

## The great milestones of public health in the Empire and everyday life in São Paulo: 1820-1870

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**Abstract** *In this article, I intend to focus on three public health concerns of the nineteenth century in São Paulo, to demonstrate that the great legislative milestones or important epidemics of the period – regarded by historiographers as decisive – had little to no importance on the social processes that drove changes away from the capital. The three concerns I will be addressing are the prison, the cemetery, and the food trade. Because this is a very divergent reasoning from what is now understood as public health, I will begin with a discussion about the concept of health in the nineteenth century, and also about the anachronism that often permeates studies on this topic. Then, I will focus on the prison, which was a first order issue regarding public health in the nineteenth century, and even more so in São Paulo (and possibly throughout Brazil), where there was a great traffic between the interior of the prisons and the urban space. After that, I will tackle the issue of cemeteries, which was a very important public health topic, but one that generated tension, since it ran into ecclesiastical power. And finally, the issue of food, which was, in São Paulo, the item least consonant with modern demands of health.*

**Key words:** *Historiographical milestones, Chamber Law, Central Board of Hygiene, Local health policy, São Paulo*

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## Introduction

Using the local documentation of São Paulo as a basis, I intend to demonstrate how the local elites dealt with some primary health issues, which involved the slaughterhouse, the cemetery, butcher shops, the regulation of liquor, the control of apothecaries (today's pharmacies), healers, the flooding of the Carmo floodplain, the bed of the Tamanduateí river, and control of the prison. However, I will focus on three main topics – the prison, the cemetery and the food trade – to ascertain whether there could be any relation between two major milestones of the period: the 1828 legislation on the chambers and the creation of the Central Board of Hygiene in 1850.

Defining history by its great deeds has its charms. Where is the fun in telling history by its continuities, its gradual changes? Great events have always evoked greater fascination, after all, they provide the possibility of thinking about ruptures in the past and conjecturing possibilities for the future.

As for the history of public health, something similar happens. For instance: in 1828, the law on chambers was established. Due to the end of the *Physicatura*, it was foreseen that the city councils would become responsible for the local health policies, even though it was determined that they were to be merely administrative bodies. Soon – as historiography shows – everything would have changed. In other words, the *Physicatura-mor* ceased to practice the enormous power it had previously exercised, and the city councils began to perform their role as “doctors of the cities”. Another example: in 1850, with the epidemic outbreaks, especially yellow fever, the Central Board of Hygiene was created. The medical power that the local chambers had obtained in 1828 ceased, since it was allocated to the Board, in the political center of the Empire, Rio de Janeiro. It became their task to propose the necessary prophylactic measures to combat epidemics that were to become Municipal Postures throughout the Empire.

In this case, it is not exactly a story told through great political and/or military deeds, but through legislative reorganizations (the “chamber law” of 1828) and sanitary catastrophes (caused by the return of yellow fever to Brazilian territory in 1849). However, this interpretation incurs three errors: first, it supposes that what appears in the laws also necessarily appears in the everyday world. Second, it generalizes a local problem to a massive territory. And finally, it mixes our current

conception of public health with what was understood by public health at the time.

With regard to the first point, it is always important to remember that a law is an effort to impose change in the social world or, often, a legal crystallization of something that already existed. To illustrate:

*[In New France, present-day Quebec] there was, for a long time, the impression that the early inhabitants of the colony were quite devout, practicing, and respectful of the church and the established order. There was also talk of the numerous intendants' decrees and bishops' commandments on various aspects of daily life, as proof that the state and the clergy exerted a strong influence on the inhabitants, in matters of religious practice and morality. However, a more critical reading of these last documents makes it possible to build a very different image of the inhabitants of New France. Thus, for example, it seems more prudent to conclude that, if a Bishop asks his clergy to forbid the “believers” of drinking or fighting during mass, it is because, effectively, some people behave this way in church. If the bishop is obliged, year after year, to repeat the same commandments, it is because the inhabitants have not changed their behavior, despite the warnings, which provides another picture of the degree of authority exercised by the Church over its “believers” [...]<sup>1</sup> (p. 301).*

That is, if our signs read “do not step on the grass”, future historians will have to suppose that people did step on the grass. When the supervisory bodies tried to curb the healers, what became evident is not that the doctors held power and prestige over the general population, but, on the contrary, that the population actually consulted with healers. On the other hand, when new legislation arises determining incumbencies, this does not mean that only from then on has the incumbency been assumed, it may have been simply regularized.

