

Alternative Medicine, Irregular Healers and the Medical Market in Nineteenth-Century Bavaria

Michael Stolberg



Introduction

UNDER THE IMPACT of the new social history of medicine, the range of topics and approaches in the history of homoeopathy and other types of 'alternative' medicine has widened greatly in recent years. Professionalisation and institutionalisation, conflict and identity, and the markets for books and remedies are just some of the issues which have come to complement traditional (and sometimes rather partisan) research on the founders and major protagonists of individual alternative healing systems, their works and ideas, and their struggles with the medical establishment.¹ Somewhat ironically, however, just like their conventional counterparts, histories of alternative medicine have largely neglected ordinary practice, the everyday reality of the majority of healers and sufferers who put their trust in one particular healing system. Thus, we still know very little about the relative importance and the uses of the various alternative healing systems in the health care of the general population.

These are the kinds of issues I want to approach in this paper. It is based primarily on a series of statistical surveys of all irregular healers in late nineteenth-century Bavaria. This somewhat unusual source owes its existence to a new law, which removed almost all medical licensing

regulations throughout the German Empire.² From 1873 onward, any man or woman in Bavaria, whatever his or her medical training and with or without a licence, could undertake any kind of medical cure for a fee. Previously, the Bavarian health administration had acted even against those unauthorised healers who cured patients free of charge. Now, for the first time in Bavarian history, the medical market was essentially free, subject to the forces of supply and demand. Only the distribution of medicines remained the privilege of licensed pharmacists.³

The law had the support of the leading physicians in the new imperial capital, Berlin. But in Bavaria many physicians complained about the new, undesirable competition, which they feared would threaten their very professional existence. In this situation, the Bavarian government, which preserved a large degree of political and administrative autonomy within the German Empire, did what most governments would do today: it ordered a survey.⁴ From 1873 until 1895,⁵ year after year, every district physician in each of the about 250 administrative districts in the kingdom was required to collect data on the medical activities of all irregular healers in his district, including those licensed barber surgeons, midwives and pharmacists who overstepped the very narrow limits of authorised practice which had previously been in force. Based on their personal knowledge and on the information of other local physicians, the state-employed district physicians compiled lists which generally included the name, age, place of residence and profession of the healers, as well as the kind of medical activity they undertook. Additional information was sometimes added on their popularity, the profitability of their practice or on court proceedings against them.

A summary of the major statistical results from these surveys was published annually in the leading Bavarian medical journal.⁶ Fortunately, the original statistics have also almost completely survived with only a few losses, and they can be consulted today in seven large volumes containing about 32,000 entries on individual healers and some supplementary documentation.⁷ Undoubtedly these surveys, and especially the statistical figures extracted from them, should be treated with caution. Not all district physicians were equally conscientious in their task, and in some cases the figures for a specific district dropped or rose sharply when a new incumbent took over. In addition, the extent to which individual healers practised medicine varied widely from very occasional help among friends and neighbours to a highly profitable practice, and the physicians lacked specific instructions as to how extensive the unlicensed medical practice had to be to warrant an entry. The central health authorities were convinced, especially during the first years, that the actual number of irregular healers was much

higher than was reported. And later, when the more active healers were generally well known, there still must have been countless others who treated patients only occasionally and/or took no money and were thus not reported.

Due particularly to the additional qualitative information on individual healers, these surveys nonetheless offer some unique insights into the role of alternative medicine in the ordinary health care of the wider population beyond the narrow realm of the educated elites. And, in a largely free medical market, the relative importance of the various alternative healing systems in the medical market can serve in turn as a rough measure of their respective appeal to the wider population, though it should be added that the various healing systems differed in the degree to which they allowed easy self-medication without any need for a healer, as well as in the way in which they were affected by the laws against distributing drugs, which remained in force.

The Medical Market in Bavaria before 1873

UNTIL GERMAN UNIFICATION IN 1870/71, Bavaria was an independent kingdom, second in size only to Prussia among the German states. Throughout the nineteenth century, its economy was largely based on agriculture. The population grew relatively slowly, from 3.7 million in 1818 to 4.8 million in 1864 and 6.1 million in 1900.⁸ Industrialisation on a wider scale took off only gradually in the late nineteenth century and was largely limited to a few major centres such as Nuremberg, Augsburg and Munich. Urbanisation was slow, too, and by 1900 the population was still predominantly rural. The majority of the population was Catholic, and Catholicism remained a dominant political and cultural force, except for a brief spell of enlightened radicalism and anticlericalism in the early nineteenth century.⁹

The Bavarian health care system underwent profound changes in the course of the nineteenth century. In 1807 the 106 academic physicians in the kingdom made up only a small and largely urban minority among all healers.¹⁰ Responsibility for the provision of official health care rested primarily with the barber surgeons, who had acquired their knowledge in an apprenticeship or, from 1808, in schools especially designed to train semi-academic healers for the medical care of the less affluent. In addition, an unspecified but, according to many contemporary accounts, very large number of lay healers offered their services – some occasionally to relatives and friends, others more or less professionally – sometimes attracting clients from far away.

Academic physicians, barber surgeons and many lay healers alike relied on blood-letting, laxatives and emetics and various herbal, animal and mineral drugs. The therapeutic range among non-academic healers was wider, however, than among physicians. Many of them administered secret remedies and alleged 'specifics', which they obtained from drug peddlers, shops or pharmacies. Indeed, for all we know, the Königseer water, Kiesow's essence, Redlinger's, Lang's and Morison's pills, Schau's, Schmidhammer's and Kriegshaber's balsam, and the like may have played a much more important role in the treatment of diseases than all the physicians' prescriptions taken together.¹¹ In addition, there were hundreds, if not thousands, of 'wise' men and women, who used sympathetic or magical healing. They 'prayed', 'stroked' or 'blew' diseases away. They handed out amulets and so-called *Gichtzettel*, pieces of paper with sacred inscriptions against convulsions, to be hung around the neck or swallowed. They undertook complex healing rituals like the *Kopfmessen*, the repeated measuring of the head and its circumference as a cure against headache, or the magical transfer of diseases on animals and plants, and they exorcized demons.¹²

In the course of the nineteenth century, thanks primarily to their dominant position in the Bavarian health administration, the academic physicians increasingly succeeded in driving their competitors out of the medical market. New legislation severely limited the medical activities of the barber surgeons, restricting them essentially to shaving, cupping, blood-letting and the treatment of simple, external diseases, and making their economic survival increasingly difficult. At the same time, the number of academic physicians began to grow, and the government took measures to distribute them more evenly across the territory. In 1803 and 1806, some 250 salaried positions as district physicians were created and gradually filled. Their incumbents had various forensic and administrative duties, but they were also expected to practice privately. From 1834, in an attempt to further improve rural health care, newly licensed physicians could no longer freely choose their place of residence, but had to apply for a vacant seat wherever a physician was needed. In the process the medical services of academic physicians came more and more within reach of the rural majority. At the same time, the illegal medical activities or transgressions of local lay healers and barber surgeons were subject to increasingly tighter local control, even though a wall of silence and solidarity often made successful prosecution difficult, according to the complaints of many physicians.

