI, Quartos No. 45 (*Apteka domovaia bolshaia*, early 18\(^{th}\) century); GIM sobr. Uvarova, No. 315 (Collection including *Apteka domovaia*, 18\(^{th}\) century).


\(^{142}\) Oreshnikov, ‘Gurchin’, p. 54; Zmeev, *Vrachebniki*, p. 126.

\(^{143}\) ‘цена въ большой Московской Аптекѣ’, RNB f. 550, VI, Quartos, No. 45, l. 180.

\(^{144}\) See above, pp. 170-72.

\(^{145}\) Zmeev, *Vrachebniki*, p. 126.

\(^{146}\) See above, pp. 164-65, 170-72.
supporting evidence they cannot be regarded as definitive. Given Gurchin’s significant involvement in medical text production, he may well also have compiled the *Large Home Pharmacy*, but this is yet to be proven.

The textual origin of the *Large Home Pharmacy* is similarly unclear. One possible source is the Polish recipe book *Apteczka Domowa*. Little is known about the *Apteczka Domowa*, but several circumstances recommend it as the possible origin of the *Large Home Pharmacy* beyond just the similarity of the titles. Poland was the source of many medical texts available in Muscovy. The *Apteczka Domowa* was available in Muscovy: Stefan Iavorskii, a leading cleric, owned a copy. Furthermore, if Oreshnikov’s suppositions about Gurchin’s Polish origin are correct, it is entirely plausible that he would have been familiar with this text. Zmeev has also proposed that the *Large Home Pharmacy* could be adapted from a Polish text, based on his textual analysis. It has not been possible to access the *Apteczka Domowa* in the preparation of this chapter, and so a comparison of the two texts cannot be carried out, but it should be considered a possible origin for the *Large Home Pharmacy*.

Thus the *Large Home Pharmacy* may have been composed by Daniel Gurchin on the basis of an earlier, Polish text, although this has not yet been definitively established. If Gurchin’s authorship were to be conclusively proved, this would add another household medical text to the corpus of such works linked to the Apothecary Chancery.

*Small Domestic Pharmacy*

The Apothecary Chancery may also have been involved in the production of another household medical text, the *Small Domestic Pharmacy* [*Aptechka domovaia*]. The only complete copy of the *Small Domestic Pharmacy* gives no indication of author, origin, or date. Unlike the other texts discussed in this chapter, the *Small Domestic Pharmacy* does not contain a foreword stating its purpose. The text itself lists recipes for various vodkas, oils, and other pharmaceutical medicines. The *Small Domestic Pharmacy* thus bears a similarity to Apothecary Chancery medical books, as it contains pharmaceutical knowledge.

Prussak identifies the *Small Domestic Pharmacy* as a shortened version of the *Large Domestic Pharmacy* and so, in her view, a shortened version of the *Domestic and

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149 RNB f. 550, section VI, Octavos, No. 4.
Field Pharmacy. Zmeev simply lists the Small Domestic Pharmacy text as the Domestic Pharmacy [Apteka domovaia], blurring the lines between the Small Domestic Pharmacy and the Large Domestic Pharmacy, which are the titles used in the manuscripts. The Small Domestic Pharmacy is certainly shorter than the GIM manuscript of the Large Domestic Pharmacy, but the latter manuscript is arranged entirely by disease, and does not use Latin terms for medicines; the Small Domestic Pharmacy is arranged partly by medicine and partly by disease and uses Latin terms. The RNL manuscript of the Large Domestic Pharmacy does arrange its chapters by medicine as well as disease, like the Small Domestic Pharmacy, but it does not use Latin terms as extensively as the Small Domestic Pharmacy. Although Prussak’s explicit linking of these texts, and Zmeev’s conflation of the texts, seems logical according to their titles, their content raises questions about the relationship of these texts that can only be answered by further research on their origins and development. Such questions do not entirely undermine Gurchin’s proposed authorship: one recipe taken from the Small Domestic Pharmacy included in an eighteenth century medical miscellany attributes that text to Gurchin. Gurchin was thus the likely compiler of the Small Domestic Pharmacy, although the exact relationship of this text to his other works is unclear.

The Small Domestic Pharmacy, like Gurchin’s other works, provided pharmaceutical knowledge to a household readership. It can be assumed that this text, like his Pharmacy for Transport and Service, was in part designed to promote his apothecary shop, which sold the sorts of pharmaceutical remedies these texts promote. Gurchin’s work also broadly corresponded to the aims set out in the order of 1678, which required medical texts to be made available to Russians. Gurchin used his medical works both to promote his apothecary shop, and to continue his association with official medicine. Through his work, literate Western medical knowledge, in particular pharmaceutical knowledge, previously mostly confined to the Apothecary Chancery and to a limited number of medical texts, began to be much more widely available. Gurchin’s work significantly widened the circle of Muscovites to whom medical knowledge was theoretically disseminated, broadening it to all literate Muscovites.

150 Zmeev, Vrachebniki, pp. 124-25.
151 RNB f. 550, section VI, Octavos No. 4.
152 GIM sobr. Barsova, No. 2241 (Pharmacopoeia, 18th century), ll. 54-54ob.
Conclusion

Medical texts linked to the Apothecary Chancery produced at the end of the seventeenth and start of the eighteenth centuries significantly expanded the dissemination of medical knowledge in Russia. Previously, knowledge produced by the Apothecary Chancery was only circulated within the chancery system and the court. These Apothecary Chancery medical books provided medical knowledge first to Russian students of the Apothecary Chancery, and then later to members of the elite, to Muscovite servitors like soldiers, and finally to all literate Muscovites. The range of different audiences targeted by these texts reflects their varying aims: education, patronage, more efficient military medicine, and increased sales of medicine. Apothecary Chancery medical texts thus increased the dissemination of medical knowledge in fulfillment of both governmental and commercial goals.

The type of medicine presented in these works is significant: all the recipes use complex methods common to pharmacy, such as distillation. Such methods were also favored by adherents of chemical medicine, and indeed chemical medicine may have influenced some of these texts. There were practical reasons for promoting pharmacy and chemical medicine: the Apothecary Chancery and later the privately run, officially sanctioned private apothecary shops faced competition from the markets selling herbal medicines. Emphasis on pharmaceutical remedies primarily available in apothecary shops in the Apothecary Chancery medical texts was thus an attempt to direct consumer demand: the Apothecary Chancery and its officially sanctioned private successors stocked pharmaceutical remedies, so encouraging demand for these medicines aided their business. The struggle between irregular and official medicine that apparently shaped the production of medical books by the Apothecary Chancery is examined in the next chapter.
Chapter 6: The Regulation of Harmful Substances.

Apothecary Chancery knowledge production was at times directed towards regulatory and judicial purposes. In particular, the Apothecary Chancery played a vital role in regulating harmful substances; the department tried some cases, and provided expert testimony for others. Such cases were typically concerned with the ingredients used in medicines, about which the Apothecary Chancery medical experts provided testimony. Others dealt with witchcraft. In Muscovy, witchcraft was commonly thought to be performed using herbs and roots, with those objects being presented as key evidence in many trials.\(^1\) When the Apothecary Chancery became involved in those cases, it provided expert testimony on those herbs and roots, just as in the cases about medical practice. Testimony produced for witchcraft and medical malpractice trials, to which historians have thus far devoted little attention, sheds light on the extent to which Muscovite society was exposed to Western knowledge.\(^2\)

The judicial setting for which this expert testimony was required encompassed different actors than those previously involved in Apothecary Chancery reporting activities. Previously, chancery directors or similar high-ranking servitors had initiated report production; reports had been composed by physicians and returned to the directors. In contrast, cases concerning harmful substances were often initiated by provincial authorities or low-level servitors in central departments; the testimony was commonly composed by apothecaries and that testimony exposed consumers of illicit medicines and defendants in the trials to Western medical knowledge. Significantly, many of the defendants in these trials, and their customers, would have been illiterate. The Apothecary Chancery, in applying Western, literate medical knowledge to regulatory issues affecting those Muscovites, was effectively bringing illiterate Muscovites into contact with that knowledge. This chapter will show that the

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\(^1\) Of the 250 extant Russian witchcraft cases, around a quarter involve healers or healing in some form. Equally significantly, a majority involve herbs and roots in some form. Valerie A. Kivelson, private e-mail correspondence, 11 July 2012.

\(^2\) The only person to have devoted time to Apothecary Chancery testimony in the witchcraft trials is Eve Levin. See Eve Levin, ‘Healers and Witches in Early Modern Russia’, in Saluting Aron Gurevich: Essays in History, Literature, and Other Related Subjects, ed. Yelena Mazour-Matusevich and Alexandra S. Korros (Leiden: Brill, 2010), 105–33. Several works deal with the market reforms, but do not explicitly deal with the Apothecary Chancery’s role in shaping those reforms. For a recent study of the market reforms, see V. A. Kovrigina, ‘Apteki i aptekari Moskvy vtoroi poloviny XVII – pervoi chetverti XVIII v.’, Vestnik Moskovskogo universiteta, seriia 8, Istoriia, 1 (1999), 38-70.
Apothecary Chancery’s role in medical regulation and witchcraft trials had a significant effect on the production and, in particular, the dissemination of medical knowledge.

**The Initiation of An Investigation**

Both witchcraft and medical malpractice trials were initiated some time before the Apothecary Chancery became involved. Central departments could initiate their own investigations into the abuse of dangerous substances. In the second half of the seventeenth century the Apothecary Chancery’s expertise in herbs, roots and medicines was applied to irregular medical practice, which was investigated on more than one occasion by the Musketeers’ Chancery. These cases typically centred on an irregular medical practitioner who had sold or procured medicines that might have caused serious harm or death. Previously, medicines had been sold freely on certain Moscow markets, as long as they were only for external use; the so-called ‘gold row’ in Kitai-gorod had been selling medicines since at least 1625. Partly, the greater control over internal medicine stemmed from a recognition of its strength: medicines taken internally were thought to have a greater effect on the body than external medicines such as plasters. A series of cases involving internal medicines changed the state’s stance towards the market trade in medicines, a process in which the Apothecary Chancery’s production of knowledge played a central role.

This was particularly true in the last decades of the seventeenth century. In 1685 the head of the Musketeers’ Chancery, Counsellor Secretary Fedor Ruleontevich Shaklovityi, requested a report from the Apothecary Chancery on the herb *p’ianoe zelie* [lit. heady herb], which was being sold on the market stalls [zelenyi riad, herb row] as a medicine. In this instance, the investigation wasinstigated by a chancery head, who also made the decision to involve the Apothecary Chancery. This follows the pattern established for other reports; the Apothecary Chancery was asked to produce expert knowledge in the form of reports by various branches of the Muscovite central administration.

Central government involvement in medical malpractice investigations was particularly evident in a case from 1699, when another, much larger, investigation of the market stalls selling medicines was initiated by the Musketeers’ and Apothecary

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3 RGADA f. 143, op. 3, ed. khr. 466.
5 On other reports, see Chapter Four.
Concern over those markets peaked after a boyar, P. P. Saltykov, died after taking medicines purchased there; this followed deaths in 1679 and 1686 which had similarly been linked to the herb markets. On this occasion, six stallholders were interrogated in the Apothecary Chancery about the products they were selling, and for how long they had been trading in these medicines. In addition to this interrogation, the Kitai-gorod town hall [ratusha] produced a report on the sale of medicines in their district. Kitai-gorod was a prosperous business district of Moscow, in which there were, apparently, market stalls selling herbal medicines. The town hall was able to provide information on who rented stalls, but not on what types of medicines were being sold; this explicit statement of what could not be provided indicates that the focus of the investigation continued to be the items sold on the market. The involvement of multiple departments, the Musketeers’ and Apothecary Chancery and also the Kitai-gorod town hall, in investigating medical malpractice further emphasises the importance of central government intervention in such cases.