With regard to the second point, the generalization, it is a tendency to transform the territory of the Empire into a great Rio de Janeiro. Thus, the relationship between the supervisory bodies and the local government would be as it was in the capital, the epidemics would have happened as in the capital, in the same way that the responses to epidemic outbreaks and public health policies would have been as there. However, if yellow fever caused panic and disasters among the cariocas, the only record in the City Hall of the capital of São Paulo is that of April 9, 1850:

*Her Honor the Most Reverend asks to the City Council of this Imperial City that prayers be made*

*in order to plead for the mercy of the Almighty on the cessation of the epidemic scourge that ravages the capital of the Empire and its other provinces, and that the same scourge should not touch [sic.] this and other provinces not yet contaminated*<sup>2</sup> (p. 222).

The city of Santos would also be affected in this epidemic outbreak, but the capital of São Paulo would remain unscathed. Have health policies changed at this time in São Paulo? Certainly, legal modifications and new determinations were made, but does this mean that the Empire changed its networks of assistance? Moreover: due to the epidemic outbreaks and the existence of the Central Board, did the local sanitary practices of the other provinces and cities change?

The third and final misconception: to confuse what we understand today as health policies with what was understood as health at that time. If physicians and other health professionals were not looking for viruses and bacteria, then what were they fighting against? Well, although it was not an enemy that could be fought, in Brazil, miasmas – putrid particles that would cause infectious diseases – had become the number one enemies. Therefore, discussing *where* butcher shops should be located was part of public health. Checking the conditions of the city slaughterhouse and wiping out the swamps were as well. Establishing a cemetery away from the center, so that the dead were no longer buried by the churches, was one of the great scientific crusades that the doctors established with the parish priests. And one of the great medical concerns of the nineteenth century was the prison, one of the great urban foci of contagious diseases. The prison had been an important topic in the scientific production of one of the first important French sanitarians, René Villermé (1782-1863), and also of Brazilian law students<sup>3</sup>.

Many of these changes carried out in São Paulo concern more local idiosyncrasies, such as the peculiarities of customs, self-image, topography, riverbed (which has always been an important issue for local authorities), available money and political agreements than obedience to national legislation. There were demands, expectations, theories available to justify them, and some reward for those who supplied them. Social processes are slower and more tedious than the image of history as seen through its milestones and heroic deeds.

In this sense, this article is supposed to be disappointing and frustrating: through some of the public health themes of the time, I show the dull

trail of gradual changes, which are very little (or not at all) guided by these great temporal markers. Based on the local documentation of São Paulo, I intend to note how the local elites dealt with some primary health issues, which involved the slaughterhouse, the cemetery, butcher shops, the regulation of liquor, the control of apothecaries (today's pharmacies), healers, the flooding of the Carmo floodplain, the bed of the Tamaquateí river and the control of the prison. However, I will focus on three of them: the prison, the cemetery and the food trade.

### What was public health?

With a tone of irony, Chalhoub<sup>4</sup> states that *while infectionists and contagionists kept shouting at each other – the Central Board of Hygiene itself was divided in the early 1850s – mosquitoes continued to choose, according to their own criteria, the victims of their bloody meals, and thus entirely confused the scientific evidence of the contenders* (p. 68).

What the author intends to demonstrate here would be the patent incompetence of the “wise men” – as he then refers to physicians – in behaving like men of their time, rather than adhering to a scientific paradigm that was not yet available.

At the same time, in one of the very few studies on hygienism in São Paulo before the bacteriological era, Celestino<sup>5</sup> states that, in the period in question, *the limited scientific knowledge, especially with regard to the properties of air, allows a set of convictions, among them that emanations, or miasmas, infect the air and incubate epidemics, raising an epidemiology that would lead to an unprecedented hygienist policy for cities* (p. 8).

There would have been legal regulation through Municipal Postures to prevent “alleged miasmas” and regulate behaviors<sup>5</sup> (p. 10).