Among the new, alternative systems of medicine, homoeopathy first began to attract attention in the 1820s, and it turned into a serious challenge

in the 1830s, especially after the first cholera wave.¹³ Leading members of the medical profession, including Franz Nepomuk von Ringseis, the most powerful man in the health administration, were sympathetic or outright enthusiastic. From the 1830s to the late 1860s, homoeopathy was continually taught by at least one member of the the medical faculty in Munich. In 1851, Joseph Benedict Buchner was even granted an honorary professorship in homoeopathy.¹⁴ A government survey in 1833 already listed 18 homoeopathic physicians in 13 Bavarian towns.¹⁵ Their number peaked at about 60 in the late 1850s, when approximately four per cent of all academic physicians in Bavaria practiced homoeopathy. Initially, some barber surgeons also began to resort to homoeopathic treatments, but in 1837 this was forbidden.¹⁶ The extent of homoeopathic lay healing is more difficult to establish, but it seems to have been fairly limited in this period. In the area around Osterwarngau, south of Munich, Max von Schenk, a priest, established a very extensive homoeopathic practice,¹⁷ but there are only occasional references to homoeopathic lay healers in other places, usually among members of the clergy.¹⁸

Other types of alternative medicine were less successful than homoeopathy although, at first sight, conditions seemed equally favourable. In 1832 a Bavarian high school teacher, Eucharius Ferdinand Christian Oertel, founded the first hydropathic lay organisation in Germany, the *Hydropathischer Gesundheitsverein für ganz Deutschland*. In the 1840s Vincenz Prießnitz's cures in Gräfenberg aroused considerable interest among the medical profession in Bavaria.¹⁹ Several physicians travelled to Gräfenberg to acquaint themselves personally with Prießnitz's system, which was based primarily on cold water and diet.²⁰ In the 1850s, Dr Lorenz Gleich in Munich coined the German term *Naturheilkunde*, which is still widely used today to denote natural healing.²¹ But, in the end, few academic physicians adopted the new approaches, and even fewer were prepared to rely exclusively on them – except for those who owned one of the few hydropathic or naturopathic establishments or were employed there.²² Homoeopathic physicians, above all, seem to have perceived hydropathy and natural healing as useful supplements to their own method. But, as Gleich complained bitterly, they still relied primarily on their homoeopathic remedies.²³

The *Erfahrungsheilkunde* or 'experiential medicine' propagated by Johann Gottfried Rademacher in the 1840s and 1850s did not, for all we know, fare much better. Like Hahnemann, Rademacher campaigned against what he saw as a harmful abuse of blood-letting, laxatives and emetics. From experience and drawing on Paracelsian ideas, he claimed to have found drugs

Table 1. Irregular healers in Bavaria (1874–94)

Irregular healers	Lay healers	Baun-scheidt	Electro-homoeop.	Homoeopathy	Hydropathy nat. healing	Magnetic healing	Sympathy secret remedies
1874	1156	5	-	106	2	3	117
1875	1262	7	-	125	2	3	127
1876	1396	6	-	137	2	3	152
1877	1563	10	-	153	3	3	164
1878	1814	14	1	161	3	2	201
1879	1639	7	-	148	2	1	194
1880	1630	9	-	164	-	2	187
1881	1499	6	9	151	1	4	173
1882	1477	8	14	163	1	2	152
1883	1485	5	13	142	1	8	176
1884	1356	3	11	124	3	7	236
1885	1406	3	7	121	1	4	274
1886	1349	3	9	122	2	2	270
1887	1313	5	12	90	7	-	262
1888	1271	3	9	90	4	3	133
1889	1216	3	8	84	6	2	127
1890	1170	2	9	71	8	12	117
1891	1129	2	12	79	7	4	141
1892	1184	1	11	79	18	5	126
1893	1152	2	12	87	23	6	118
1894	1168	2	12	84	38	10	129

Sources: AIB 22–26 (1875–79), AIB/MMW 27 (1880), MMW 28–41 (1881–94).

instead which possessed specific curative properties, some against the diseases of the individual organs and others against the universal diseases, which, according to Rademacher, affected the organism as a whole. Rademacher's *Rechtfertigung der von den Gelehrten mißkanten, verstandesrechten Erfahrungslehre der alten scheidekünstigen Gelehrten* (1843) went through several editions and was translated into Dutch and Russian.²⁴ There are hints that a few Bavarian physicians may occasionally have used Rademacher's remedies,²⁵ and at least one leading Bavarian homoeopath, Eduard von Grauvogl, sought to adapt some of Rademacher's ideas to his own system.²⁶ I have found no Bavarian physician, however, who relied exclusively on it. Similarly, among physicians and lay healers alike, there are only very isolated references to any practitioners of magnetic healing, galvanism or Baunscheidtism (see below) before 1870.

A Free Field: the Bavarian Medical Market after 1873

AMONG THE BAVARIAN MEDICAL PROFESSION, the appeal of alternative healing and of homoeopathy in particular declined in the late nineteenth century. Based on more sophisticated statistical and experimental approaches and a rapid expansion of empirical, physiological and pathological knowledge, the medical profession successfully fashioned itself as a vanguard of scientific progress. Although, in hindsight, there was little therapeutic progress, previous scepticism and doubts within the profession as to the validity of accepted concepts and therapies gave way to a new mood of confidence. Especially among younger physicians, even homoeopathy, the most successful alternative healing system to date, lost much of its already limited appeal. By 1875 there were only 36 homoeopathic physicians left, many of them in the larger cities and most of them elderly.²⁷ In the following years, their number declined further, and there is no indication that the other alternative healing systems found any significant following among the medical profession either.

If we look at the activities of irregular healers, however, a rather different picture emerges.²⁸ According to the national survey of irregular healers, by 1877, six years after the lifting of licensing regulations, 169 (10.8 per cent) of 1,563 irregular healers used one of the new alternative healing systems (see Table 1). The figure includes some barber surgeons, midwives and pharmacists who before 1873 had generally not been allowed to treat internal diseases. Since only a small minority of them practised alternative medicine, the proportion of alternative healers among the 946 lay healers in the strict sense of the word, was even higher, at about 14 per cent.²⁹ The

irregular healers far outnumbered the approximately 40 to 50 followers of alternative healing systems among the 1,547 academic physicians. In numerical terms the irregular healers, and not the physicians, were the main suppliers of alternative medical treatment in the kingdom.

The number of irregular healers listed in the surveys reached a maximum of 1,814 (including 1,130 lay healers) in 1878 and then gradually fell to about 1,350 in the late 1880s and to 1,150 in the early 1890s.³⁰ Whether this decline was due primarily to the further increasing number of academic physicians and to the establishment of a national health insurance scheme in 1883, which favoured academic physicians, or to a deeper, cultural change, can not at present be determined. The number of irregular healers practising alternative healing systems peaked slightly later at 188 (12.7 per cent) in 1882 and then also declined, when a 50 per cent decrease among the homoeopathic healers was only in part compensated by the rise of other healing systems. Still, due to the decline in overall numbers, the proportion of alternative healers among all irregular healers remained about 10 per cent and rose to 12.6 per cent again in 1894. The proportion among the lay healers without any formal medical training was correspondingly higher.