In contrast to the driving role of the central departments in investigating medical malpractice, some of witchcraft cases that were referred to the Apothecary Chancery originated in the provinces. Although witchcraft at court was common in this period, none of these cases were sent to the Apothecary Chancery; the Apothecary Chancery only dealt with witchcraft trials originating outside court circles. The Russian court

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6 RGADA f. 143, op. 3, ed. khr. 462.
7 Oreshnikov, ‘Gurchin’, 47. 1679 malpractice case against Grigorii Donskoi, RGADA f. 143, op. 2, ed. khr. 1251; Mamonov, Materialy, iv, pp. 1110-11. 1686 malpractice case against Andrei Kharitonov and Mikhail Tuleishchikov, Novombergskii, Materialy, ii, pp. 311-12.
8 RGADA f. 143, op. 3, ed. khr. 462.
9 RGADA f. 143, op. 3, ed. khr. 466.
10 The Apothecary Chancery did treat two members of court for illnesses thought to be caused by witchcraft, but these were patient examinations, not witchcraft trials; no trial was convened, no one accused of witchcraft. 1623 examination of Khlopova, Sobranie gosudarstvennykh, iii, 257-66. See also Chapter Two, pp. 56-57. 1658 examination of a man suffering from masturbation thought to be brought on by witchcraft, RGADA f. 143, d. 2, ed. khr. 344; Mamonov, Materialy, ii, p. 705. Various medical and religious writers have considered masturbation to be either in illness in itself or as a cause of illness, particularly in men. The document is unclear on this point. On early modern ideas of masturbation as an illness, see Michael Stolberg, ‘The Crime of Onan and the Laws of Nature. Religious and Medical Discourses on Masturbation in the Late Seventeenth and Early Eighteenth Centuries’, Paedagogica historia, 39 (2003), 701-17. For examples of court witchcraft investigations, see Sedov, Zakat, pp. 260-66, 331-33; Kozliakov, Mikhail, pp. 144-47; Bushkovitch, Struggle, pp. 50, 62, 90-7, 172, 210, 235; M. E. Zabelin, ‘Sysknye dela o vorozheiakh i kolduniakh pri tsaria Mikhaila Fedoroviche’, Kometa. Ucheno-literaturnyi almanakh (1851), 469-92; A. N. Zertsalov, K materialam o vorozhbe v drevnei Rusi: Sysknoe delo 1642-1643 gg. o namerenii
was concerned about witchcraft, both that originating in court circles and that performed by more lowly Muscovites; in 1652 Aleksei Mikhailovich sent an edict to his military governors, ordering that they devote resources to prosecuting witchcraft.\textsuperscript{11} State efforts to prosecute witchcraft were an innovation; previously, witchcraft had fallen under the jurisdiction of the Church. Indeed, witchcraft was banned in ecclesiastical law but not usually mentioned in secular statutes.\textsuperscript{12} From the early seventeenth century, witchcraft in Russia was prosecuted as a form of \textit{Slovo i delo gosudarevo} [lit. word and deed of the sovereign], the Russian form of treason, which was defined so widely as to include any negative statement about the tsar.\textsuperscript{13} Significantly, treason law meant that such cases had to be reported on in detail to the central authorities, which led, in some cases, to the Apothecary Chancery providing testimony for cases that originated outside Moscow.

The first witchcraft case in which the Apothecary Chancery played a role took place in 1628, and began in Rzhev, a town around 200 km northwest of Moscow; it was then referred to Moscow.\textsuperscript{14} The Apothecary Chancery’s involvement in such an early case would indicate that central government interest in provincial witchcraft cases predates Aleksei’s order of 1652. In 1699 the Apothecary Chancery provided expert testimony in a witchcraft case originating in Pereiaslav'-Zaleskii uezd, 140km northeast of Moscow.\textsuperscript{15} Of the 12 cases of witchcraft the Apothecary Chancery was involved in, only two can be definitely traced back to the provinces.\textsuperscript{16} Despite the small number of provincial cases forwarded to the Apothecary Chancery, these cases are still important. Such provincial involvement was unusual; typically, this branch of the Muscovite administration did not play a role in Apothecary Chancery knowledge

\textsuperscript{11} Novombergskii, \textit{Materialy}, iii, part 1, pp. 78-79.
\textsuperscript{12} The sole exception is the 1584 \textit{Sudebnik}. For a discussion of the significance of this text for Russian witchcraft, see B. A. Uspenskii, ‘Pravo i religiia v Moskovskoi Rusi’, in \textit{Fakty i znaki: Issledovaniia po semiotike istorii}, ed. B. A. Uspenskii and F. B. Uspenskii (Moscow: Iazyki slavianskikh kul’tur, 2008), 122-79.
\textsuperscript{13} On \textit{Slovo i delo gosudarevo} see Golikova, ‘Syska’.
\textsuperscript{14} Sending herbs found on the accused to the Apothecary Chancery was not an automatic part of the witchcraft trial process. A number of seventeenth century trials in which herbs were presented as evidence did not involve the Apothecary Chancery, and it is unclear why certain cases were referred to the Apothecary Chancery.
\textsuperscript{15} RGADA f. 143, op. 3, ed. khr. 454.
\textsuperscript{16} 1628 witchcraft case against Andrei Loptunov, Novombergksii, \textit{Materialy}, iii, part i, pp. 9-12. 1699 witchcraft case against peasant Mikhail Grigor’ev, RGADA f. 143, op. 3, ed. khr. 454.
production. The need to prosecute provincial witchcraft trials centrally led to limited involvement of the provincial administration in directing Apothecary Chancery report production, thus expanding the circle of persons who took part in knowledge production.

Alongside provincial administrators, other Muscovite servitors also became involved in initiating cases about dangerous substances, in particular medical malpractice cases against irregular medical practitioners. The first such medical regulation case occurred in 1652, when Apothecary Chancery surgeon Andrei Ivanov brought a case against the irregular practitioner Dmitrii Selunskii. Ivanov and Selunskii had both treated the same patient, who had later died because, Ivanov claimed, Selunskii had given the man an inappropriate medicament (opium). The interrogation of Selunskii revolved around several key points. Unsurprisingly, the question of whether he caused the death was central, with Selunskii denying culpability, and claiming he had not seen the man for some days before his death and in fact had been out of town at the time of death. Less obvious are some of the other lines of questioning: Selunskii was also accused of soliciting patients, and of charging large amounts of money for his services. He denied both points, claiming that the sick asked for his advice, and gave him presents in gratitude.

The significance of these second two points – whether Selunskii solicited work and whether he was paid for his services – appears to lie in the definition of his activities. In the 1650s as a rule the Russian court turned a blind eye to irregular medical practice, particularly that performed on behalf of ordinary Muscovites. Such healers were often amateurs and the connections between themselves and their patients were more complex than a simple doctor-patient relationship. Presenting oneself as a physician and soliciting money for doing so was a much clearer issue: only Apothecary Chancery practitioners had the right to present themselves as official healers and physicians, and, if Selunskii had been soliciting work, he had infringed their officially sanctioned monopoly. Selunskii’s crime lay not only in causing harm to his patient, but also in illegitimately presenting himself as a medical practitioner. It was this infringement of Apothecary Chancery privilege that led to the involvement of a medical servitor in instigating this medical malpractice case.

17 On private medical practice, see Chapter Three, p. 80.
18 RGADA f. 143, op. 3, ed. khr. 3; Mamonov, Materialy, iii, pp. 616-18.
19 RGADA f. 143, op. 3, ed. khr. 3; Mamonov, Materialy, iii, pp. 616-18.
The Selunskii case can also be linked to wider trends concerning servitor behaviour in Muscovy. Like all Muscovite servitors, the medical staff of the Apothecary Chancery swore a service oath. These oaths became more complex over time, often repeating key injunctions, and making very specific references to forbidden activities, and to people with whom it was forbidden to consort. A key concern of these oaths was the duty of Muscovite servitors to safeguard their sovereign, commonly by denouncing anyone they heard plotting against the tsar.\textsuperscript{20} Some of these oaths, in particular those from the reign of Boris Godunov, mentioned poisoning, a feature that continued to be important into the seventeenth century. In the case of the Apothecary Chancery, these two points – preserving the health of the tsar, and guarding against poisoning – were particularly vital.

The oaths specify proper conduct of Apothecary Chancery medical practitioners as a group: they swore to watch one another, and to keep a special eye on the concoction of recipes for the tsar, to ensure their colleagues did not put in bad ingredients instead of good. They pledged

\begin{quote}

to watch vigilantly over my colleagues in preparing all concoctions and in all measures which are created for their, the Lord's [tsar's] health so that they [my colleagues] do not put into [those] concoctions anything bad nor substitute an evil herb for a good.\textsuperscript{21}
\end{quote}

Such promises to report the illicit behaviour of others, the ‘duty to denounce’, as Ann Kleimola refers to it, were a common feature of Muscovite service oaths.\textsuperscript{22} Apothecary Chancery medical practitioners were thus required to denounce the bad medical practice of others.

The strict rules about the preparation of medicine outlined in Apothecary Chancery service oaths were indeed applied: a number of documents testify to internal

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\textsuperscript{21} ‘над товарыщи своими во всяких составех и во всяких мерах которые для их Государского здоровь уучнуть составатывать смотрети накрепко чтоб они в составах никакого дурна не чинили и зелья лихова вместо добраго’.

Apothecary Chancery oaths from the reign of Mikhail Fedorovich, Mamonov, \textit{Materialy}, i, p. 48. See also Apothecary Chancery oaths from the reign of Aleksei Mikhailovich, RGADA f. 143, op. 3, ed. khr. 548. Both sets of oaths are markedly similar.

\textsuperscript{22} Kleimola, ‘Duty to Denounce’, p. 765.
\end{footnotes}
investigations into the preparation of medicines.\textsuperscript{23} Most such transgressions appear to have been relatively minor: in 1673 a member of staff was incorrectly measuring the quantities of water added to concentrated medicines before sale; in 1685 two Apothecary Chancery auxiliary staff members stole departmental supplies to make gin, violating the Russian state’s monopoly on distilled alcohol production; also in 1685 a staff member accidentally substituted a phial of water for one of essence of rosemary.\textsuperscript{24} Despite the relatively minor nature of these infractions, and the fact that no one was hurt by these crimes, the defendants in all cases were sentenced to corporal punishment.

More serious cases, in which Apothecary Chancery practitioners were suspected of causing harm, were much less common. In 1682 an Apothecary Chancery physician, Arnold van Hulst, was suspected of causing the death of his patient, Fedor Neledinskii. As a result the Apothecary Chancery demanded a list of medicines Hulst had prescribed to Neledinskii, and instructed Doctor Kellerman, a fellow Apothecary Chancery physician, to perform an autopsy on the deceased. Kellerman concluded that the body showed no signs of an adverse reaction to the medicines, rather Neledinskii appeared to have died due to the fever for which van Hulst had been treating him. As the investigation ended here and no punishment was recorded for van Hulst, he appears to have been cleared of the charges.\textsuperscript{25} It would seem that van Hulst was not to be held to account for failing to heal his patient; the sole concern was his possible culpability in causing a death through malpractice. The Apothecary Chancery recognised the inherent dangers of medicines, as substances that, if misused, that could cause illness or death.

In some such internal malpractice cases, the Apothecary Chancery medical practitioners did indeed follow their ‘duty to denounce’. Such was the case in 1703, when apothecary Daniel Gurchin was investigated for incorrectly preparing the medicine \textit{confectio alkermes} (also known as \textit{confectio alchermes}) for sale in the Apothecary Chancery shop.\textsuperscript{26} Gurchin was denounced by his colleague Dr Blumentrost.

\textsuperscript{23} Levin has discussed these internal investigations. See Eve Levin, ‘Government Regulation of the Herbal Medicine Trade in Seventeenth-Century Muscovy’, NCEeer Working Paper (Washington, DC, National Council for Eurasian and East European Research, 2001). I am grateful to Eve Levin for providing me with a copy of her paper.

\textsuperscript{24} 1673 case against Vasilii Likhonin, RGADA f. 143, op. 2, ed. khr. 1054. 1685 case against Savva Terent'ev and Ganka Fedorov for unlicensed production of spirits, RGADA f. 143, op. 3, ed. khr. 156. 1685 case against Kuz'ma Dmitriev for replacing essence of rosemary with water, RGADA f. 143, op. 3, ed. khr. 155.

\textsuperscript{25} RGADA f. 143, op. 2, ed. khr. 1361; Mamonov, \textit{Materialy}, iv, pp. 1288-89.

\textsuperscript{26} See for example RGADA f. 143, op. 2, ed. khr. 750.
alchemist Peter Pil, also denounced Gurchin’s work.\textsuperscript{27} In the Gurchin case, it was his fellow practitioners who acted to denounce his inappropriate medical practice, as set out in the Apothecary Chancery service oaths. Similarly, in the case from 1673 Vasiliy Likhonin was denounced for adding too much water to medicines by the apothecary Guttmensch.\textsuperscript{28} It seems that Apothecary Chancery medical practitioners did at least occasionally fulfil their duty to denounce bad medical practice.

As Muscovite servitors, Apothecary Chancery medical practitioners were bound to denounce bad medical practice within the department; judging by the Selunskii case, this culture of denunciation also extended to private medical practice. It is likely that Ivanov denounced Selunskii partly to defend his own business, but the culture of official denunciation likely played a role in how that case unfolded. The duty to denounce thus expanded the circle of servitors who could initiate an investigation, from primarily chancery directors and higher government officials, to more lowly servitors like medical practitioners.

Medical malpractice cases also led to the involvement of other Muscovites in Apothecary Chancery report production. The earliest mention of the problematic market stalls selling herbal medicines in the Apothecary Chancery records was in 1679, when Iurii Shcherbatskii petitioned to bring a case against a musketeer, Grigorii Donskoi, who had treated his brother, Prince Fedor Shcherbatskii, using medicine obtained from the Moscow herb markets. Fedor Shcherbatskii had become terminally ill after taking the medicine, developing sores in his mouth soon after ingesting it. The Apothecary Chancery made an assessment of the remaining medicine, and sent that report on to the Musketeers Chancery, which was investigating the case.\textsuperscript{29} Although Shcherbatskii was a servitor, in petitioning for the death of his brother to be investigated, he seems to have been acting for personal reasons, rather than fulfilling his service duties.