In addition to the anachronism, many times, when talking about the science of the past, researchers seem to focus on the “truth” of the virus in the face of the “lie” of miasma, and forget that science is a human knowledge that, like any other, has its legitimacy rules and depends on social agreements, also based on belief, for its support. Studies that aim to understand historical processes do not call into question the existence of God when it comes to the Crusades, they do not question the effective divinity of the thaumaturg Kings<sup>6</sup> or the factual relationship between the sorcerer and the spirits of good and evil. But, because it is science, researchers end up forgetting important cautions regarding evolutionary

thinking, which is the basis of this type of reasoning: what we know today would be *the truth* with regard to the natural world and everything that existed before would have been belief, superstition, misconceptions. Let us not forget that, at the base of science, are the strong convictions that create the resistances that promote the adherence of the researcher by training within the paradigm<sup>7</sup>.

At the end of the nineteenth century, the bacteriological paradigm prevailed, and it remains to this day. Before that, however, for more than two millennia, the environmentalist paradigm prevailed: first systematized by Hippocrates (460 BC-370 BC), reformulated by Galen of Pergamon (129 – 200?), who adapted the pneumatic theory with humoralism. It was this “galenic hippocratism”, updated in terms of the animal economy of vitalism, that would enter the nineteenth century<sup>8</sup>. Medicine was holistic and its causal relationship was multifactorial, which means that there was no disease ontology: a series of environmental, humoral and social factors could make a person sick, just as one disease could turn into another.

For public health specifically, miasmas were seen as great enemies to be fought. The preponderance of the concern with miasmas in the analysis of the healthiness of a locality began to be called into question by the statistics of the first generation of French sanitarians, among them, Louis René Villermé (1782-1863) and Alexandre Parent du-Chatelet (1790-1836). However, even though they demonstrated in their studies that, if miasms existed, they would be scientifically irrelevant<sup>9</sup> (p. 223-225), the control of these putrid particles remained the main task of sanitary engineers of the cities in the nineteenth century. Although questioned by the studies of these first hygienists who pointed out other causes for illness and death (social causes, especially poverty), the priority were reforms that removed from the city center slaughterhouses and butcher shops, desiccated swamps, and prohibited the secular custom of burying the dead inside churches.

On the other hand, Villermé became interested in the conditions of French prisons. He understood the prison as a microcosm of the city, taking it as a kind of laboratory to simulate the urban space<sup>10</sup> and its potential health problems.

Except for the idea that connected public health to social conditions, São Paulo imported all these concerns: both miasmatics, which provided for special care with urban planning, and that which concerned the situation of prisoners,

after all, in São Paulo – as in the entire Portuguese Empire –, the prison was located under the city hall, in the same building, and also served as a punctual corrective of slave infractions. In addition, the prisoners were used by the municipality as labor. Therefore, the traffic between the inside and outside of the prison was constant, and some contagious diseases, such as smallpox, measles and leprosy, had a privileged focus there<sup>11,12</sup>.

In the nineteenth century, São Paulo was known as an extremely clean city. All travelers reported the healthiness of the place. This is probably due to the city’s military ethos: it was a place of transit and residence of men in arms in the defense of the southern border of the Portuguese colony, and later, of the Brazilian Empire. Since the eighteenth century, city inspectors went around making “general corrections”, that is, they monitored cleanliness and punished filth. However, until the 1820s, this fiscalization was more about decency, ornament or even acclaim in the festivities: cleansing as a demonstration of aristocracy. With the arrival of John Charles of Oyenhausen-Gravenburg (1776-1838) to govern the captaincy, cleanliness was linked to public health: filthiness was no longer a sign of moral decay, but an obstacle to physical well-being<sup>11,13</sup>.

In addition to the fight against filthiness, the debates about the ideal location for the public cemetery, the slaughterhouse, tanneries, burials inside churches, the double ringing of church bells, the good state of food and drinks, liquor, apothecaries, are all related to public health of the time, and developed according to local occurrences and demands. These issues were dealt with between province and city, one trying to make the other financially responsible for the matter. Only in one matter did the city have to submit to the central power: the supervision by the Protomedicato and the Physicatura-mor, which effectively concerned more extortion than public zeal<sup>14</sup>.