Among the new alternative healing systems, homoeopathy was by far the most important throughout the whole period from 1873 to 1895. The number of irregular healers who treated patients with homoeopathic remedies rose from 106 in 1874 to a maximum of 164, 19 of whom were

Table 2. Occupational background of irregular homeopathic healers in Bavaria, 1873–95 (n = 420)*

clergy	131	foresters	5
farmers	70	factory workers	4
craftsmen	55	railway employees	4
barber surgeons	52	vets	4
teachers	19	pharmacists	2
privateers etc.	17	knackers	2
merchants, shop owners	10	others	16
midwives	6	no information given	23

*The tables are derived from the manuscript lists (based on *HStAM MInn* 61355–61) for six selected sample years (1873, 1878, 1882, 1886, 1893 and 1895). Since some healers who were active only for a short time between two of these years may thus have been overlooked, the absolute figures for the whole period presumably would be slightly higher. Wives, widows and daughters (of craftsmen etc.) have been assigned to the respective profession of their husband or father; 'privateers' includes members of the aristocracy, house and estate owners as well as one factory owner; 'merchants' includes small shop owners.

women, in 1879.³¹ By 1883 the figure had declined to 142, and decreased dramatically in the late 1880s to 90 in 1888 and 84 in 1894. They were spread fairly evenly across the territory. Differences in their density in the various *Kreise* were largely parallel to differences in the overall numbers of irregular healers, with Swabia and Upper Bavaria quite consistently on the higher side and Upper and Lower Franconia on the lower. A few local clusters can be found, however. They were due, it seems, to the activities of particularly successful or charismatic healers. In the single district of Miesbach, for example, there were 10 homoeopathic healers in 1877. This was the area where Max von Schenk had established a very successful homoeopathic practice as early as the 1850s.³²

The most important professional group among the irregular homoeopathic healers consisted of priests and other members of the clergy. Of 420 irregular homoeopathic healers identified on the basis of six sample years between 1873 and 1895,³³ 131 were members of the clergy (see Table 2). In 1873, they made up more than half of all irregular homoeopathic healers and about two thirds of the homoeopathic lay healers in the strict sense.³⁴ Over the following years, that proportion declined, presumably due to the massive campaign which, supported by the health administration, Catholic and Protestant church authorities mounted against the medical activities of the clergy and which partially helps explain the overall decline of homoeopathy among lay healers. Farmers were the second most important group, with 70 out of 420, including six farmer's wives. Most of them were in their 50s and 60s. Several of them were described as the most sought-after healers in their district, and one Abraham Wild in the district of Kusel was even said to have become a rich man thanks to his healing activities. Craftsmen like millers and blacksmiths and their wives or widows were the next big group (55). Some of them lived and worked in larger towns, such as Nördlingen, Günzburg or Kemnath, but most were found in rural areas. They were followed by the relatively small group (52) of homoeopathic healers among the many barber surgeons who treated internal diseases without formal training, and by teachers (19).

Before 1880 the second most popular alternative healing system among the irregular healers was *Baunscheidtism*. The method was created in 1848 by Carl Baunscheidt (1809–73), a mechanic and inventor in Endenich near Bonn. Baunscheidt's method relied primarily on the curative effects of the so-called *Dermabioticon* or *Lebenswecker* ('vitaliser'), which Baunscheidt had designed. This was a long-handled tool with about two dozen thin needles on its tip. It was applied to the skin in such a way that the needles penetrated the skin only superficially. The site was then rubbed with a

mixture of irritating oils designed to produce a strong rash. Baunscheidt developed his method after a personal experience with the curative effects of multiple mosquito bites on his arthritic hand and, according to family legend, after a missionary from the Far East had told him about acupuncture.³⁵ Along with homoeopathy and natural healing, Baunscheidtism shared a strong aversion to the prevailing 'mechanist' trends in contemporary academic medicine and a reliance on the life force and natural healing power of the living human body. According to Baunscheidt, the curative effect of the *Lebenswecker* was based primarily on the attraction and consequent evacuation of morbid matter towards the skin. In some diseases the *Lebenswecker*, as its name implied, was said to work by stimulating the vital force in the body.

In Northern Germany and Prussia Baunscheidtism seems to have gained considerable popularity in the 1850s and 1860s, and Baunscheidt died a rich man. First published in 1851, his book was in its sixth edition in 1858, enriched with innumerable case histories and testimonials.³⁶ A periodical, the *Archiv für Baunscheidtismus* was also published.³⁷ In France Dr Sermet propagated a very similar system under the name *stylopathie*.³⁸ According to the Bavarian surveys, Baunscheidtism did not achieve the popularity of homoeopathy among Bavarian lay healers. The number of irregular Baunscheidtists in Bavaria peaked at 14 in 1878 and fell to just a handful after 1883, although it should be added that the system was particularly amenable to self-medication, once a *Lebenswecker* had been acquired for the rather substantial sum of four *taler*.³⁹

As in the case of homoeopathy, a couple of clergymen adopted the new method, and one of them even provided in-patient treatment in his own home.⁴⁰ A Methodist missionary of the United Brethren in Christ also resorted to the method after his return from the United States, claiming he was moved only by Christian love and humanitarianism.⁴¹ By far the largest professional group among irregular *Baunscheidtists* consisted of craftsmen, however, suggesting that *Baunscheidtism* had a somewhat different social base than homoeopathy. Seven out of 22 irregular *Baunscheidtist* practitioners documented in selected years during the period (1873, 1878, 1882, 1886, 1892 and 1895) were millers, blacksmiths, carpenters and other craftsmen or their wives, many of them living in middle-sized towns. There were only two farmers.

In the medical market of the 1880s, Baunscheidtism was rapidly eclipsed by *electro-homoeopathy*. Founded by Count Cesare Mattei in Bologna, the method was based on fairly simple pathological principles. All diseases had their ultimate roots in a morbid alteration of blood or lymph,

and 25 different kinds of globuli and five kinds of fluids of different colour, the so-called *elettricità*, were considered sufficient for their treatment. The drugs were said to act specifically on certain organs, such as the chest and the vessels, or against certain diseases, such as fever, syphilis or cancer. From homoeopathy Mattei adapted the use of diluted medicines and globuli, but the medicines were not applied according to the principle of simile. They were directed against diseases, not chosen according to the characteristic symptoms they produced. Mattei never revealed the composition of his drugs. The term *elettricità* presumably served primarily to stress the modernity and the scientific status of Mattei's approach. It was variously said to refer either to the rapid curative effects of the drugs, or to some kind of electricity which was supposed to be 'fixed' in them.⁴²