The Shcherbatskii case may well have had a wider significance for medical regulation in Muscovy. After the Shcherbatskii case, wider and more comprehensive reviews of the market trade in drugs were conducted by the Musketeers Chancery: initially the 1685 inquiry into the sale of \textit{p’ianoe zelie}, then later the comprehensive review of 1699.\textsuperscript{30} The documents do not state why these investigations were undertaken, but the Shcherbatskii case would certainly have drawn the attention of the authorities to the potential dangers of the herbal medicines market trade.

\textsuperscript{27} RGADA f. 143, op. 2, ed. khr. 1622.
\textsuperscript{28} RGADA f. 143, op. 2, ed. khr. 1054.
\textsuperscript{29} RGADA f. 143, op. 2, ed. khr. 1251; Mamonov, \textit{Materialy}, iv, pp. 1110-11.
\textsuperscript{30} See above, pp. 182-83.
Prince Fedor Shcherbatskii was not alone among the Muscovite elite in using an irregular practitioner. In 1662, after the death of former Apothecary Chancery head boyar Boris Ivanovich Morozov, an investigation was conducted into his medical treatment during his final illness. During this final illness Morozov had turned to an irregular healer then in his service; this man was then questioned about his treatment of Morozov. Tiaglets [tax-payer] Fedor [Fed'ka] Belozertsov was questioned about his provision to Morozov of the herb zaiach’e kopyto [lit. hare’s hoof]. Belozertsov was also asked a number of questions about his qualifications to practise medicine, and the length of time he had been practising, but his answers only dealt with the herb and with Morozov’s illness, not his suitability to act as a healer. Belozertsov stated that he had acquired this herb on his master’s (Morozov’s) insistence, as it was a treatment for mokrotnaia bolezn’ [lit. phlegmatic illness]. Belozertsov also stated that he had previously given the same zaiach’e kopyto herb to his mother, who had then lived for a further twenty years. The document ends here, and Belozertsov’s fate is unknown.

Morozov’s employment of an irregular medical practitioner like Belozertsov is significant. Although Morozov had fallen from prominence in 1648, losing all his chanceries, he remained a significant boyar; he was listed as the most senior boyar in the Boyar Books from 1651 until his death in 1661. Moreover, there is no evidence to suggest that Morozov was banned from using the Apothecary Chancery’s services, as in fact happened to some other prominent boyars, such as members of the defeated Naryshkin faction, A. S. Matveev and K. P. Naryshkin in 1677. It is also noteworthy that Morozov had previously used the services of the Apothecary Chancery; in 1657 the Apothecary Chancery examined one of his servants for him. Morozov would thus seem to have acquired some degree of respect for Western medicine, as he asked for Apothecary Chancery treatment for his servant well after the end of his tenure at that department (1648). Morozov also used the Apothecary Chancery for himself; during his final illness in 1662 he was under the care of Apothecary Chancery physician Samuel Collins. Nevertheless, Morozov evidently also continued to use native healers, apparently concurrently with his use of Apothecary Chancery staff. This incident

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31 On Morozov’s tenure in the Apothecary Chancery, see Chapter Two, pp. 61-63.
32 Muscovites were divided into two basic groups: those who served the state in some capacity [sluzhilye], and those who paid taxes [tiaglye].
33 Novombergskii, Materialy, i, pp. 12-13.
34 Poe, Russian Elite, i, pp. 161-91. On Boyar Books see Chapter Two, p. 69-70.
36 1657 treatment of Morozov’s servant, RGADA f. 143, op. 2, ed. khr. 292.
demonstrates that the Muscovite elite used the services of irregular practitioners either in preference to or alongside Apothecary Chancery services, likely explaining the court’s growing interest in regulating medicine in the late seventeenth century.

Cases like that of Shcherbatskii and, to a lesser extent, Morozov, are also significant because of who initiated the proceedings. The Shcherbatskii case was initiated by the brother of the victim.\textsuperscript{38} The Morozov file does not record who instigated the case, but it could have been a relative, as with the Shcherbatskii case. Previously, reports had primarily been instigated by members of the administration acting in their official capacity; Shcherbatskii, in petitioning for justice for his brother, was acting as an individual. As malpractice cases affected the lives of Muscovites, they became involved not only as servitors, but also as individuals. Thus the move to regulatory action meant that a wider segment of the Muscovite population became involved in directing Apothecary Chancery knowledge production. As before, central departments played a significant role, but provincial administrators, low-level servitors, and Muscovites acting as individuals also began to play a part.

\textit{The Production of Knowledge}

Once an investigation had been initiated, and a request sent to the Apothecary Chancery, the expert testimony was compiled by the relevant staff members. For both medical malpractice investigations and witchcraft investigations, this process involved the creation of a written report. This is typical for Apothecary Chancery procedure, but unusual for a witchcraft trial. Generally speaking, Russian witchcraft trial procedure was markedly similar to other early modern judicial proceedings.\textsuperscript{39} Once a case was brought to trial, both the accuser and the accused would give evidence. This evidence would be supported by the testimony of other witnesses, usually residents of the same town in good standing.\textsuperscript{40} Witness testimony was the preferred form of evidence in Russian trials of the fifteenth and sixteenth centuries, but, by the seventeenth century,

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\item \textsuperscript{38} 1679 malpractice case against Grigorii Donskoi, RGADA f. 143, op. 2, ed. khr. 1251; Mamonov, \textit{Materialy}, iv, pp. 1110-11.
\item \textsuperscript{39} On similarities between Russian and Western law in the seventeenth century, see George G. Weickhardt, ‘Pre-Petrine Law and Western Law: The Influence of Roman and Canon Law’, in \textit{Kamen’ Kraeugln: Rhetoric of the Medieval Slavic World. Essays presented to Edward L. Keenan on his Sixtieth Birthday by his Colleagues and Students} ed. Nancy Shields Kollmann, Donald Ostrowski, Andrei Pliguzov and Daniel Rowland (Cambridge, MA: Ukrainian Research Institute, Harvard University, 1995), 756-83.
\item \textsuperscript{40} On witness testimony see Ann M. Kleimola, ‘Justice in Medieval Russia: Muscovite Judgement Charters (\textit{Pravye gramoty}) of the Fifteenth and Sixteenth Centuries’, \textit{Transactions of the American Philosophical Society}, 65 (1975), 5-93 (pp. 35-46).
\end{itemize}
\end{footnotesize}
the growing administrative literacy of the chancery system had penetrated judicial procedure, and written documents became the primary form of evidence.\textsuperscript{41} Witchcraft trials deviated from this general norm, as this group of trials continued to rely heavily on witness testimony.\textsuperscript{42} In contrast to the general norm of Muscovite witchcraft trials relying on witness testimony, witchcraft trials involving the Apothecary Chancery relied upon written, expert evidence. As such witchcraft testimony, and also malpractice testimony, followed previous Apothecary Chancery practice.

Expert testimony provided for both medical malpractice and witchcraft cases followed previous practice in one other important way; like earlier reports and indeed medical books produced by the Apothecary Chancery, they were composed collectively.\textsuperscript{43} In medical malpractice cases from 1657, 1679, and 1685, reports were provided by a group of practitioners.\textsuperscript{44} Similarly, in all twelve of the cases where expert testimony was provided for witchcraft trials by the Apothecary Chancery, multiple experts were consulted.\textsuperscript{45} Typically, just two or three practitioners made a joint report. In other cases, particularly when more than one group of experts were consulted, up to six experts were involved in producing testimony.\textsuperscript{46} This reliance upon groups of experts appears to be even more important for expert testimony than it was for other reports and medical books. Although many reports and medical books were produced collectively, it was typical to consult just two or three men. It is also common to find reports and medical books that were apparently initially composed by just one medical expert.\textsuperscript{47} Expert testimony produced for witchcraft trials and medical malpractice cases


\textsuperscript{43} See Chapters Four and Five.

\textsuperscript{44} 1657 malpractice case against Dmitrii Selunskii, RGADA f. 143, op. 3, ed. khr. 3; Mamonov, \textit{Materialy}, iii, pp. 616-18. 1679 malpractice case against Grigorii Donskoi, RGADA f. 143, op. 2, ed. khr. 1251; Mamonov, \textit{Materialy}, iv, pp. 1110-11. 1685 investigation into the sale of \textit{p'ianoe zelie}, RGADA f. 143, op. 3, ed. khr. 1722.


\textsuperscript{46} See 1703 witchcraft cases against Nataliia Elfimova and Ustinia, RGADA f. 143, op. 2, ed. khr. 1618. See also 1679 malpractice case against Grigorii Donskoi, RGADA f. 143, op. 2, ed. khr. 1251; Mamonov, \textit{Materialy}, iv, pp. 1110-11.

\textsuperscript{47} See Chapter Four, esp. p. 110, and Chapter Five, for example pp. 170-72.
thus further emphasise the collective nature of knowledge production in the Apothecary Chancery.

Expert testimony provided by the Apothecary Chancery for medical malpractice and witchcraft trials differed from the earlier reports in one vital respect: the identity of the servitors who provided that testimony. Previously, physicians had provided expert advice; when other medical practitioners were involved in the reporting process it was as a part of a group headed by a physician. In contrast, testimony provided for the medical malpractice trials was commonly composed by the apothecaries. Such was the case in 1679, when two apothecaries and a pupil of alchemy made the initial assessment. Similarly, the men who examined the *p*’*ianoe zelie* in the 1685 investigation were not physicians, but two apothecaries and an alchemist. There thus appears to have been a shift towards using apothecaries as medical experts in the medical malpractice investigations.

Testimony produced by the Apothecary Chancery for witchcraft cases was also provided by apothecaries. Significantly, the witchcraft cases seem to show a growing trend across the seventeenth century towards using apothecaries as experts. In witchcraft cases from 1628, 1657, and 1673, both physicians and apothecaries were involved in the examinations. In contrast, cases brought before the Apothecary Chancery in 1664, 1699, and 1703 were examined by apothecaries, and, in 1703, apothecaries and a herb collector. As with the cases of irregular medical practice dealt with above, it seems that in the second half of the century the onus for examining herbs and roots for witchcraft trials fell upon the apothecaries, not the physicians, marking another area where the physicians lost their previous monopoly on report production.

The question should thus be asked, why were apothecaries and alchemists asked to draw up reports, so undermining the physicians’ former status as chief medical advisers? As the Apothecary Chancery grew in size during the seventeenth century, it also became increasingly busy, and it would appear to have become necessary to allow

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48 See for example Chapter Four, p. 125-26.
50 1685 malpractice investigation, RGADA f. 143, op. 3, ed. khr. 172.
greater delegation of tasks down the medical hierarchy. The relative numbers of the different medical professions in the Apothecary Chancery is significant: the numbers of physicians employed there remained almost static across the century, whereas the numbers of apothecaries rose five-fold. The department’s business grew, but the number of physicians did not, and so it was necessary to delegate certain duties previously undertaken by the physicians to other servitors. As apothecaries and their colleagues the alchemists dealt with medicines as a central part of their duties, they would have been expected to know about the raw ingredients for medicines like herbs and roots. Apothecaries and alchemists were thus used as experts on medicines and herbs in the late seventeenth century as the Apothecary Chancery rearranged its duties amongst its staff to deal with the increased demand for its services.

The nationality of the staff asked to produce expert testimony is also significant. The herbs and roots about which testimony was composed were sourced from within Russia, raising issues of local knowledge. During the early modern period, Western Europeans were considering the issue of local or indigenous nature and knowledge. According to Alix Cooper, as European nations came into contact with the peoples of and objects from the New World, they began to pay closer attention to their own region, and its nature, as part of an effort to distinguish what was foreign and strange from what was local, domestic, and indigenous to Europe. This process began in the colonial nations – England, the Netherlands, France – but also spread to those polities without significant overseas colonies, such as the German Lands. In much of Europe, local knowledge of local plants was thought to be important.

The Russian court also seems to have been aware of regional differences in plants and nature. In 1659, the English merchant John Hebdan was instructed to acquire an herbal for the court that included information about Russian and Polish herbs, as well as those that grew elsewhere. Finding information about Russian herbs in the seventeenth century was a difficult task; although local knowledge was likely interpolated into herbals as they were copied, no herbal explicitly dealing with Russian herbs was written

\[53\] See Chapter One, pp. 19-20, and Chapter Three, pp. 95-98.
\[54\] See Chapter One, p. 25.
\[55\] On the training of apothecaries, see Chapter Three, pp. 79-80 and Chapter Five, p.145-49.
until Robert Eskine’s work of 1709. It is known that the Apothecary Chancery owned works by Simon Syrenius (1540-1611), the Polish botanist and academic. It seems likely that these five books owned by the department constituted Syrenius’ five-volume botanic atlas, which described more than 700 different plants, including some indigenous to Poland, which may well have also been available in Russia. It is possible that these works were in fact those purchased by John Hebdan according to the order of 1659, as they correspond exactly to the instruction to provide volumes with information on local herbs. The Russian court was aware of regional differences in plant-life, and adjusted their acquisition of medical texts accordingly.