*The care to distinguish and legitimize the different medical categories, by supervising their exercise, seems to sum up the task of the medical administration of the Kingdom towards the peoples of the colony. The Physicatura strove to keep itself close and present, through a heavy bureaucratic device, as the last instance of decision. [...] It is a question of supervising the inspectors, of punishing not only the offenders but their judges. A situation of disengagement from the administration itself, which contradicts the interests of the court, is at the origin of the determinations of the regiment [of 1744, which regulates the Physicatura-mor in Brazil]<sup>15</sup> (p. 33).*

What seems to be confirmed by the city documentation: after some repeated requests for the court to send more physicians and surgeons, on January 29, 1811, the chamber sent a request for the easing of the laws on drug regulation. There were no drug dealers in the city, so the merchants sold the drugs. Nor could a prescription be demanded from patients who came from as far away as it used to be. Councillors called for the laws to fit local health needs<sup>16</sup> (p. 345-351). Of all the tasks that concerned public health, this supervision of the arts of healing was the only one in which the city was subjected to central power. However, as I already mentioned, this relationship mostly concerned the forms of distribution of prestige and bribes within the medical categories.

Now that we know what was understood as public health concerns in the nineteenth century, we will observe the history of health care in the city of São Paulo, focusing on three main issues: the prison, the cemetery and the food trade (which involved the market, the slaughterhouse and butcher shops). In briefly recounting the tedious history of these three administrative concerns of the city, we will notice that the great historiographical milestones say little – or nothing – about the actions of the city council.

### Prison

The prison is an interesting case, as it had a much greater impact on the health of the city of São Paulo than in Paris, but the conditions were just as or even more degrading. And of course it had to be degrading to fulfill its role: as an institution of punishment, it would need to impose a situation of even greater deprivation than life outside of it, and life outside of it was a slave society. Thus, the punishment would need to be brutal<sup>13,14</sup>. Therefore, the prison was at a crossroads between what it should be according to the law and what it needed to represent structurally in a slave society. This appears in the inspection commissions – which were required by law in 1828 –, which reveals to us yet another evidence of the nullity of the chamber law with respect to the city.

Article 56 determined the following:

*At each meeting, shall be appointed a commission of at least five probate citizens, whom shall be in charge of the visitation of the civil, military, and ecclesiastical prisons, the prisons of the convents, and of all the public charitable establishments to inform of their state, and of the improvements they need<sup>17</sup>.*

Year after year, the committees were formed and the horrified accounts of the calamitous situation of the various disciplinary institutions that the house needed to examine were written. They inspected, pointed out the problems and that was all. Article 56 was being fulfilled: it was about monitoring and pointing out the needed improvements. Until the commission of September 1836 resolved the following:

*Much could be said about the natural state of each prison, mentioning its drawbacks, noting the disproportionate number of prisoners in each of them, and calling for some reform and improvement. However, we deem this useless, and we do not want to tire the attention of the House, with what so many other committees have said, and on what no action has been given<sup>18</sup> (p. 113).*

The law required reporting, and soon reports were made and filed, which did not mean any improvement was made in the institutions. The changes, on the contrary, occurred according to local desires and financial possibilities.

The prison was, according to all sources, a filthy place, a hotbed of contagious diseases and a kind of storehouse for poor individuals and slaves with problems with the law, where healthy people were mixed with individuals in an advanced stage of leprosy, whose fingers had already fallen off. Until the 1830s, they were fed once a day and not everyone could eat. Galley prisoners were used by the city as labor, as I already mentioned. At some moments of the nineteenth century they received payment for it, at other times they did not. At the times they did, they paid for their food, and therefore, when they did not work, they did not eat<sup>11,12</sup>.

The situation changes with the entry of Rafael Tobias de Aguiar (1794-1857) in 1831 and with the numerous seizures that were taking place in the prison. There were constant attempts to break-in, which, added to the climate of fear of the 1830s (due to the abdication of D. Pedro I and the enormous threat of cholera that was already in a state of pandemic), constantly demanded the attention of the chamber. Rafael Tobias de Aguiar then determined they should be fed twice a day and, during his government, there are no records of the use of galleys for municipal services. Which would return in full force at the end of the decade.

The livelihood of impoverished prisoners became a much debated subject between chamber and province in the 1840s. There was then a whole discussion about the prices of food. Galley prisoners continued to be used in works

throughout the city, but the local authorities decided to take important actions with regard to the health of the prisoners: the first of these was to make the women's prison an infirmary (there was a constant complaint on the place where the sick prisoners were cared for) in October 1848<sup>2</sup> (p. 138).

In November 1849, the mayor consulted the chamber on objects necessary for masses, such as altars, so that prisoners would not be deprived of divine assistance<sup>2</sup> and, in October of the same year, the chief surgeon João Thomas de Mello was established as responsible for the health of prisoners<sup>2</sup> (p. 190).