After some initial interest, homoeopathic physicians quickly denounced the new system as just another fraudulent scheme to sell secret remedies.⁴³ But the new method spread rapidly in the 1880s, especially in the southern parts of Germany, and by 1885 was described as 'very popular'.⁴⁴ In Regensburg, an electro-homoeopathic lay association, the Consortium for Electro-homoeopathy, was founded under the auspices of the Countess Ernestine von Aufseß, and was reported to have more than 7,000 members by 1883.⁴⁵ Translations of Mattei's treatises were published. The consortium helped make the electro-homoeopathic remedies accessible through a pharmacy in Regensburg and, with the support of the only known avowed electro-homoeopathic physician, a Dr Bachhammer in Regensburg, a little hospital was opened. The consortium also issued a biweekly journal, the *Elektrohömöopathische Blätter*, which spread news about the newest spectacular cures that had been performed. In Munich Peter Natili, a former monk, also established a flourishing business by selling Mattei's remedies, apparently at a huge profit. When Mattei withdrew his support, Natili declared himself the founder of a 'new electro-homoeopathy' and sold drugs of his own making. As the founder of an electro-homoeopathic women's association, Natili seems to have been particularly successful in gathering the support of upper-class ladies, and his 'St Joseph's Verein', an electro-homoeopathic home-visiting scheme, attracted women from all over Bavaria who wanted to help Natili without receiving any salary.⁴⁶

From 1881 onward, the number of irregular electro-homoeopaths reported in the annual surveys remained fairly constant at about a dozen, with a maximum of 14 in 1882. Their professional background was similar to that of the homoeopathic healers. Again the clergy played a dominant role, with nine out of 36 electro-homoeopaths identified at some time in the period from 1873 to 1895, but there were also four farmers, three teachers,

two barber surgeons, two craftsmen and two ladies from the aristocracy, the Countess of Aufseß and a Swiss baroness, Louise de Rougement, who had patients come to her castle and treated them personally with electro-homoeopathic remedies.⁴⁷

From about 1890 hydrotherapy and natural healing became increasingly popular among irregular healers in Bavaria. Previously only a couple of healers had resorted to these methods. The new healing system created by Sebastian Kneipp, a priest in Wörishofen (Swabia), played an important part in this change. Kneipp eclectically combined hydrotherapy, natural healing, herbal medicine and homoeopathy. As early as the 1870s, the local physician reported a steady influx of patients. At first, most patients were said to be members of the clergy who stayed in the local monastery,⁴⁸ while the *propheta in patria* found little esteem among the local villagers.⁴⁹ In the 1890s, however, Kneipp attracted increasing numbers of patients, his method spread, and a virtual Kneipp movement arose.⁵⁰ Today, Kneipp is still a household name in Germany, although one now primarily associated with cold water applications.

According to the 1894 survey, 38 out of 147 irregular healers in Bavaria used hydrotherapy, natural healing or Kneipp's system. But the figure, up from 18 in 1892, may reflect only the beginning of a further expansion in the early twentieth century. By 1907 there were 14 natural healers in Nuremberg alone,⁵¹ and in the socially and economically more dynamic Bavarian Palatinate, natural healing and Kneipp's system dominated almost totally by the mid-1890s.⁵² Naturopathic lay associations were formed in Ludwigshafen, Erlangen and other, mostly industrial, towns. By 1900 there were 12 associations, comprising more than 1,300 members, and others followed suit.⁵³ Even members of the working class were reported to be avid readers of Bilz's classic on natural healing.⁵⁴

The occupational background of irregular practitioners of natural healing, Kneippianism or hydrotherapy was more varied than that of the homoeopaths. For 19 out of 56 members of this group identified in the period between 1873 and 1895, no profession was given at all, suggesting in some cases a full-time commitment to their healing activities; some of them, in fact, figure explicitly as owners of a hydrotherapeutic establishment. Nine of the remaining 37 healers were members of the clergy, including Sebastian Kneipp himself. Only one was a farmer, or rather an *Ökonom*, which may suggest a fairly wealthy landowner. Eight had been trained in the crafts, among them Johann Braun, a former glass worker, who practised naturopathy as an itinerant healer. In addition, we find four barber surgeons, four merchants or shop-owners, a physician's widow, a former medical student

and a former construction designer.

On a smaller scale, mesmerism or magnetic healing seems to have encountered a fate similar to natural healing and hydrotherapy.⁵⁵ There was little interest in the method among irregular healers before 1880, and the number who practised it only briefly rose to a maximum of 12 in 1892. Among them were Wilhelm Liebhaber, who founded a *heil magnetische Anstalt* in Upper Franconia, and Paul Schröder, the first president of the 'Association of German Magnetopaths', who then moved from Nuremberg to Leipzig.⁵⁶ In the following years, magnetism's appeal seems to have grown considerably. By 1907 there were 13 unlicensed magnetopaths in Nuremberg alone.⁵⁷

Conclusions

FIGURES ON THE NUMBER OF IRREGULAR HEALERS are undoubtedly only a poor measure of the overall popularity of individual alternative healing systems in nineteenth-century health care, although possibly still one of the best available. Nevertheless the comprehensive quantitative and qualitative data from the Bavarian surveys allow some conclusions which could be of more general relevance to other European states as well and might even offer a provisional research agenda.

1. In a largely liberalised medical market, lay healers (supported by a much smaller number of barber surgeons, midwives and pharmacists) became significant suppliers of the various new alternative healing systems. Clearly, these groups deserve much greater attention than they have thus far been granted in the history of alternative healing.⁵⁸ They were instrumental in making the new alternative healing systems accessible to the large majority of the population which, at least in nineteenth-century Bavaria, lived outside the few larger cities. Thanks to their social and cultural position in the parishes, the clerical lay healers in particular may well have played a major role in the dissemination of the new alternative concepts and practices among the population.
2. Much writing on the history of alternative medicine is based on the explicit or implicit assumption that there was a profound dichotomic opposition between the medical establishment, on the one hand, and the various types of alternative medicine on the other. The Bavarian case suggests that this may be too simple a view. Not only were there massive conflicts among the leading representatives of the various alternative healing systems, in particular homoeopathy and electro-homoeopathy, but also between different professional groups advocating the same

healing system. Some homoeopathic physicians were even accused of helping the police bring homoeopathic lay healers to court.⁵⁹ More importantly, in the ordinary health care of the population at large, the new alternative healing systems also seem to have faced an equally intense competition from another quarter. So-called 'wise' men and women, scores of healers who used sympathetic healing rituals, sacred or blessed objects, magical words and healing prayers, provided important healing alternatives to official medicine and the new alternative healing systems alike.⁶⁰ In 1874 the survey registered 116 healers of this kind, matching exactly that of all irregular alternative healers taken together,⁶¹ but, as contemporary health officials emphasised, physicians were especially unlikely to learn about such practices and the figure may well greatly underestimate their real extent.⁶² The number of sympathetic healers grew in the years that followed. Thus, in 1880 we find 187 healers who worked with 'sympathy and secret remedies', the latter usually, it seems, of their own making. Among them were 70 women. In 1885 the 274 representatives of this group were more than double the number of irregular alternative healers (132). From then on, their number decreased dramatically, reaching 126 in 1893, but in the early twentieth century health officials still complained vehemently about 'the wide diffusion' of sympathetic cures, healing prayers and the like, especially among the rural population.⁶³ There was no dichotomy then, but, if anything, a trichotomy.⁶⁴