Although the Russian court understood that there were issues over regional plants and local knowledge, foreigners commonly examined medicaments, whether purchased from abroad or sourced from within Russia. Foreigners also played a notable role in producing expert testimony on herbs and roots for medical malpractice and witchcraft trials. In medical malpractice cases from 1657, 1679 and 1685 foreigners played a part in composing the testimony. Indeed, in the 1685 p’ianoe zelie case all the examiners were foreign medical practitioners. Similarly, with one exception in the 1703 case, all of the medical experts who composed testimony for witchcraft trials were foreign.

Native Russians did play some role in the composition of expert testimony: in the 1679 Shcherbatskii case two separate groups of experts were consulted, the first group being led by foreigners, and the second group entirely consisting of Russians; in 1703 an herb collector, Ivan Ivanov helped compose the report. Native medical practitioners working in the Apothecary Chancery thus had a limited role producing reports.

The continued use of foreign experts to provide knowledge on Russian herbs by the Apothecary Chancery in the late seventeenth- and early eighteenth-centuries seems particularly odd given the effort devoted to training Russians as medical practitioners.

58 Collis, Petrine Instauration, p. 188.
59 Luppov, Kniga v XVII veke, p. 206. 1673 order for books by Syrenius to be sent to the Apothecary Chancery, RGADA f. 143, op. 2, ed. khr. 1290; Mamonov, Materialy, iii, p. 839. See also Mamonov, Materialy, iv, pp. 897-99.
61 See for example below p. 201.
63 1685 malpractice case, RGADA f. 143, op. 3, ed. khr. 172.
64 RGADA f. 143, op. 2, ed. khr. 1618.
65 1679 malpractice case, RGADA f. 143, op. 2, ed. khr. 1251; Mamonov, Materialy, iv, pp. 1110-11. 1703 witchcraft cases, RGADA f. 143, op. 2, ed. khr. 1618.
As shown in the previous chapter, the Apothecary Chancery apprenticed various Russians to foreign practitioners then working in the department, arranged for language lessons, and imported and translated texts, all in pursuit of creating a native caste of medical professionals.66 This included the training of apothecaries, a group who played an increasingly large role in the production of expert testimony in the latter part of the century due to their knowledge of medicaments and their properties. Certainly some such newly trained Russian apothecaries, and some Russian herb-collectors, were working in the Apothecary Chancery by the late seventeenth century, and yet they only had a limited role in knowledge production.

The limited contribution of Russian medical practitioners to composing reports is also surprising given that Russians did play other roles in the Apothecary Chancery reporting process. Russians had long been involved in shaping medical knowledge, through topic choice, editing and translating; indeed, Russian interference in knowledge production had previously led to notable changes in the reports through the insertion and removal of sections.67 Russians continued to play a role in setting the topics for expert testimony; of the cases referred to the Apothecary Chancery for expert opinions, almost all had been initiated by Russians, and in all cases the decision to order expert testimony was taken by a Russian.68 It can also be assumed that Russian translators and scribes continued to play a role in shaping the reports through editing and summarising.69 Russians played a central role in setting the topics for report production, and in editing the final versions, but only ever took a limited role in composing the reports themselves.

This continued reliance on foreigners to provide expert testimony even when native experts were available would seem to relate to Levin’s idea that foreign medical knowledge was heavily endorsed by the Russian court.70 It would seem that the respect for foreign knowledge was sufficiently strong for the court to continue to rely upon foreigners even when a native alternative existed. Concern over local differences in nature and investment in the project of training native medical practitioners led to only a minor role in report composition by native medical practitioners.

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68 See above, pp. 182-90.
Knowledge of Nature

Once the experts who were to produce the report were assembled, they began to compile their testimony. The content of that testimony is significant for what it reveals about the limits of Apothecary Chancery expertise. Primarily, that expertise was applied to examining herbs. Apothecary Chancery medical practitioners commonly examined herbs purchased by the department before use; as such, expert testimony provided for witchcraft and medical malpractice trials was an extension of previous Apothecary Chancery procedure. Apothecary Chancery involvement in witchcraft trials differed from European norms regarding the role of physicians and other medical practitioners in such trials. Orna Alyagon Darr has shown that physicians in England were commonly asked to examine the plaintiff, to see if their sickness was genuinely caused by witchcraft rather than natural causes. Less commonly, they were asked to examine the defendant for the so-called devil’s mark, a mark or boil on the witch’s body, as there were people who specialised in locating the devil’s mark. Apparently, England here (as in other ways) differed from the Continental trials. The French surgeon Pierre Pigray (c.1532-1613) gave advice on how to proceed in witchcraft trials to his fellow medical practitioners in his work *Epitome de préceptes de médecine et chirurgie* [Summary of the principles of medicine and surgery] (1609). Pigray states that medical practitioners are commonly called upon to examine the accused for the devil’s mark. In Continental Europe, and in England, physicians were used in witchcraft trials to examine human bodies for evidence. The Russian use of medical practitioners to examine herbs in witchcraft trials thus appears to have been unusual, and possibly even unique. Expert testimony provided by the Apothecary Chancery for witchcraft trials followed the norms of that department, but was atypical for the trials themselves.

Indeed, examinations of herbs as a part of medical malpractice cases bore a striking similarity to earlier Apothecary Chancery herb examinations. Such herb examinations took place as a part of the 1679 Shcherbatskii case, and the 1685 *p’ianoe zelie* case. In 1679, Fedor Shcherbatskii became terminally ill after taking the

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71 For an example of an Apothecary Chancery examination of purchased medicaments, see Mamonov, *Materialy*, ii, pp. 355-56.
medicine, developing sores in his mouth soon after ingesting it. The medicines in question were shown to the Apothecary Chancery physicians, who could not identify them, but a group of Russian surgeons were able to, although they were unable to confirm all the ingredients. In particular there was a fear that mercury could have been added to it, presumably as this was the active ingredient suspected of causing the sores Shcherbatskii reported. Here the Apothecary Chancery medical practitioners gave their opinion on the contents of a suspicious medicament after examining it.

In 1685 the Apothecary Chancery reported on the herb \textit{p'ianoe zelie}, which was being sold on the market stalls \([\text{zelenyi riad}, \text{herb row}]\) as a medicine. The head of the Musketeers’ Chancery who had requested the report particularly wanted to know if this herb had been licensed for sale \([i \text{ poskolko ego veleno prodavat i s porukoiu l' ili bes poruk}]\), and if this herb was appropriate for use as an internal medicine. Apothecary Chancery experts declared the \textit{p'ianoe zelie} unfit for use in internal medicine after an examination of texts in the Apothecary Chancery library revealed that it was not listed as medicinal. The report further added that the \textit{p'ianoe zelie} was a dangerous herb, capable of causing amnesia \([\text{zabvenie uma}]\) and even death. In their reports for medical malpractice, the Apothecary Chancery performed examinations of individual objects, and stated their properties.

A second noteworthy feature of the \textit{p'ianoe zelie} examination is the stated origin of the information on that herb: the knowledge supplied to the Musketeers’ Chancery by the Apothecary Chancery is explicitly stated as having been obtained from books. The Apothecary Chancery had a sizeable library of medical works, some of which listed types of plants and their properties. Apothecary Chancery reports commonly rephrased and summarised medical knowledge gained from Western medical texts, but only occasionally explicitly stated this fact. The chancery system, with its need for a detailed record system, expanded the sphere of literacy in Muscovy by demonstrating its utility for effective governance. As Daniel E. Collins has noted, the drive towards documentation also affected the Muscovite judicial system in the seventeenth century, with reports becoming the most important form of evidence. Establishing books as the

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77 RGADA f. 143, op. 3, ed. khr. 172.
78 On the Apothecary Chancery library see Chapter Five pp. 146-50.
79 See Chapter Four, pp. 120-26.
80 Collins, ‘Speech Reporting’, p. 270.
ultimate origin of knowledge about the *p‘ianoe zelie*, and communicating that knowledge through a written report, reaffirms the rise of literacy as a significant contribution by the chancery system to the production of knowledge in Muscovy.

The same basic formula of Apothecary Chancery herb examinations – investigation of a specific object and statement of its contents and properties, sometimes after referring to medical books – was also found in witchcraft trials. This in itself is interesting; most official Russian documents dealing with herbs and witchcraft take an overwhelmingly negative view of herbs. In 1652 Aleksei Mikhailovich dispatched an edict to the military governors, who administered various provinces within the Russian territory, on the punishment of witches, in which he stated:

Many ignorant people, having forgotten fear of God . . . keep banned, heretical and divinatory books and letters and curses and roots and poisons, and visit witches and wizards\(^1\), and make predictions from divinatory books using bones, and with those roots and poisons and evil\(^2\) incantations [they] curse many people to death, and from their *maleficia*\(^3\) many people suffer from various diseases and die.\(^4\)

In the same year (1651/2) a man convicted of witchcraft was burned to death, and the herbs found in his possession were burned with him, in accordance with the order of the tsar.

\(^1\) Translating Russian magic terminology is problematic, as often the sources do not specify what type of magic a particular term refers to, and indeed terms are often used apparently interchangeably. On Russian names for magic practitioners see W. F. Ryan, *The Bathhouse at Midnight. An Historical Survey of Magic and Divination in Russia* (University Park, PA: Pennsylvania State University Press, 1999), pp. 68-93.

\(^2\) The terms ‘heretical’ and ‘heretic’ were not always used literally. See Felix J. Oinas, ‘Heretics as Vampires and Demons in Russia’, *The Slavic and East European Journal*, 22 (1978), 433-41.

\(^3\) Here, magic intended to do harm.

\(^4\) ‘многие незнающие люди, забыв страх Вожий . . . держать отреченные еретические, и гадательные книги, и письма и заговоры, и коренья, и отравы, и ходят к колду нам и ворожеям, и на гадательных книгах костями ворожать, и теми кореньми, и отравы, и еретические наговоры многих людей на смерть портят, и от того их порчи многие люди мучатся разными болезнями и помирают’, Novombergskii, *Materialy*, iii, part 1, pp. 78-79, see also pp. 79-80.
in order to teach others not to resort to such criminality\textsuperscript{85} and poison people
to death with herbs.\textsuperscript{86}

Neither documents specifies what sort of herbs these were: no specific plants were
named, and no descriptors given. In contrast, Aleksei Mikhailovich’s edict enumerates
the types of books – banned, heretical and divinatory – that are illicit. Moreover, listing
specific types of books as banned implies that there are other books that may be owned.
These two orders, by simply listing ‘herbs’ rather than specifying problematic herbs,
imply that all herbs, without any exceptions or distinctions, are dangerous.

Trial documents also commonly follow this overwhelmingly negative attitude
towards herbs. In 1635 a court servant was found to have a herb in her possession when
at court, which was forbidden. She was interrogated under suspicion of witchcraft, but
maintained that it was not a bad herb, and that she had intended to use it for a love
spell.\textsuperscript{87} Significantly, in this case it was the accused and not the authorities making a
distinction between good and bad herbs; the authorities acting in witchcraft trials took a
negative view of all herbs. When the Apothecary Chancery was not involved, official
rhetoric on herbs and roots branded all such items dangerous. Despite this prevalent
official view that herbs were inherently suspicious, the Apothecary Chancery was used
to give testimony on the properties of herbs found on defendants.

Concerns over herbs did exist in the Apothecary Chancery, as evidenced by the
Apothecary Chancery service oath. Practitioners swore

\begin{quote}
not to curse with any business or cunning and not to give evil herbs or
roots.\textsuperscript{88}
\end{quote}

In this quote witchcraft is explicitly condemned: the verb \textit{isportit}’ literally means to
spoil, and is the verb of \textit{porcha} [\textit{maleficium}], denoting magic intended to cause harm.
The service oaths thus recognise a distinction between good and bad herbs. The oath
indirectly specifies what the quality of a bad herb is – the ability to harm, here linked to
witchcraft. As the Apothecary Chancery worked with herbs in an environment in which

\textsuperscript{85} The verb vorovat’, usually meaning to commit a theft or crime, is used here (as in
other witchcraft documents) to mean using a spell to cause harm to others.
\textsuperscript{86} ‘чтобь инымъ не повадно было так воровать и людей кореньемъ до смерти
отравливать’, Novombergskii, \textit{Materialy}, iii, part 1, pp. 78-79, see also pp. 79-80.
\textsuperscript{87} Zabelin, ‘Sysknye dela’, pp. 477-81.
\textsuperscript{88} ‘не испортить ни которыми деля и ни которую хитростью и зелья лихова и
herbs were viewed as dangerous, they had to create and promote a differentiated view of herbs: some herbs being good and others being bad. This differentiated view was applied to their testimony for witchcraft trials.