The correspondence between the chamber and the province on food, medicine, and medical care increased in the late 1840s. Finally, in May 1851, the details for the interior lighting of the prison were decided<sup>2</sup> (p. 291) and, in June, they decided to asphalt its interior<sup>2</sup> (p. 305). The following year, 1852, the House of Correction would appear in São Paulo, which, like the prison, would serve as a depot not only for convicts, "but also vagrants, minors, orphans, slaves, 'free' Africans."<sup>19</sup> (p. 66).

### Cemetery

The conversation about the ideal burial ground began soon after the enactment of the 1828 law and was abandoned until July 1849, a few months before the arrival of yellow fever. Therefore, although the first procedures appeared with the new legislation, little can be deduced about the resumption of this debate in the city. It was not due to the threats of yellow fever, which had not even arrived yet. And it continued to struggle after 1850, after the new change of legislation, until finally a location considered ideal was found and the cemetery was built, where it remains to this day.

One hypothesis that we can raise is that, in the face of the national turmoil of the 1830s and the local political changes of the early 1840s, added to the great problems of the prison that seemed far from being solved, the question of the cemetery was more than secondary to the local authorities. It is from a relative pacification of these themes that the conversation on cemeteries, slaughterhouses and butcher shops returned – all three establishments that, according to the public health of the time, posed a danger to the atmosphere and needed to be removed from urban centers. In 1852, a new slaughterhouse was built, further from the city center than the pre-

vious one, and, in 1858, the public cemetery was built, to prevent burial inside the churches.

Back to the beginning: in September 1829, the chamber appointed three doctors to indicate the best place to bury the dead: Justiniano de Mello Franco (1774-1839), Candido Gonçalves Gomide (1788?-1853) and Líbero Badaró (1798-1830)<sup>20</sup> (p. 139). Other commissions were appointed to deal with the diocesan bishop, to whom it probably did not seem very interesting to share his power over souls with the new medical knowledge that accused the problems of having dead bodies so close to the living. In addition to this problem, there was another one that doctors were very concerned about: the abuse in the use of bells. Improper use of the tool that heralded death, according to doctors, caused many evils:

*headache, gloom, oppression of the precordial region, anxiety, anorexia, asphyxia, low blood pressure, resulting in epileptic, hysterical and other attacks. The double ringing of the bells allegedly caused deep nervous depression, especially in Brazil 'where, due to the climatic influence, few individuals are phlegmatic, most of its inhabitants possessing a nervous temperament, which makes them very impressionable'. The bells still altered the intellectual and moral faculties, making the prudent choleric, the merry melancholic, the attentive distracted, and the polished, rude<sup>21</sup> (p. 265).*

First, the doctors tried to desacralize death, and later, directly interfere with the parish priests' communication with the city.

In May 1835, the practice was disciplined from outside the sacristy: the signs were to be brief and distinct. If it were a man, three; woman, two; minor, only one. When buried, they could not exceed nine if they were male; six if they were female, and three if they were underage. Anyone who did not respect the determinations would be "punished with eight days of imprisonment, and a fine of twenty thousand réis for each sign or double ringing of bells exceeding those marked in the same Constitution, and the double in case of recidivities"<sup>22</sup> (p. 121).

Many years passed until they spoke again with the ecclesiastical authorities about the cemetery. We have no way of knowing whether the matter was also obstructed by the resistance of the priests, but we can suspect that it was. What we can effectively say is that: in the local records, the councilors regarded other problems as having higher priority. But when the prison issues mentioned above cooled down, in July 1849, the chamber questioned the manufacturer of Matriz da Penha if it had a cemetery of its own, far from

the village, and, if not, asked them to provide a building plan in an appropriate place<sup>2</sup> (p. 175). On May 28, 1850, the chamber appointed two councilors to indicate the best place for the cemetery<sup>2</sup> (pp. 236-237).

On August 14 of the same year, the chamber wrote that, “fulfilling one of its attributions which is conferred by the 2nd paragraph of Article 66, title 3 of the law of October 1st, 1828”<sup>2</sup> (p. 249), they had the honor of communicating the designated land. The discussion on the subject resumed in the city, in the twilight of the legislation on the chamber’s responsibility regarding public health, but it was used as a legitimizing element. The discussion continued throughout the 1850s, and the cemetery began to function in 1858.