3. The assumption of a dichotomic opposition between official medicine and alternative healing systems is also misleading in regard to the application and appropriation of the various healing methods in the ordinary health care of the wider population. Rather than relying on a single method, many healers took great liberties in combining various approaches, as incompatible as they may seem to us. Some homoeopathic physicians and almost all of the barber surgeons who used homoeopathy frequently resorted to conventional, allopathic treatment as well,⁶⁵ or they supplemented the use of homoeopathic remedies with hydropathy and natural healing,⁶⁶ galvanism, gymnastics or spiritual healing.⁶⁷ This trend towards therapeutic syncretism is even more striking in the case of lay healers. The farmer Sauerwein treated his patients with 'blessings and magnetism',⁶⁸ while Josef Anton Böck, a former butcher near Memmingen, combined magnetism, sympathetic cures and household remedies.⁶⁹ Franz Michael Bandorf, a barber surgeon, treated his patients alternatively by sympathetic means or with electro-homoeopathic

remedies.⁷⁰ Farmer Johann Zimmer was an expert in blessings and ‘prayed away’ diseases, but he also resorted to Baunscheidt’s *Lebenswecker*.⁷¹ Other healers combined electro-homoeopathic remedies with Kneipp’s method or sympathetic healing with massages.⁷² In this respect, the traditional historiographic focus on the major protagonists and most fervent followers of the various alternative healing methods proves particularly problematic. While for the ardent adept, conversion to one of the new healing systems frequently assumed quasi-religious connotations,⁷³ many ordinary healers seem to have taken a much more pragmatic approach, adopting whichever method they found useful and/or profitable.

4. Finally, such patterns of syncretism, as well as the specific characteristics of the more successful alternative healing systems, offer some hints as to which factors were decisive for their respective appeal to the patients. This appeal apparently depended largely on the degree to which the healing systems relied on concepts or practices that were in some way familiar, that ordinary men and women could identify with or that they could at least reinterpret in ways that suited their own ideas and preferences.⁷⁴

In this respect, homoeopathy and electro-homoeopathy clearly stood out. Both healing systems relied primarily on taking drugs, a very familiar – if not routinely expected – part of conventional therapy. Compared to conventional remedies, homoeopathic and electro-homoeopathic remedies had a severe drawback which may have been a major obstacle to their further dissemination. They lacked the visible, drastic, evacuating effects, which many patients, especially in the countryside, were still said to expect.⁷⁵ They fitted neatly, however, into a second, well-established therapeutic concept, which also underlay the great popularity of specifics and patent drugs: namely the idea that there were special remedies or herbs with unique curative properties against the various diseases. They did not work by attracting and evacuating morbid matter, but rather thanks to some intrinsic, occult, spirit-like healing power. In this sense homoeopathic and electro-homoeopathic remedies may have seemed particularly appropriate to the practice of the professional experts in the realm of the spiritual and supernatural, the clergy. A look at the characteristic forms of therapeutic syncretism among the clergy is quite revealing. Joseph Lindner, for example, a priest in Erbdorf and president of the *Homöopathische Verein für Bayern*, used homoeopathy as well as the sympathetic ‘blowing away’ of toothaches. Similarly, Martin Wittmann, who ran a very extensive homoeopathic practice in Strahlfeld, strengthened the curative virtues of his globuli with

prayers or benedictions.⁷⁶ Pietl, another priest, also cured by 'praying and homoeopathy',⁷⁷ and a similar combination of homoeopathy with 'benediction and exorcism' made patients throng to Franz Anton Stiegeler in Swabia.⁷⁸ Hasenwehrl, in the lower Bavarian district of Griesbach, found blessed water from Lourdes a useful supplement to the homoeopathic pharmacopoeia, and in the same manner Josef Eckert used 'sacred objects' together with his homoeopathic remedies.⁷⁹

Baunscheidtism also fitted fairly neatly into a well-established therapeutic paradigm. The manual application of the *Lebenswecker* resembled other forms of somewhat painful therapeutic penetration of the skin, like cupping, scarification and blood-letting. Its main rationale was almost the same as well: it was to draw the *Ungesund*, the morbid matter, the 'poison' towards the skin and rid the body of it. The success was tangible in the local inflammation and swelling, which Baunscheidt's mixture of irritating oils helped promote. Irregular healers and patients alike may have wondered, however, why a costly instrument should be needed, when blood-letting, purgatives or cauterisation produced an even more copious evacuation of morbid matter.

Until the late nineteenth century, the impact of hydropathy, natural healing, magnetism, hypnosis and galvanism on general health care remained very limited, and the growing popularity of natural healing around 1900 was primarily an urban phenomenon. It was largely restricted to cities such as Augsburg, Ludwigshafen, Nuremberg, Munich, Regensburg or Erlangen,⁸⁰ and their major social basis seems to have been among the typically urban classes. In fact, the signatures which the naturopathic lay associations in various Bavarian towns collected in 1903 against the threat of new licensing regulations came almost exclusively from members of the urban middle class: printers, postmen, railway engineers, teachers, painters, shoemakers, blacksmiths, state employees, merchants, etc.⁸¹ Maybe their openness to the methods reflected a growing appreciation for 'the natural' in the increasingly polluted urban centres. It could also have expressed a protest against the monopolistic attitudes of the medical profession by people who, in contrast to the rural majority, already had considerable personal experience with academic medicine and the ways physicians treated their less affluent patients.

Only Kneippianism from the 1880s also found some followers among rural healers, presumably a reflection of a certain demand among their patients. It is a revealing exception. In contrast to hydropathy and natural healing, Kneipp's system also relied on herbal medicines, again a very familiar form of therapy, at a time when some rural lay healers still treated

their patients exclusively with the help of an old herbal.⁸² There was also a market for new drugs of unknown composition and, in the Palatinate, Kneipp's herbal medicines for a while even became serious competition for the most popular patent drug of the time, the 'Swiss pills'.⁸³

The growing importance of magnetic healing from the late nineteenth century was primarily an urban phenomenon. Five out of 10 magnetopaths reported in 1895 were active in the Bavarian capital,⁸⁴ and later Nuremberg emerged as a centre. There was a minority of rural magnetopaths, however, with a couple of farmers among them, and the therapeutic syncretism they practised is once again revealing. In contrast to their urban counterparts, they did not exclusively rely on magnetic healing, but combined it with praying, the use of blessed water or sympathetic healing. Jacob Jacob, a former farmer, for example, cured 'gouts', 'rheums' and diseases from 'bewitchment' with magnetism, as well as with blessed water from Lourdes.⁸⁵ In other words, a handful of rural magnetopaths seem to have found the method in some way congenial to more traditional religious or magical healing practices.