The earliest witchcraft case in which the Apothecary Chancery was asked to play a role occurred in 1628, when a suspicious root was found in the possession of a peasant, Andrei [Andreika] Loptunov. This case is significant, as many of its features are echoed in later documents concerning the Apothecary Chancery’s involvement in witchcraft trials. When questioned about the herb found on him, Loptunov stated that

the root he had wrapped around a crucifix was given to him by a passer-by on the road, and from which town [this man came] he does not know, and [the man] gave him that root because Andrei suffers from epilepsy [lit. black illness].

Andrei's claims were partly corroborated by his master, Mikhail Polibin, who stated that Loptunov had been released from service to travel to places of veneration [po sviatym mestam] in search of a cure for his illness.

Loptunov’s own testimony is significant. The Muscovite government was very concerned about the movement of people around the country. As we see here, Loptunov himself had to ask permission from his master before travelling. Indeed, persons who travelled from place to place were inherently suspicious, like the skomorokhi, itinerant minstrels. It is thus significant that the man from whom Loptunov received the root was both nameless and from an unknown location. In the West, both witchcraft and magic more generally were often seen as the product of the demonic pact, in which the witch would promise their soul for some price. This pact could be conducted without the witch’s knowledge, with a token given by the demon marking the conclusion of the pact. Loptunov’s case, in which he received a root from a mysterious stranger, albeit one wrapped around a crucifix, bears striking similarity to such unknowing demonic pacts. The idea of demons in Russian witchcraft trials is fraught with difficulties. Will

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89 ‘корень де у него привязан у креста дал ему дорогою идучи идучи прохожий человек и котораго города, того он не ведает, а дал ему тот корень для того, что он Андрейко болен черною болезнью’, Novombergskii, Materialy, iii, part 1, pp. 9-12; V. B. Kolosova, ‘Name – Text – Ritual: The Role of Plant Characteristics in Slavic Folk Medicine’, Folklorica, 10 (2005), 44-61 (p. 52).
90 Novombergksii, Materialy, iii, part 1, pp. 9-12
Ryan has stated that Russians viewed all magic as inherently demonic. Nonetheless, most Russian witchcraft trials make no mention of demons or the Devil, or indeed the demonic pact. In this case, the further development of the trial reveals some aspects of the Russians’ attitude to witchcraft.

Having heard the testimony of both Loptunov and his master, the court decided on further tests of Andrei’s story, and his characterisation of the root as medicinal, by sending the root to the Apothecary Chancery for examination. As the report states,

And the root that was taken from the peasant Andrei Loptunov was shown to the doctors in the Apothecary Chamber. And Doctor Valentine [Bills] and his colleagues, having looked at the root, said that this root [is called] Goose-flesh, and is used in medicines, and has nothing evil in it, and [people] put that root in the mouth. And if someone wished to commit a crime, and [if] he used the good herb badly, for criminality or witchcraft, that they do not know, [and they do not know] if there is a curse on that root.

The testimony of the Apothecary Chancery staff then supported Loptunov’s claims that the herb was medicinal.

This focus on the root is significant for two reasons. Firstly, the examination was in part to identify the root and state its properties. The need to establish the root’s properties suggests that the root could have certain inherent qualities as a natural object that would particularly recommend it for witchcraft; essentially, that a root could be

94 An alternative name for the Apothecary Chancery.
95 ‘И корень что взять у мужика у Андрейка Лоптунова показан во Аптекарской Палаты дохтурам. И дохтуры Валентин с товарищи смотрев кореня сказали, что тот корень Гусина плоть и к лекарству прогожается, а лихово в нем ничего нет, да и в рот тот корень клали. А будет де кто захочет воровать, и он и на добром корени воровством и наговором дурно сделает, а того де они не знают, ест ли на том корени наговор’, *Novomergskii Materialy*, iii, part 1, pp. 9-12.
magical. This demonstrates that the Russian authorities were concerned with the root itself, not simply the questionable (and even potentially demonic) circumstances under which it was obtained.

Secondly, it was the testimony of the Apothecary Chancery that shaped the discussion of those properties. As with the other Apothecary Chancery documents concerning herbs, in producing Bills’s report the physicians looked at the root, identified it, and outlined its uses. They strictly limited their answers to questions involving the root itself, denying any knowledge of curses. The physicians’ reluctance to address the question of curses speaks to a disjunction between the two groups, foreign physicians and Russians, over the types of knowledge the physicians were expected to have. The physicians, in insisting on only discussing the properties of the plant itself, maintained that the natural world was the correct sphere of their knowledge. Conversely, the Russians evidently believed that their physicians would have knowledge of curses. The foreign physicians’ conception of the proper limits of their expertise thus shaped what was included in the report.

In 1628 the defendant, Loptunov, relied upon his characterisation of the root he was carrying as medicinal to defend himself against charges of witchcraft; later defendants also relied on such a strategy. Such was the case in November 1657 with Andrei [Andriushka] Durbenev, who was interrogated in the Land Chancery [Zemskoi prikaz] about a bag containing roots which had been found in his possession, claiming

One root is taken by people for stomach complaints [lit. womb] and for difficulty breathing, and the second root is for horses, it is given to broken-winded horses, and the third root is for teeth, it grows in fields and kitchen gardens.

Similarly, in May 1673 the Apothecary Chancery was asked to investigate a group of cases that had been heard by the Investigations Chancery [Prikaz sysknykh del], in all of which herbs had been presented as evidence and in all of which the defendant had claimed that the herbs were not evil [nelikhie], but could be found in the Apothecary

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96 Broken-wind refers to a form of allergic bronchitis that causes wheezing, coughing and laboured breathing in horses.

97 ‘одно коренье едят люди от утробы и от мыту, а другое коренье лошадиное – дают лошадям от запалу, а третье коренье зубное – ростет по полям и по огородам’, Mamonov, Materialy, iii, pp. 676-77.
In 1703 Ivan Elfimov, the yard keeper of Prince Timofei Shekhovskii, said that the root was medicinal. It was these claims of medicinal qualities of herbs found on defendants’ in witchcraft trials the Apothecary Chancery testimony was primarily meant to address.

In most cases, the Apothecary Chancery testimony confirmed the defendants’ claims that the herbs or roots were medicinal. In no case did the Apothecary Chancery experts identify a herb or root as evil or suitable for witchcraft. When the items could be identified, the report stated what they were, and what properties they had, and that they were not magical or evil herbs. Apothecary Chancery witchcraft testimony followed the same basic format used in examinations of medicaments purchased by the Apothecary Chancery, and indeed medicines presented as evidence in malpractice cases. When the Apothecary Chancery reviewed herbs and roots presented as evidence in witchcraft trials it applied broadly the same criteria the department already used in examinations of medicaments, providing productive testimony on the properties of natural objects.

The Apothecary Chancery was also sent other types of physical evidence collected in witchcraft cases, some of which did not lead to productive testimony. For example, the evidence presented to the department from a set of cases from 1673 included written curses [pis'ma zagovornye]. No record is made of what the Apothecary Chancery experts said about the curses, presumably indicating that they refused to comment on them. As in 1628 the physicians were once again asked to look at purely magical items, and once again the physicians did not make any comment on it. The Russians clearly felt that foreign physicians could pronounce on magical items, but the physicians themselves made it clear that they could not, or would not comment on those items, restricting their comments to natural objects, like the herbs and roots. This withholding of comment by the Apothecary Chancery medical experts represents a significant way in which they shaped the production of knowledge in the witchcraft cases.

There were also other instances when the Apothecary Chancery experts withheld their opinion. The report for the 1657 Durbenev case states

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98 In 1703 Ivan Elfimov, the yard keeper of Prince Timofei Shekhovskii, said that the root was medicinal. 99 It was these claims of medicinal qualities of herbs found on defendants’ in witchcraft trials the Apothecary Chancery testimony was primarily meant to address.

100 See above, pp. 196-98.

101 Mamonov, Materialy, ii, pp. 494-95.
And in the Apothecary Chancery the doctors and apothecaries, examining the roots, said that the root was *bolderian* [valerian] and from that root nothing bad occurs, and the other root they cannot identify [lit. know], as it [the root] has dried up and they have no essence, and so nothing bad can come from these roots and of those roots [they] identified one root and called [it] *bolderian* and for what that root is used they did not say.  

In 1657, the Apothecary Chancery experts refused to make a comment because of the state of the evidence. This was not an isolated incident: evidence from the set of six cases from 1673 included a root in wax, and some herbs kept in paper and in wax. In these cases the examiners were unable to comment on the roots due to their state of preservation. The Apothecary Chancery experts rejected roots that had been dried out or otherwise preserved as simply unidentifiable.

Some other circumstances could render evidence unidentifiable. In 1664 the *syn boyarskii* Dmitrii Volodemirov was found to have suspicious herbs with him when he was searched at the Patriarch’s palace. These herbs were examined in the Apothecary Chancery, with the following report written on the results

[there are] the herb *karniana*, another herb *kanisa*, and they said that those herbs are wild herbs [lit. field herbs] and nothing bad will come of those herbs, and they cannot identify [lit. know] the other herbs as those herbs have been chopped up.

Similarly, in 1699 some of the collection of herbs and roots found on the peasant Mishka Grigor'ev had been chopped up, and so were also declared unidentifiable. In 1703 a woman called Ustinia [surname not recorded] had been found with herbs and roots, which she insisted were not poisonous. Once again, the report notes that some of

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103 ‘И в Оптекарском приказе дохтуры и аптекари смотря коренья сказали, что коренье бolderьян и от тою корени ни какова дуrna не бывает, а иного коренья им знать не почему, потому что то коренье сухо изгнило и духа никакова от них нет, також и от тою коренья дурна ни какова нет и из тех кореньев узнали одно коренье и назвали бolderьян а к чему то коренье пригодно – того они не сказали–ж’, Mamonov, *Materialy*, iii, pp. 676-77.


106 RGADA f. 143, op. 3, ed. khr. 454.
the evidence cannot be identified as the herbs found inside had been chopped.\textsuperscript{107} Apothecary Chancery foreign physicians maintained a consistent attitude towards identifying herbs and roots, agreeing to pass judgement only if the roots and herbs were fresh and in their natural state.

As stated in the reports, dried roots could not be identified, or were at least more difficult to identify: dried roots were likely to have shrunken and withered, altering their shape. Chopped herbs were also declared to be unidentifiable, their shape rendered unrecognisable by being chopped. During the early modern period the disciplines of natural history and botany were being formed, and one of the key methodological problems they faced was how to accurately convey experiences of nature, plants and other natural objects. Early natural historians developed what Brian Ogilvie calls a ‘science of describing’, providing enough description of a plant for the reader to distinguish it accurately from similar specimens.\textsuperscript{108} The Apothecary Chancery would have relied upon the morphology of the root or herb for identification, likely comparing those specimens sent for inspection to descriptions or illustrations of roots in herbals. These descriptions and illustrations would be based on the fresh root or herb, and so a withered root or chopped herb would be more difficult to correctly identify. Knowledge about herbs provided by the Apothecary Chancery for witchcraft trials was thus limited by the state of the evidence itself.

Productive testimony for witchcraft trials was produced by Apothecary Chancery medical practitioners, but only when their ideas about their own expertise coincided with the Russians’ view. Testimony for witchcraft trials was thus effectively limited to examinations of herbs and roots, and not curses and spells, where they promoted a differentiated view of the natural world, with some herbs and roots deemed evil, and others good and useful. Apothecary Chancery experts limited their production of testimony to the types of evidence they found to be appropriate, firmly establishing the natural world, and not magic, as the boundaries of their expertise.

\textit{The Circulation of Knowledge}

Once the expert testimony had been composed, the report was returned to the relevant authorities, to be circulated as appropriate. The initial circulation of the expert testimony was markedly similar to that of other reports; it was given to the Apothecary

\textsuperscript{107} RGADA f. 143, op. 2, ed. khr. 1618.
Chancery director before being sent on to high-ranking officials in charge of the case.\textsuperscript{109} Such was the case in the 1679 Shcherbatskii investigation, when the report was sent to the Musketeers’ Chancery; the 1685 \textit{p’ianoe zelie} investigation, the report for which was likewise sent on to the Musketeers’ Chancery; and the witchcraft trials, where the testimony was returned to the court which had requested it.\textsuperscript{110} As with most reports, expert testimony was initially circulated to Russian officials with an official interest in the case.