In a persuasive plea for an anthropologically informed history of early modern mentalities the late Bob Scribner has argued that, 'Cross-contamination between competing belief-systems seems a more common phenomenon than the reverse.' Scribner stressed in particular the 'phenomenon of syncretism', people's ability 'in many situations to appropriate (or rather misappropriate) cultural goods or practices' and an

underlying pragmatism or 'practical rationality' in most people's attitudes to life, by means of which they accepted what seemed to work and did not question too far if this conflicted with the underlying ideological principles on which their 'world-view' was built.⁸⁶

From what has emerged in this paper, Scribner's remarks appear equally pertinent to nineteenth-century medical culture. Medical historians, and historians of alternative medicine in particular, should find it well worthwhile to pay as much attention to the complex processes of appropriation and syncretism in the everyday practice of ordinary healers and patients, as to their theories and works, and to the struggles of the founders and principal protagonists of the various alternative healing systems.

Notes

- 1 Only a few major volumes will be cited here: Roger Cooter (ed.), *Studies in the History of Alternative Medicine* (London and New York, 1988); Olivier Faure (ed.), *Praticiens, patients et militants de l'homéopathie aux XIXe et XXe siècles (1800–1940)* (Lyon, 1992); Martin Dinges (ed.), *Weltgeschichte der Homöopathie. Länder, Schulen, Heilkundige* (Munich, 1996); Robert Jütte, *Geschichte der alternativen Medizin. Von der Volksmedizin zu den unkonventionellen Therapien von heute* (Munich, 1996).
- 2 Karl Weber, *Neue Gesetz- und Verordnungsammlung für das Königreich Bayern mit Einschluß der Reichsgesetzgebung*, vol. 9 (Nördlingen 1888), pp. 413–14; this law which extended the principle of economic liberalism to the realm of healing was originally introduced in the *Norddeutscher Bund* in 1869; only titles like 'physician' or 'surgeon' remained the prerogative of regular state-approved healers.
- 3 For a short time, Bavarian homoeopaths were awarded a somewhat unflattering exemption when the courts confirmed that their pills were nothing but sugar pills. Later the therapeutic intention was established as the crucial criterion, regardless of the presumed efficacy (cf. *Homöopathische Monatsblätter für volksthümliche Gesundheitspflege und Heilkunde* (henceforth HMvGH) 6 (1880), 17–19, 25–29, 33–36 and 49–52).
- 4 Ordinance n. 6600, 12 July 1873, copy in *Bayerisches Hauptstaatsarchiv München* (henceforth: HStAM) MInn 61351.
- 5 Ordinance n. 1386, 10 March 1896, put an end to the survey, claiming that the data had shown a fairly constant picture in the preceding years (copy in HStAM MInn 61351).
- 6 *Aerztliches Intelligenz-Blatt* (AIB) 22 (1875), 503–05; AIB 23 (1876), 365–68; AIB 24 (1877), 349–53; AIB 25 (1878), 405–10; AIB 26 (1879), 387–91; *Aerztliches Intelligenz-Blatt. Münchener Medicinische Wochenschrift* (MMW) 27 (1880), 358–61; MMW 28 (1881), 565–67; MMW 28 (1881), 565–67; MMW 29 (1882), 362–64; MMW 30 (1883), 293–95; MMW 31 (1884), 407–09; MMW 32 (1885), 722–24; MMW 33 (1886), 705–07; MMW 34 (1887), 434–36; MMW 35 (1888), 401–04; MMW 36 (1889), 586–89; MMW 37 (1890), 592–95; MMW 38 (1891), 579–82; MMW 39 (1892), 573–75; MMW 40 (1893), 478–80; MMW 41 (1894), 708–11.
- 7 HStAM MInn 61355–61; the lists were first transmitted to the eight *Kreisregierungen* or area governments (Upper Bavaria, Swabia, etc.) where statistics for the respective *Kreis* were compiled and sent to the central health administration, usually accompanied by a letter which outlined the major results. Some of the original lists sent by the district physicians have also come down to us.
- 8 Andreas Kraus, *Geschichte Bayerns. Von den Anfängen bis zur Gegenwart* (Munich, 1983), pp. 463–64.
- 9 Max Spindler (ed.), *Handbuch der bayerischen Geschichte*, vol. 2, 2nd ed. (Munich, 1979); there was also a considerable protestant minority of about 25 per cent.

- 10 HStAM MInn 23780/I; for a more thorough analysis of the pre-1870 Bavarian health care system, see Christian Probst, 'Die Reform des Medizinalwesens in Bayern zwischen 1799–1808' in Eberhard Weis (ed.), *Reformen im rheinbündischen Deutschland* (Munich, 1984), pp. 195–212; Michael Stolberg, *Heilkunde zwischen Staat und Bevölkerung. Angebot und Annahme medizinischer Versorgung in Oberfranken im frühen 19. Jahrhundert* (med. diss., Munich, 1986).
- 11 Cf. Christian Probst, *Fahrende Heiler und Heilmittelhändler. Medizin von Marktplatz und Landstraße* (Rosenheim, 1992), pp. 113–27, and for the later period Elmar Ernst, *Das 'industrielle' Geheimmittel und seine Werbung. Arzneifertigwaren in der zweiten Hälfte des 19. Jahrhunderts in Deutschland* (Würzburg, 1975), pp. 73–112.
- 12 Stolberg, *Heilkunde*, pp. 88–108 and 127–58.
- 13 For the history of homoeopathy in Bavaria see Michael Stolberg, 'Die Homöopathie im Königreich Bayern', *Medizin, Gesellschaft und Geschichte* 14 (1996), 173–94; Michael Stolberg, *Die Homöopathie im Königreich Bayern (1800–1914)* (Heidelberg, 1999).
- 14 University Archives Munich, Senat E II 428, letter from the Ministry of the Interior, 21 October 1851.
- 15 HStAM MInn 15403; at least one more, Friedrich Mosthaff in Dirmstein, was overlooked.
- 16 Ministerial ordinance, 5 February 1837 (Georg Döllinger, *Das Medicinalwesen in Bayern*, part 1 (Erlangen, 1847), p. 204); the activities of a few homoeopathic barber surgeons are documented in HStAM MInn 61964.
- 17 *HMvGH* 5 (1879), 82–83 (obituary).
- 18 *General-Bericht über die Sanitäts-Verwaltung im Königreiche Bayern* 7 (1868/1869) (Munich, 1872), 106.
- 19 For the general history of hydropathy and natural healing in Germany see Alfred Brauchle, *Naturheilkunde in Lebensbildern* (Leipzig, 1937); Karl Eduard Roths Schuh, *Naturheilbewegung – Reformbewegung – Alternativbewegung* (Stuttgart, 1983); Jütte, *Geschichte*, pp. 114–78.
- 20 Dr Röder, 'Die Wasserheilkunde in Bayern mit besonderer Berücksichtigung des Auszugs aus dem Commissionsberichte des Hrn Professor Dr Horner', *Medicinisches Correspondenzblatt* 2 (1841), 65–76.
- 21 Roths Schuh, *Naturheilbewegung*, pp. 16–17; Gleich developed his approach from hydropathy; see his *Nur im Wasser ist Heil! Beiträge zur Begründung der Wasserheillehre* (Augsburg, 1847); Sabine Ludyga, Munich, is currently completing a thesis about the history of natural healing in Bavaria.
- 22 Hydropathic and naturopathic establishments are documented for Munich, Wunsiedel, Schallernhof near Erlangen, Erlenstegen near Nuremberg, Schäftlarn and Brunnthal (Röder, 'Wasserheilkunde').
- 23 Lorenz Gleich, *Doctor Joseph Buchner und die Homöopathie* (Munich, 1853), p. 9; a synthesis of homoeopathy, hydropathy and natural healing was attempted by Franz

- Andreas Ott in his *Populäre Darstellung meiner mit dem Namen Panjatrik bezeichneten Heilmethode als der vollkommensten und sichersten von allen* (Kempten, 1863).
- 24 On Rademacher, see Matthias J. Bohnenberger, *Die Erfahrungsheillehre Johann Gottfried Rademachers (1772–1850) und ihre Auswirkungen* (med. diss., Munich, 1985); Niels Krack, *Dr Johann Gottfried Rademacher. Sein Leben, seine Lehre, seine Heilmittel und wir* (Heidelberg, 1984); Hermann Paal, *Johann Gottfried Rademacher (1772–1850), Arzt in Goch, und seine Erfahrungsheillehre* (Jena, 1932).
 - 25 *General-Bericht 1* (1857/58–1858/59) (Munich, 1868), 42.
 - 26 Bohnenberger, *Rademacher*, p. 53.
 - 27 *HMvGH 1* (1875), 73.
 - 28 If not otherwise indicated the following data are from the published statistical summaries.
 - 29 The published figures on the types of medical activities of the healers include professional healers like barber surgeons, who practiced internal medicine or other types of therapy, which would have been forbidden to them before the new law of 1873.
 - 30 The figures always refer to the end of the respective year.
 - 31 The figure includes healers who did not exclusively rely on homoeopathy.
 - 32 *HStAM MInn 61355*, Upper Bavaria 1877.
 - 33 Unfortunately, the published data on occupations do not also make a distinction according to the various healing systems. I have undertaken an analysis on the basis of the manuscript sources for selected years only, namely 1873, 1878, 1882, 1886, 1893 and 1895. A systematic analysis of all the 32,000 or so entries would have been too time consuming without promising much additional information. The manuscript lists for 1878 and 1895 are not quite complete; I had to substitute the 1878 figures for the Upper Palatinate and Lower Franconia for 1879, and the 1895 figures for Lower Franconia for 1893.
 - 34 *HStAM MInn 61355*, figures for December 1873; in absolute terms 45 out of 86 irregular healers, 17 of which were barber surgeons. For the important role of the clergy in the history of homoeopathy, see my article 'Homöopathie und Klerus. Zur Geschichte einer besonderen Beziehung', *Medizin, Gesellschaft und Geschichte* 18 (1999), 78–90.
 - 35 Georg Alfred Tienes, *Der Bauscheidtismus. Das Bauscheidtsche Naturheilverfahren durch künstlichen Heilausschlag oder Exanthemation* (Stuttgart, 1955), pp. 11–12; to my knowledge there is no modern, non-partisan study of the history of Bauscheidtism.
 - 36 Carl Bauscheidt, *Der Bauscheidtismus oder die Bauscheidt'sche Heilmethode im Gebiete der Gicht, des Rheumatismus u. s. w. mittels des für dieselbe construirten Instruments, genannt: der 'Lebenswecker'*, 2nd ed. (Bonn, 1853); Carl Bauscheidt, *Der Bauscheidtismus*, 6th ed. (Bonn, 1858).

- 37 *Archiv für das Baunscheidt'sche Heilverfahren. Eine Monatsschrift für Baunscheidtismus und Volksmedizin*, 2nd ed. (Bonn, 1860).
- 38 *Archiv für das Baunscheidt'sche Heilverfahren*, p. 8.
- 39 Baunscheidt, *Baunscheidtismus*, 6th ed., p. 539.
- 40 HStAM MInn 61355, Swabia and Neuburg 1874.
- 41 HStAM MInn 61355, Upper Franconia 1878, entry on 48-year-old Christian Bischoff, a former butcher.
- 42 *Der Ärztliche Rathgeber der Electro-homöopathischen Heilmethode des Entdeckers Grafen Cesare Mattei* (Munich, 1883); Cesare Mattei, *Elektro-Homöopathie. Grundsätze einer neuen Wissenschaft* (Regensburg, 1884); see also Jütte, *Geschichte*, pp. 229–34; Alberto Lodispoto, *Storia della omeopatia in Italia. Storia di una terapia moderna* (Rome, 1987), pp. 106–13; Axel Helmstädter, *Spagyrische Arzneimittel: Pharmazie und Alchemie in der Neuzeit* (Stuttgart, 1990).
- 43 Karl Köck, *Was ist Elektro-Homöopathie. Das Heilsystem des Grafen Cesare Mattei in Bologna* (Leipzig, 1883).
- 44 *MMW* 32 (1885), 723.
- 45 *Die Geschichte des Consortiums für Electro-Homöopathie in Regensburg* (Regensburg, 1900); *Die Reorganisation des Consortiums für Elektro-Homöopathie in Regensburg* (Regensburg, [1899]); Jütte, *Geschichte*, pp. 233–34.
- 46 Natili's activities are amply documented in HStAM MInn 66438, 'Das Treiben des früheren Ordenspriesters Natili in München, 1886–1909'; see also Axel Helmstädter, 'Dr Peter Natili Elektrophysiopathie. Ein Mönch als Nachahmer Cesare Matteis', *Beiträge zur Geschichte der Pharmazie* 45 (1993), 9–13.
- 47 Among others we find Dr Bachhammer's wife, a post official, a railway engineer, a writer, a former merchant, a seamstress, a haberdasher, a housekeeper, a publisher, an agent and a farm inspector.
- 48 HStAM MInn 61358, Swabia and Neuburg 1886.
- 49 HStAM MInn 61358, Swabia and Neuburg 1887.
- 50 Florian Kramer, *Beiträge zur Ausbreitung des Kneipp'schen Heilverfahrens in Deutschland zwischen 1920 und 1933* (med. diss., Munich, 1981).
- 51 *General-Bericht* 37 (1907) (Munich, 1911), 292–93.
- 52 HStAM MInn 61361, Palatinate 1894.
- 53 Cornelia Regin, *Selbsthilfe und Gesundheitspolitik. Die Naturheilbewegung im Kaiserreich (1889 bis 1914)* (Stuttgart, 1995), p. 63.
- 54 *General-Bericht* 35 (1904) (Munich, 1907), 292–93.
- 55 For an overview on the fate of mesmerism in Europe and the United States, see Heinz Schott (ed.), *Franz Anton Mesmer und die Geschichte des Mesmerismus* (Stuttgart, 1985); Gereon Wolters (ed.), *Franz Anton Mesmer und der Mesmerismus. Wissenschaft, Scharlatanerie, Poesie* (Konstanz, 1988); Jütte, *Geschichte*, pp. 103–14; according to the surveys, electrical or galvanic healing, massages, hypnosis and