In the case of the medical malpractice and witchcraft trials, the testimony also had a wider effect. The investigations into medical malpractice associated with the herb markets which the Apothecary Chancery conducted may have contributed to a sweeping reform of the medical market. Starting with the 1679 Shcherbatskii case, the Moscow authorities launched several investigations into the markets selling herbal medicines, the largest and last of which took place in 1699-1700.\textsuperscript{111} The conclusions drawn from the 1699-1700 investigation of the herb markets, although not explicitly stated in the Apothecary Chancery records, must have been negative: in early 1701 Tsar Peter I bemoaned the unregulated sale of medicines in Russia, which he called barbarism.\textsuperscript{112} Peter, who had spent eighteen months in Western Europe in the 1690s, was no doubt comparing the unregulated sales of medicinal herbs in Russia with the regulations in force elsewhere in Europe. Peter had spent time in the cities of Amsterdam and London, both of which produced their own city pharmacopoeias, books which listed the medicines that were permitted to be sold within the capital.\textsuperscript{113} The sale of medicines in Amsterdam and London was further controlled by the licensing of apothecaries. When Peter declared the market trade in medicines to be barbaric, he was stating that the deaths of Saltykov and the others from those market medicines was caused by lack of regulation, and that such deaths were preventable.

Peter then set about creating new regulations on the sale of medicines in Moscow. In November of 1701 he announced the establishment of eight new, private, apothecary

\textsuperscript{109} See Chapter Two, pp. 51-54, and Chapter Four, pp. 139-42.


\textsuperscript{111} See above, pp. 182-83.

\textsuperscript{112} Oreshnikov, ‘Gurchin’, p. 48.

\textsuperscript{113} On pharmacopoeias, see Chapter Five, esp. pp. 144, 154-55.
shops to be located in some of the busiest areas of Moscow, including one near the herb markets of Kitai-gorod. These were to be run by qualified medical practitioners licensed by the Apothecary Chancery. The aim of these new apothecary shops was explicitly laid out in Peter's order. The order states

in the imperial city of Moscow henceforth [there will be] other, new, apothecary shops, so that the herb market, that [is] in Kitai-gorod, and also stalls on every street and crossroads, from which inappropriate herbs and simples\(^\text{114}\) are sold instead of medicines, will no longer exist, and they will be destroyed and cleared away from all streets and crossroads, and in those herb markets, other wares will be traded, in which it is appropriate to trade.\(^\text{115}\)

Peter's approach to the problem of the market stalls was then twofold: remove the offending traders and stalls, and provide a regulated alternative. He understood that Muscovites needed access to medicines, and simply removing the perpetrators would be insufficient. In order to effect long-lasting change it was necessary to create a new system of private medicine, but one that, crucially, would be under the control of the state.

It took twelve years to open all eight new apothecary shops. The first two licenses to be granted were in 1701, both to employees of the Apothecary Chancery, apothecaries Johann Gottfried (Gregorius) and Daniel Gurchin.\(^\text{116}\) Johann Gottfried

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\(^{114}\) Dr Mark Ridley, who worked at the Russian court in the 1590s, states that ‘zelie’ can mean a powder, medicine or spice. See *A Dictionary of the Vulgar Russe Tongue. Attributed to Mark Ridley. Edited from the late-sixteenth-century manuscripts and with an introduction*, ed. Gerald Stone (Böhlau, Köln, Weimar, Wien: Die Deutsche Bibliothek, 1996), p. 156.

\(^{115}\) ‘в царствующем граде Москве вперед иным вновь аптекам и Зелейному ряду, что в Китае городе, также и по всем улицам и по перекресткам, лавкам, в которых продавали всякия неупотребныя травы и зелья, будто вместо лекарств, не быть, и те по улицам и по перекресткам лавки все сломать и очистить, а в том Зелейном ряду торговать иными товары, какими пристойно’, Oreshnikov, ‘Gurchin’, p. 48.

\(^{116}\) The other men granted licenses were Gavril Sauls (1702), Mikhail Jessen Arnkil (1704), Aleksei Merkulov (1709), Avraam Rut(s) (1712), Gavriil Byshevskii (1713), and Albert Georg Tsinder (1713). See *Opyt istoricheskogo ocherka voznikovenie i razvitiia vsego aptekarskogo dela v Rossii, a v chastnosti staroi Nikolskoi apteki prinadlezhashchei nyne Tovarishchestvu “V. K. Ferrein” i osnovannoi v 1701 godu v tsarstvovanie Imperatora Petra Velikago, Daniilom Gurchiyom* (Moscow: Tipo-Litografiiia Tovarishchestva I. N. Kushneriev, 1911), pp. 10-11.
(employed 1685/6-1700s), also known as Gregorius, was part of a dynasty of apothecaries who worked for the Apothecary Chancery: both his father, Victoring Gregory, and his step-father, Johann Guttbier, had worked in the Apothecary Chancery as apothecaries. Gotfried received a position in the Apothecary Chancery after Guttbier petitioned for him to be taken on as an apothecary student. Later Gotfried also studied abroad, at the tsar’s expense. On his return to Moscow, he worked initially as a distiller, and later as the higher rank of apothecary. Gotfried remained in the Apothecary Chancery from the 1690s into the 1700s. Gurchin’s lineage of Russian service was not as long as Gotfried’s, but evidence such as the medical texts he composed for the tsar and tsarevich along with his poem on Peter’s military victories suggests that he was committed to the glorification of his Russian masters. In appointing Gotfried and Gurchin as the first private apothecaries, the court ensured that these private practitioners would be loyal to their government masters.

Gregorius’ shop was to be located in the new Foreign Suburb, and Gurchin’s in Belgorod, not far from Kitai-gorod, evidently the centre of the problematic herbal medicines trade. Echoing Peter’s order of 1701, Gurchin’s licence reiterates the role of the new, licensed apothecary shops in pushing out the herb markets:

In that, that is to say, his [Gurchin’s] apothecary shop, all medicines made by his workers in his [Gurchin’s] presence will make a great loss for the criminal Vegetable and Apothecary and Herb Markets, and in accordance with the order of the father of our Great Sovereign Aleksei Mikhailovich on the 28th February 1673, apothecary medicines created in the Apothecary Chancery which are sold in the Old and in the New Pharmacies, [such as] internal elixirs, vodkas and oils, those aforementioned market stalls are forbidden to stock and to sell, and whosoever [of the market traders] dares to stock and to sell [such medicines], they will be harshly punished.

117 Family service in the Apothecary Chancery was relatively common. See Dumschat, Mediziner, pp. 249-59. See also Chapter Three, pp. 87-88.
118 Unkovskaya, Brief Lives, p. 57.
119 See Chapter Five, pp. 156, 164-69.
120 Opyt, p. 11.
121 Here Peter is referring to Aleksei’s order establishing the Apothecary Chancery shop. See Chapter One, p. 20.
122 ‘в той де его аптеке чинится у него ныне всяким лекарственным вещам от работников его пропажа великая, которые, крадучи, продают в Овошном и в Москотилном и в Зелейном рядах, а по указу де отца Нашего Великаго Государя [т] Алексея Михайловича [т] 181–о году Февраля 28 числа, каков
The license goes on directly to blame the sale of medicines by these herb markets for the recent deaths:

And now in those markets traders stock and sell such pharmaceutical medicines, [which are] falsely created, and all types of oils, and from their sale of medicines abnormalities and harm and untimely loss is caused [which affects] many people. . . [thus] it is forbidden to trade in apothecary medicines and oils in such aforementioned markets, so that all people will be protected from harm and from the untimely loss caused by such unskilled practices.  

The establishment of the new private apothecary shops was thus clearly framed in terms of previous abuses by stallholders in selling inappropriate medicines.

The types of medicines banned for sale on the markets are significant. Both Peter’s order and Gurchin’s license specify that market traders not stock pharmaceutical medicines.  

Medical books composed by Apothecary Chancery practitioners in the late seventeenth and early eighteenth century and aimed at various sections of Muscovite society specifically promoted the use of pharmaceutical medicines. As these texts were compiled by Apothecary Chancery practitioners apparently on the orders of Russian officials, it would seem that the Russian court approved of pharmaceutical medicines. Yet, as such medicines were banned from sale on the markets, clearly there was also a fear that such pharmaceutical medicines, if prepared or used improperly, were dangerous. Pharmaceutical medicines were recognised as

состоялся в аптекарском приказе в тех вышеписанных рядах в лавках аптекарских лекарств, которые продаются из старой и из новой аптек, алексиров, водок и масел нутренных держать и продавать не велено, а кто учнет держать и продавать и им явлено быть в жестоком наказанье’, Oreshnikov, ‘Gurchin’, pp. 50-51.

123 ‘А ныне де в тех рядах торговые люди такие аптекарские ложно проворенные лекарства и всякия масла держать и продавать и от той их продажи лекарств чинится многим людем в неискусстве и повреждение и безвременная траты . . . не велеть бы в тех вышечереченных рядах аптекарских лекарствы и маслы торговать, чтоб всенародному множеству от той их неискусного ведения продажи лекарств превреждения и безвременныя не было траты’, Oreshnikov, ‘Gurchin’, pp. 50-51.

124 See above, pp. 207-09.

125 See Chapter Five.
potentially helpful, but also potentially dangerous; thus their sale was strictly limited to the licensed apothecary shops over which the state had some control.

Gurchin’s license also mention internal medicines as a specific monopoly of the new apothecary shops.\footnote{See above, p. 208.} This relates back to the investigation into the markets of 1699. During that investigation, six stallholders who commonly traded on the Moscow markets were interrogated in the Apothecary Chancery about the products they were selling, and for how long they had been trading in these medicines. The testimony of all six stallholders is markedly similar: all specifically denied selling internal medicines. As the only female stallholder said:

but internal medicines and any other [such medicines] and oils she, Agrofenka [Leont’eva], does not stock.\footnote{‘а внутренних лекарств и иные никаких и масл она Агрофенка не держит’, RGADA ф. 143, оп. 3, ед. хр. 462.}

The testimony of the stallholders demonstrates the limits of their trade: they were permitted to sell simple herbal remedies and external medicines such as plasters, but not internal or chemical medicines. This mention of the types of medicines investigated in 1699 by the Apothecary Chancery in Gurchin’s license allows us closely to associate the work of the Apothecary Chancery with the establishment of the new, private apothecary shops.

It thus seems that Apothecary Chancery investigations into malpractice in the late seventeenth century directly contributed to the decision to reform the supply of medicines. The explicit mention of the deaths the Apothecary Chancery looked into would seem to support this supposition. Also noteworthy is the warning against the dangers of unlicensed medical practitioners in the \textit{Brief Description of Thirty Rules for Health} given to Peter by Apothecary Chancery practitioners in 1696.\footnote{See Chapter Five, p. 167.} One of the men who presented that text to Peter was Daniel Gurchin, the same Gurchin who directly benefited from the new licensing system, as he was the second apothecary to be issued such a license.\footnote{See above, p. 207.} In this case, the Apothecary Chancery practitioners’ negative view of irregular practice would seem to have had a notable effect on medical regulation. This can be contrasted to similar concerns over the department’s recruitment of unqualified practitioners like John Buck and Ivan Drescher, in which the practitioners’ objections
were largely ignored. The decision to regulate the sale of medicines can thus be firmly linked to the Apothecary Chancery malpractice investigations, and may also be linked to the *Brief Description of Thirty Rules for Health*. In short, the regulation of the medicines trade should be linked to the Apothecary Chancery.

Moreover, the effect that regulation was intended to have was also significant. With the herb markets and similar stalls being removed by the authorities, the populace of Moscow were being pushed towards purchasing medicines in the new, licensed apothecary shops. The earliest such Western-style apothecary shop had been opened by the Apothecary Chancery in 1673, and promoted to literate Russians through late, popular copies of the *Pharmacopoeia*. Similarly, Daniel Gurchin chose to promote his apothecary shop to literate Muscovites through medical texts aimed at laypersons. As noted above, some members of the Muscovite elite, such as Prince Fedor Shcherbatskii and P. P. Saltykov used the herb markets; Apothecary Chancery medical books were aimed at these literate consumers of medicines. Gurchin’s works, and the popular editions of the *Pharmacopoeia*, should be considered as a part of the attempts to reform the supply of medicines to literate Russians.

Undoubtedly, those markets also catered to illiterate Muscovites, who made up the majority of the population. Although it is unknown how many denizens of Moscow actually switched from using the herb markets to using the licensed apothecary shops, certainly this was an aim. Thus, although effort was devoted to attracting a literate audience to the apothecary shops, they were also designed to be used by the illiterate majority.

The investigation of the herb markets and subsequent regulation of the medicines trade in which the Apothecary Chancery participated heavily involved the use of documents and written testimony. James Cracraft has identified verbal and textual developments to be central to the Petrine Revolution, but acknowledges the problem that poses for what was largely an oral culture: a revolution in texts necessarily only directly affects the literate. The use of Apothecary Chancery reports and other written documents to investigate popular medical practices provides an example of how literate production could even affect some illiterate Russians. Apothecary Chancery reports,

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130 See Chapter Three, pp. 105-07.
131 See Chapter Five, pp. 175-76.
132 See Chapter Five, pp. 170-72, 76-79.
133 See above, pp. 188-90.
originally conceived as a way of informing chancery and court decisions, in the late seventeenth century were applied in a way that affected the lives of ordinary Muscovites, effectively widening the circle of people to whom this Western medical knowledge was disseminated.