- Rademacher's 'Erfahrungsheilkunde' were never practised by more than a couple of irregular healers in Bavaria.
- 56 HStAM MInn 62670, 'Vereinigung deutscher Magnetopathen'; H.R. Paul Schröder, *Die Heilmethode des Lebensmagnetismus nebst einer Untersuchung über den Unterschied zwischen Hypnotismus und Heilmagnetismus*, 3rd ed. (Leipzig, 1895).
- 57 *General-Bericht* 37 (1907) (Munich, 1911), 249.
- 58 Exceptions are Thomas Faltin, "Kranke Menschen zum Lichte des Lebens zurückführen". Der Laienheilkundige Eugen Wenz (1856–1945) und die Stellung der homöopathischen Laienheiler um 1900' in Martin Dinges (ed.), *Homöopathie. Patienten, Heilkundige, Institutionen. Von den Anfängen bis heute* (Heidelberg, 1996), pp. 185–209; Ingeborg Streuber, 'Ein Macher: Arthur Lutze (1813–1870). "Der Mensch kann, was er will, doch muß er glauben und vertrauen"' in Dinges (ed.), *Homöopathie*, pp. 160–84.
- 59 *Populäre homöopathische Zeitung* 7 (1876), 150.
- 60 In her analysis of the little Protestant state of Braunschweig-Wolfenbüttel, Mary Lindemann has come to a very different conclusion for the preceding period (see her *Health and Healing in Eighteenth-Century Germany* (Baltimore, 1996)). Since in protestant areas of Bavaria and also in Prussia (see e.g. *Fränkische Tagespost*, 26 November 1904) sympathetic and magical healing were reported as still quite widespread around 1900, confessional differences can hardly account for this absence. It remains to be seen whether it reflects a regional cultural difference, tighter control or, much more likely, a simple lack of archival documentation.
- 61 The figure includes some healers who treated their patients with secret remedies, but it does not include the big group of those who were reported simply for selling drugs in general. According to Carl Majer, 'Statistik der zur Ausübung der Heilkunde in Bayern nicht approbirten Personen', *AIB* 24 (1877), 349–53, here p. 351, a combination of sympathetic healing and the use of home-made remedies was frequent, but in the survey itself brief indications like 'sympathy' or 'spells against rickets' are prevalent.
- 62 *MMW* 28 (1881), 565; the boundaries between a healing ritual and an ordinary prayer begging for divine assistance were blurred. Physicians were well known to disparage these kinds of practices as 'superstitious'. But massive side effects or even fatal consequences were probably not as common as in the case of blood-letting, drastic purgatives or surgical interventions, on which conventional therapy was based.
- 63 *General-Bericht* 37 (1907) (Munich, 1911), 249.
- 64 Jütte, *Geschichte*, subsumes 'folk medicine', sympathetic healing etc. under the term 'alternative' healing.
- 65 This was even true for quite popular homoeopathic physicians like Franz Andreas Ott; see his 'Praktische Randbemerkungen zu Siebert's, G. Gerson's und Milieus Abhandlungen in Bd. II H. 2 des med. Argos, als Beitrag zur Versöhnung der

- Partheien und zur Verbesserung der Heilkunst', *Medicinisches Correspondenzblatt* 3 (1842), 426–32, 439–48, 459–64, 475–82 and 533–44, here p. 460.
- 66 E.g. G. Ludwig Ditterich, *Klinische Balneologie*, 2 vols., 2nd ed. (Munich, 1867).
- 67 One of them was Karl Gerster, a well-known and influential homoeopath; see his *Das Universum und dessen Geheimnisse; oder Die Natur, dargestellt in ihrer wechselseitigen Anziehung, und die geheimsten Wirkungen ihrer Kraft. Eine Anleitung und Erklärung des Tischklopfens und der Geister-Manifestationen, nebst Mittheilungen aus der Geisterwelt* (Leipzig, 1854); Karl Gerster, *Odisch-magnetische (hypnotische) Heilwirkungen. Ungläubigen zur Belehrung und Kranken zum Heile*, 2nd ed. (Regensburg, 1889).
- 68 HStAM MInn 61358, Lower Franconia 1886.
- 69 HStAM MInn 61358, Swabia and Neuburg 1886.
- 70 HStAM MInn 61358, Lower Franconia 1886.
- 71 HStAM MInn 61358, Lower Franconia 1886.
- 72 HStAM MInn 61361, Lower Bavaria 1895, referring to Karl Bayer, a teacher, and Lower Franconia 1893, referring to a tailor's wife by the name of Endres.
- 73 Cf. Marijke Gijswijt-Hofstra, 'Conversions to homoeopathy in the nineteenth century. The rationality of medical deviance' in Marijke Gijswijt-Hofstra, Hilary Marland and Hans de Waardt (eds.), *Illness and Healing Alternatives in Western Europe* (London and New York, 1997), pp. 161–82.
- 74 Of course, there were other factors too: the special appeal to individual groups like the clergy, for example, financial considerations, or the kinds of investments (say, the purchase of a Lebenswecker or the construction of a sweating hut) needed before a specific kind of treatment could be offered.
- 75 This is, for example, a recurrent topic in scores of medical topographies which local physicians wrote on individual Bavarian districts around 1860 (*Bayerische Staatsbibliothek München*, manuscripts department Cgm 6874; *Stadtarchiv München*, Historischer Verein, Ms. 401/1–40).
- 76 HStAM MInn 61355, Regensburg and Upper Palatinate 1873; Carl Majer, 'Statistik der zur Ausübung der Heilkunde in Bayern nicht approbirten Personen', *AIB* 23 (1876), 365–68, here note on 367.
- 77 HStAM MInn 61357, Regensburg and Upper Palatinate 1882.
- 78 HStAM MInn 61356, Swabia and Neuburg 1878.
- 79 HStAM MInn 61356, Lower Franconia 1879 and 61357, Lower Bavaria 1882.
- 80 *General-Bericht* 34 (1903) (Munich, 1906), 254.
- 81 HStAM MInn 61351, petitions from naturopathic lay associations in Augsburg, Bamberg, Frankenthal, Mehlaiken, Munich, Regensburg, Schweinfurt and Würzburg, 1903; not all the lists include the signers' profession.
- 82 HStAM MInn 61355–61.

- 83 HStAM MInn 61361, Palatinate 1895, accompanying letter from the 'Kreis' government.
- 84 HStAM MInn 61361, Upper Bavaria 1895.
- 85 HStAM MInn 61358, Lower Franconia 1886, entry on 65-year-old Jacob Jacob (sic), a retired farmer in the district of Obernburg.
- 86 Bob Scribner, 'Reformation and desacralization: from sacramental world to moralised universe' in Bob Scribner and Ronnie Po-Chia Hsia (eds.), *Problems in the historical anthropology of early modern Europe* (= *Wolfenbütteler Forschungen*, vol. 78) (Wiesbaden, 1997), pp. 75–92, here p. 90.