As well as the consumers of medicines, both literate and illiterate, that the Apothecary Chancery affected, its work also had an impact upon the defendants in medical malpractice and witchcraft cases. The defendants in these trials were from a variety of backgrounds. Some were members of the elite, like syn boyarskii Dmitrii Volodemirov, who was put on trial for witchcraft in 1664.135 Others were of much lower status: in 1703 several domestic servants were under investigation for witchcraft, and in 1673 a peasant from the Archangel church was similarly accused.136 The wide cross-section of Muscovite society from which defendants in witchcraft trials came thus meant that Western medical knowledge provided for those trials by the Apothecary Chancery came into contact with Muscovites outside the chancery system. Witchcraft and medical malpractice trials dramatically expanded the circle of Russians who came into contact with Western medical expertise.

Indeed, there is evidence that the Apothecary Chancery’s reputation as a centre of expertise in judicial medical matters spread among ordinary Russians. In 1690 one of the defendants in a witchcraft and blasphemy case, Perfili Rokhmaninov, petitioned for the herbs found in his possession to examined by the Apothecary Chancery, asking that

those herbs be examined in the Apothecary [Chancery], and those herbs are not magical.137

Rokhmaninov, who claimed that he had the herbs for medicinal uses, clearly thought that the Apothecary Chancery could corroborate his claims. As no Apothecary Chancery report is appended to this case, it would appear that his request was denied.

Despite the lack of an Apothecary Chancery report, Rokhmaninov’s case is consequential, as it indicates that the Apothecary Chancery's role as a centre of expertise on herbs and medicine was spreading outside of court circles. Initially, Apothecary Chancery knowledge production was limited to reports which were

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137 ‘те травы в Аптеке свидетельствовать, а те травы не волшебные’, Novombergskii, *Vrachebnoe stroenie*, p. ХСII.
circulated within the chancery officials and court elite. Later, the department was involved in the production of medical books, which allowed medical knowledge to be disseminated to a wider segment of the Russian literate elite. Apothecary Chancery work on medical regulation discussed above, and also on the witchcraft trials, brought that foreign, literate medical knowledge into much closer contact with the illiterate majority of Muscovites. On the evidence of Rokhmaninov’s request, some of the department’s reputation as a centre of expertise, and so potentially some of that knowledge, was getting through to ordinary Muscovites.

**Conclusion**

In the last decades of the seventeenth and first decade of the eighteenth century, the Apothecary Chancery was used by the Russian court to expand its control over both medical regulation and the practice of witchcraft. The expansion into regulation affected both the production and dissemination of knowledge. Previously, reports had been ordered as a part of central chancery activities, by heads of the chanceries or similar central government officials. In contrast, expert testimony was produced for cases initiated by provincial authorities, low-level servitors like medical practitioners, and even petitions made for personal reasons. Thus expert testimony was shaped by a wider range of Muscovites than previously.

Early reports had always been produced by physicians, or a committee of medical practitioners led by physicians. In stark contrast, reports on medical regulation and witchcraft were often produced by apothecaries, without supervision by the physicians. This delegation of duties was mostly restricted to the foreign servitors: although the Russian court did understand that plants in various areas of Europe were different, and although the court had devoted time and money to training Russians as medical practitioners, this did not translate into a specialisation of knowledge production. Knowledge production did evolve during this period, but it remained in the hands of foreign medical practitioners, not their Russian students.

The knowledge presented in these reports was much the same as that previously produced by the Apothecary Chancery: the results of examinations of herbs, often referenced against medical texts. This is noteworthy, as in the witchcraft trials the Apothecary Chancery were presented with different types of evidence – curses – and different requests, in particular a request to make a statement on the magical qualities of herbs. Apothecary Chancery medical practitioners avoided such questions, limiting their
testimony to the inherent qualities of natural objects, thus guarding the boundaries of their expertise and avoiding the thorny issue of magic.

The initial dissemination of knowledge produced for witchcraft trials and malpractice investigations had much in common with the dissemination of other Apothecary Chancery reports. Reports on herbs and roots were presented to Russian administrators and judges who worked in the chancery system. Significantly, this knowledge was then applied to the specific cases at hand, meaning that the defendants became aware of literate Western European medical knowledge through the testimony presented against them. Furthermore, when Peter set up licensed apothecary shops along Western lines, he brought the customers of medical practitioners into closer contact with that medical knowledge. Both defendants in witchcraft and malpractice cases, as well as many customers, would have been illiterate, meaning that illiterate Muscovites were coming into contact with literate Western medical knowledge. At least some of this contact was productive, as shown from the 1690 case in which the defendant wanted to draw upon Apothecary Chancery expertise in order to exonerate himself. Apothecary Chancery reports in witchcraft trials and medical regulation affected people outside the court-chancery system and thereby expanded the impact of professional medical knowledge on Muscovite society.
Conclusion

The Apothecary Chancery’s production of medical knowledge advances our understanding of the Muscovite reception of Western knowledge. By studying the activities of the Apothecary Chancery in the sphere of production and dissemination of medical knowledge, we can take the subject of reception of Western knowledge in Muscovy beyond the paradigm of Muscovy’s backwardness and borrowing from the West. The work of the Apothecary Chancery shows that the Muscovite elite consciously and actively engaged with Western knowledge, incorporating parts of it into their administrative practices.

In the early seventeenth century, healing in Russia was essentially unregulated, with officially sanctioned medicine being available only to state servitors, and the rest of the country relying on folk practitioners. Over the course of the seventeenth century the situation changed due to developments in the court medical department. In the early seventeenth century the Apothecary Chancery had been concerned with treating members of the court elite, soldiers and other servitors, and also producing reports on wider issues such as the viability of candidates for dynastic marriage and plague. Later the remit of this department widened further, as it began producing texts for a broader audience through the creation of medical recipe books, and applying medical knowledge to the problems of Moscow’s residents by regulating the sale of medicines there. As a result of these developments, by the eighteenth century the Apothecary Chancery had laid foundations for an officially regulated system of medical care on the basis of the utilisation of Western medical knowledge.

In order to recruit, select and use Western physicians, who facilitated access to Western medical knowledge, the Russian court had to rely upon transnational medical networks. Medical practitioners were part of professional networks formed of other practitioners and institutions such as universities and medical guilds. The Russian court, in its turn, was part of the European diplomatic inter-court network, which included courtly patients and patrons of Western medicine. Both networks provided the opportunity to recruit medical practitioners, and to assess their competency through recommendations from other members of the networks. Primarily, the Russians preferred to rely upon networks of people, like between potentates, merchants, and medical professionals, while institutions were of secondary importance, presumably because Western medical institutions – universities and guilds – had no parallels in Russia. Although Russia was on the periphery of Europe, the Russian court made
significant use of the pan-European networks of courts and medical practitioners. This reliance upon European networks for medical practitioners indicates that the Russian court did not have a general mistrust in Western European people, ideas, and networks.

The employment of Western European medical practitioners by the Apothecary Chancery meant that their Western medical expertise was assimilated into the existing and evolving system of Russian chanceries. The Apothecary Chancery served as a vehicle for collecting, utilising and transmitting elements of Western medical knowledge that were useful to the Muscovite court and administrative systems. It was Western medical knowledge that was fitted into the Russian system, whereas the Muscovite administrative structure did not change to accommodate Western expertise.

Knowledge production in the Apothecary Chancery required a type of intellectual community. The preparation of each report involved multiple persons defining its subject, content, and language of expression: not only Western physicians, but also Russian officials, translators and scribes. Western medical expertise was thus further subsumed within Russian administrative procedures, being only one part of the process. The chancery system of medical knowledge production also underscores the importance of Robert Romanchuk’s criticism of ‘intellectual silence’ as focusing too heavily on individuals as opposed to collective endeavours. The production of knowledge in the Apothecary Chancery was a collective and collaborative process.

Medical expertise was highly directed; reports were produced to serve an immediate need of the Apothecary Chancery or Russian court, demonstrating the close association between knowledge production and policy. Reports focused on practical solutions to immediate problems; medical theory was not explicitly present in the texts. However, there is no evidence for an explicit ban on the use of medical theory in Apothecary Chancery texts. It seems more likely that theoretical texts were not produced as they were unnecessary; they did not speak to the immediate problems of the court. Theory was not banned; it was simply not a focus of the court’s activities.

Texts were adjusted according to the perceived needs of the intended audience. Apothecary Chancery reports, produced to advise the tsar and the boyars, were concise, direct and unequivocal to facilitate laypersons gaining an understanding of the salient points of a case during decision-making. The content and structure of medical recipe books was also adjusted in accordance with the needs of the intended audience, both their level of medical knowledge and degree of access to specialist, rare or expensive medicaments. These textbooks and lay manuals underline the key role of artisanal knowledge disseminated in the form of manuals as has already been noted by Lindsey.
Hughes and Claudia Jensen in their works about Muscovite art and music. Texts were to be used, not just to be owned, and so were designed for maximum accessibility and utility.

Apothecary Chancery directors were both consumers of Apothecary Chancery texts, and key figures in the dissemination of those texts to other chanceries and to members of court. Directors were selected according to several criteria: security and political concerns were vital, but administrative experience was also important, suggesting that the directors did indeed play an active role in the administration of their department. Among their administrative duties was report production: directors ordered reports, considered those reports, and sent them on to others. Most importantly, they served as the link between the Apothecary Chancery and the rest of the Muscovite administration, disseminating reports, and so medical knowledge, throughout the chancery and court.

Russian readers of these medical texts, in particular the boyars to whom reports were sent, were both sceptical and selective in their reception of Western expertise. In more than one case the interpretation offered by the physicians was simply rejected in favour of a different approach, sometimes one fundamentally antithetical to that proposed by the medical experts. Attitudes to the reports were affected by external considerations, primarily the views a reader already held on a subject: Russians did not simply respond to the content of a text, they judged it against external circumstances, such as the extreme danger of plague. This constitutes an active engagement with Apothecary Chancery reports as policy documents, recommending a certain course of action.

The production and consumption of medical knowledge in Muscovy had much in common with the way knowledge was generated and disseminated in other spheres of Muscovite culture. Romanchuk’s emphasis on the community as an important unit of study for intellectual activity in Russia is confirmed by the collaborative nature of knowledge production in the Apothecary Chancery. Hughes and Jensen’s discoveries about the importance of artisanal knowledge and its spread through textbooks to the development of ideas in Russia is likewise upheld by the Apothecary Chancery’s involvement in textbook and lay manual production.

Medical knowledge also reveals new aspects of Russian attitudes to Western knowledge in the seventeenth century. Reports produced by the Apothecary Chancery were requested on a variety of subjects, often related to court and dynastic politics, such as the tsar’s health and dynastic marriages. The Apothecary Chancery was also linked to
court politics through the boyar director, who combined administrative functions with political connections and concerns.

Apothecary Chancery texts also expand our conception of which sections of Muscovite society were affected by intellectual endeavours. Treatment of army personnel, reports on plague, production of medical recipe books for ordinary Muscovites, and the regulation of medicines for all those living in Moscow attest to the Apothecary Chancery’s involvement in the health of all Muscovites. The production of medical recipe books and the regulation of the herbal medicine trade reveal medical knowledge to have affected the lives of Muscovites beyond the court, even including, to a limited extent, the illiterate majority. Western experts, their Russian employers and consumers from different sections of Muscovite society constituted a community that defined the form, content and applications of intellectual knowledge produced by the Apothecary Chancery.
Appendices.

Appendix 1: Apothecary Chancery Directors, 1614-1703

Here data on Apothecary Chancery heads is listed when it includes the main director. Not all years have data available for them, and for some years only partial information is available. Here it will be assumed that a boyar ran the Apothecary Chancery from the earliest date at which he is listed in that post until the latest date he is listed in that post, unless there is evidence to believe that there was an interruption. In 1616/17 the only director recorded as working in the Apothecary Chancery is the under-secretary Potemkin. As assigning an under-secretary to head a Chancery would be highly unusual, and as Potemkin worked under kravchii M. M. Saltykov both before and after this date, it is assumed that the data for this year is incomplete, and M. M. Saltykov continued to be in charge.

<table>
<thead>
<tr>
<th>Year</th>
<th>Head(^2)</th>
<th>Deputies(^3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>7123 [1614/15], 7126 [1617/18], 7129 [1620/21]</td>
<td><em>Kravchii Mikhail Mikhailovich Saltykov</em>(^4)</td>
<td>Under-secretary V’ialitsa [sic] Potemkin</td>
</tr>
<tr>
<td>7156 [1647/48]</td>
<td>Boyar prince Iakov Kudenetovich Cherkasskii</td>
<td>Under-secretary Nikofor Val’tsov</td>
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\(^1\) Adapted from Bogoiaevskii. Bogoiaevskii, *Prikaznye sud’i*, pp. 13-16.
\(^2\) That director listed first by Bogoiaevskii.
\(^3\) Other directors listed by Bogoiaevskii.
\(^4\) Names in bold indicate those directors who are discussed in Chapter Two.
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<thead>
<tr>
<th>Years</th>
<th>Official</th>
<th>Prior Official</th>
<th>Remarks</th>
</tr>
</thead>
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<tr>
<td>1675-1688/66</td>
<td><em>Okol’nicii Ivan Mikhailovich Miloslavskii</em></td>
<td>Counselor secretary Luk’ian Golosov</td>
<td>Under-secretary Ivan Desiatogo [1675-1678]</td>
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<tr>
<td>1686-1690/69</td>
<td>Counselor secretary</td>
<td>Luk’ian Golosov</td>
<td>Secretary Petr Zykov</td>
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<td><em>Counsellor cavalryman</em> [From 1670]</td>
<td>Counselor cavalryman</td>
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<tr>
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<td>Counselor cavalryman</td>
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<td>Under-secretary Ivan</td>
<td>Ivan Patrikeev [1678-1680]</td>
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<tr>
<td>1682-1678/80</td>
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<td>St. Counsellor</td>
<td>Deputy General Sergei Makarov [1682-1683]</td>
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<tr>
<td>1678-1682/80</td>
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<td>Counsellor secretary</td>
<td>Ivan Patrikeev [1678-1680]</td>
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<td>1683-1686/80</td>
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<td>Ivan Patrikeev [1678-1680]</td>
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<td>Ivan Patrikeev [1678-1680]</td>
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<td>1694-1697/95</td>
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<tr>
<td>1695-1698/96</td>
<td>Boyar prince Nikita Ivanovich Odoevskii</td>
<td>Under-secretary Ivan</td>
<td>Ivan Patrikeev [1678-1680]</td>
</tr>
<tr>
<td>1696-1699/97</td>
<td>Boyar prince Nikita Ivanovich Odoevskii</td>
<td>Under-secretary Ivan</td>
<td>Ivan Patrikeev [1678-1680]</td>
</tr>
<tr>
<td>1697-1699/98</td>
<td>Boyar prince Nikita Ivanovich Odoevskii</td>
<td>Under-secretary Ivan</td>
<td>Ivan Patrikeev [1678-1680]</td>
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<tr>
<td>1699-1700/00</td>
<td>Boyar prince Nikita Ivanovich Odoevskii</td>
<td>Under-secretary Ivan</td>
<td>Ivan Patrikeev [1678-1680]</td>
</tr>
<tr>
<td>1700-1701/01</td>
<td>Boyar prince Nikita Ivanovich Odoevskii</td>
<td>Under-secretary Ivan</td>
<td>Ivan Patrikeev [1678-1680]</td>
</tr>
<tr>
<td>1701-1702/02</td>
<td>Boyar prince Nikita Ivanovich Odoevskii</td>
<td>Under-secretary Ivan</td>
<td>Ivan Patrikeev [1678-1680]</td>
</tr>
<tr>
<td>1702-1703/03</td>
<td>Boyar prince Nikita Ivanovich Odoevskii</td>
<td>Under-secretary Ivan</td>
<td>Ivan Patrikeev [1678-1680]</td>
</tr>
</tbody>
</table>

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**Notes:**


* Data for this year comes from archival documents. RGADA f. 143, op. 2, ed. khr. 1622; f. 143, op. 2, ed. khr. 1618.

This table presents the chanceries held by each of the seventeenth-century boyar Apothecary Chancery directors, sorted by the date each chancery was acquired in relationship to the boyar’s tenure in the Apothecary Chancery. The acquisition and loss of chanceries held concurrently did not always coincide. When a chancery can be listed in more than one column, it is listed in all those that apply, and is starred.

<table>
<thead>
<tr>
<th>Name and Period as Apothecary Chancery Director</th>
<th>Chanceries Held Prior to the Apothecary Chancery</th>
<th>Chanceries held concurrently with the Apothecary Chancery</th>
<th>Chanceries held after the Apothecary Chancery</th>
</tr>
</thead>
<tbody>
<tr>
<td>7123 [1614/15], 7126 [1617/18], 7129 [1620/21]</td>
<td>*Silver-casting (7122-23, 30-31)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7147 [1638/39] 7149-54 [1640/41-1645/46]</td>
<td></td>
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\footnote{Adapted from Bogoiaevskii. Bogoiaevskii, \textit{Prikaznye sud’i}, pp. 273, 274, 276, 281, 308, 311-12.}
<table>
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<th></th>
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<tbody>
<tr>
<td>Name</td>
<td>Service/Position</td>
<td>Period</td>
<td>Location</td>
<td></td>
</tr>
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<td></td>
</tr>
<tr>
<td>Ia. N. Odoevskii</td>
<td>Kazan' (7178-80, 7189-91) Investigations (7185)</td>
<td>7197-205 [1688/89-1696/97]</td>
<td>None</td>
<td></td>
</tr>
</tbody>
</table>

None
Works Cited.

ARCHIVAL DOCUMENTS

MOSCOW
RGADA Rossiiskii gosudarstvennyi arkhiv drevnikh aktov [Russian State Archive of Ancient Documents]
f. 143, Aptekarskii prikaz.

GIM Gosudarstvennyi istoricheskii muzei [State Historical Museum]
Sobranie rukopisei E. V. Barsova, No. 2238 (Pharmacopoeia, 18th century).
Sobranie rukopisei E. V. Barsova, No. 2241 (Pharmacopoeia, 18th century).
Sobranie rukopisei A. S. Uvarova, No. 172 (Royal Domovaia i pokhodnaia apteka, early 19th century).
Sobranie rukopisei A. S. Uvarova, No. 312 (Pharmacopoeia, late 17th century).
Sobranie rukopisei A. S. Uvarova, No. 315 (Collection including Aptechka domovaia, 18th century).
Sobranie rukopisei A. S. Uvarova, No. 320 (Collection including Pharmacopoeia, late 17th century).
Sobranie rukopisei I. A. Vakhrameeva, No. 534 (Pharmacopoeia, 18th century).

RGB Rossiiskaia gosudarstvennaia biblioteka [Russian State Library]
f. 37 (Sobranie T. F. Bol’shakova), No. 23 (Problemata Aristotelia, 17th century).
f. 37 (Sobranie T. F. Bol’shakova), No. 228 (Pharmacopoeia, 1700).
f. 310 (Sobranie V. M. Undolskogo), No. 698 (Pharmacopoeia, early 18th century).
f. 310 (Sobranie V. M. Undolskogo), No 699 (Reestr, 1745).

ST. PETERSBURG
RNL Rossiiskaia natsional’naia biblioteka [Russian National Library]
Kollektsiia M. P. Pogodina, No. 1561 (Collection including Apteka obozovaia ili sluzhivaia, 18th century).
f. 550 (Osnovnoe sobranie rukopisnoi knigi), section VI, Octavos, No. 4 (Collection including Aptechka domovaia).
f. 550 (Osnovnoe sobranie rukopisnoi knigi), section VI, Quartos, No. 45 (Apteka domovaia bolshaia, early 18th century).
f. 550 (Osnovnoe sobranie rukopisnoi knigi), section VI, Quartos, No. 13 (Reestr, 1695).
Kollektsiia A. A. Titova, No. 3881 (Royal Domovaia i pokhodnaia apteka, early 18th century).
Kollektsiia SanktPeterburgskaiia Dukhovnaia Akademiia, No. 410 (Collection including Pharmacopoaiia, early 18th century).

BAN Biblioteka Akademii nauk [Library of the Academy of Sciences]
Petrovskoe sobranie, No. 75 (Domovaia i pokhodnaia apteka, 1720s).
Kollektsiia Tikhvinskogo monastriia, No. 41 (Pharmacopoaiia, early 18th century).
Kollektsiia N. F. Romanchenko, No. 59 (Collection including Reestr, late 17th century).
Akty Istoricheskie, sobrannye i izdannye Arkheograficheskoiu kommiseiu, 5 vols (St Petersburg: Tipografia Ekspeditsii zagotovlenia Gosudarstvennykh bumag, 1841-42).
Bogoiaflevskii, S. K., Prikazy ne sud’i XVII veka (Moscow and Leningrad: Izdatel’stvo Akademii nauk, 1946).

Burke, Peter and R. Po-Chia Hsia, Cultural Translation in Early Modern Europe (Cambridge: Cambridge University Press, 2007).


Cooper, Alix, Inventing the Indigenous. Local Knowledge and Natural History in Early Modern Europe (Cambridge: Cambridge University Press, 2007).


Demidova, N. F., Suzhlilata biurokratiiia v Rossii XVII v. i ee rol’ v formirovanii absoliutizma (Moscow: Nauka, 1987).


Dörbeck, Franz, ‘Origin of Medicine in Russia’, Medical Life, 30 (1923), 223-34.


Dumschat, Sabine, Ausländischer Mediziner im Moskauer Russland (Stuttgart: Franz Steiner Verlag, 2006).


Evans, R. J. W., Rudolf II and his World: A Study in Intellectual History, 1576-1612 (London: Thames and Hudson, 1997).


Franklin, Simon, Writing, Society, and Culture in Early Rus, c. 950-1300 (Cambridge: Cambridge University Press, 2002).


Grombakh, S. M., Russkaia meditsinskaia literatura XVIII veka (Moscow: Akademiia meditsinskikh nauk, 1953).


Haigh, Basil, ‘Design for a Medical Service: Peter the Great’s Admiralty Regulations (1722)’, Medical History, 19 (1975), 129–46.


Hughes, Lindsey, Russia in the Age of Peter the Great (New Haven: Yale University Press, 1998).


Ippolitova, A. B., Russkie rukopisnye travniki XVII-VIII vekov. Issledovanie fol’klora i etnobotaniki (Moscow: Indrik, 2008).


Karamzin, N. M., Istorija gosudarstva rossiiskogo, 12 vols (St Petersburg, 1892).


Koval’, V. V. and Rozhdestvenskaia, V. V., eds., *Domostroi* (St. Petersburg: Nauka, 1994).


Kolesov, V. V. and Rozhdestvenskaia, V. V., eds., *Domostroi* (St. Petersburg: Nauka, 1994).


Loar, Carol, ‘Medical Knowledge and the Early Modern English Coroner’s Inquest’, Social History of Medicine, 23 (2010), 475-91.


Mamonov, N. E., Materialy dlia istorii medistiny v Rossi, 4 vols (St Petersburg: M. M. Stasiulevich, 1881).


Miliukov, P., Ocherki po istorii russkoi kul’tury, ii: Tserkov i shkola (vera, tvorchestvo, obrazovanie) (St. Petersburg: Tipografiia Skorokhodova, 1905).


Novombergskii, N. Ia., *Materialy po istorii meditsiny v Rossii*, 5 vols (St Petersburg: M. M. Stasiulevich, 1905).

Novombergskii, N. Ia., *Vrachebnoe stroenie v do-Petrovskoi Rusi* (Tomsk: Parovaia tipolitografiia Sibirskogo tovarishchestva pechatnogo dela, 1907).


Pamiatniki literatury drevnei Rusi, 10 vols (Moscow: Khudozhestvennaia literatura, 1994).


Renner, Andreas, Russische Autokratie und europäische Medizin. Organisierter Wissenstransfer im 18 Jahrhundert (Stuttgart: Franz Steiner Verlag, 2010).

Richter, Wilhelm, Geschichte der medicin in Russland (Moscow: N. S. Vsevoloski, 1813-17).


Sibirtsaev, Mikhail, *Opyt Bibleisko-estestvennoi istorii, ili opisatel’noe izlozhenie Bibleiskoi geologii, botaniki i zoologii* (St Petersburg: Strannik, 1897).


Stolberg, Michael, ‘“Abhorreas pinguedinem”: Fat and Obesity in Early Modern Medicine (c. 1500–1750)’, *Studies in History and Philosophy of Biological and Biomedical Sciences*, 43 (2012), 370-78.


Tolstoi, Iu. V., *Pervyi sorok let snoshenii mezhdyu Rossieiu i Angliieiu*, 1553-1593 (St Petersburg: Tipografia A. Transhelia, 1875).


Vesti-Kuranty, 1656 g., 1660-1662 gg., 1664-1670 gg., 2 vols, ed. Ingrid Maier et al. (Moscow: Iazyki slavianskikh kul’tur, 2008-09).


**UNPUBLISHED MATERIAL**


Olekhnovich, O. G., ‘Meditsinskaia terminologiia v “delakh Aptekarskogo prkaza” (XVII v.)’, Avtoreferat (University of Ekaterinburg, 2000).


Simon Syrenius’ Herbarium