### **Food inspection, *casinhas* (little houses) and the slaughterhouse**

As I already mentioned, São Paulo was seen by travelers as a fairly clean city. Except when it came to the food trade. Saint-Hilaire mentioned that in the “*casinhas*”, where various foodstuffs were sold, one should not seek cleanliness and order<sup>23</sup> (p. 181), and the local authorities themselves noted that there was a mismatch between the practices of transportation and storage, especially regarding meat, and the conducts expected in a civilized city. Faced with the request that the rules (the so-called Postures) on meat transport be softened, the president of the province did not deem admissible *the pretension of several marchers of this city who requested the City Council to suspend the execution of the postures that prescribed cleanliness in meat-related conduct and sales. There were not, in said Postures, any unenforceable causes, let alone impossible ones, considering that their aim was to put an end to the disgusting way in which meat was transported to butcher shops and with the filth it was exposed to in them, which demonstrated no rigor from the police nor from any public health care system. The aforementioned representation was sent once again to the City Council so that they overruled it, and executed the determinations of the new Postures strictly*<sup>2</sup> (p. 145-146).

The indignation was symptomatic, since it derived out of a character from a place known for cleanliness and whose authorities legitimized themselves in power also by maintaining a salubrious environment<sup>13</sup>. And curiously, it shows the intention of bringing these elements, that were considered inadequate, to civilized urbanity: the “police” is not the repressive force that we know today, the president refers to the politeness,

civility and urbanity that was absent in the treatment of meat and that harmed the “public affair”.

The history on the inspections, control and changes of foodstuffs is marked by the Postures of 1820, going through the completion of the Municipal Market’s construction in 1867, and ending in 1887, when the third slaughterhouse of the city was opened in the nineteenth century (site currently occupied by the Cinemateca).

Until 1867, when the municipal market was completed, the *casinhas* were the most important place of trade in the city. On the same streets, there were the greengrocers, which, according to reports of the time (Saint-Hilaire is an example), would hinder traffic and cause turmoil and filth.

They were strongly supervised, and, although the supervision could not curb the presence of the greengrocers and fully discipline the space, they still made themselves present<sup>24</sup>. The first set of Postures of the nineteenth century transcribed in the documentation of the chamber, in 1820, presented three items in this regard: the 7th said that street vendors of groceries and genera were obliged to declare what they sold; the 11th specified that street vendors should have specific measures, with a fine of six thousand *réis* in the case of noncompliance; and the 14th gave the control of street vendors and genera sold in the houses to an inspector. In 1830, a new set of Postures made the punishment heavier for those who falsified the weights and measures and sold corrupted or falsified genres: four to eight days in prison<sup>11,13</sup>.

In 1838, the Postures regarding street fairs appeared: they were to be held on commercial days, starting at 7 am, in Carmo Square. The Postures ensured that there would be an inspector to ascertain the state of the exposed genera and also the accuracy of the weighings, and in addition to that, the chamber itself would provide weighings and measurements free of charge<sup>25</sup> (p. 148-149).

With the growth of the city, the slaughterhouse near the Jacaréi river became insufficient, and in the 1840s, along with the analysis of the best place for the cemetery, they began to evaluate which would be the best place for the slaughterhouse. They concluded it should be built on Humaitá Street, next to the Anhangabaú (currently May 23rd Street), and designed by the engineer Bresser for 12: 8000\$000<sup>2</sup> (p. 164), work completed in 1852.

At the end of the decade, the construction of the municipal market began, which was then paralyzed, resumed in 1865 and finished in 1867<sup>5</sup> (p. 106). It was sought to put an end to the eternal problem with the ambulants and bring São

Paulo to modernity also in terms of the food market. However, both the slaughterhouse and the market would prove themselves insufficient in a relatively short time: a new slaughterhouse in Vila Mariana would be built in 1887, and the construction of a new municipal market would be concluded in 1933. The authorities could not predict the speed of the city's growth at the end of the nineteenth century, and even less in the following century.

### Final considerations

São Paulo had other important public health issues besides those shown here: the city suffered greatly from the floods of the Carmo floodplain and the Tamanduateí river. There are many indications of attempts at desiccation, rectification, grounding and plumbing during the nineteenth century. The chamber also began to inspect the apothecaries after 1828. They also began to pay special attention to liquor in the 1840s. However, when I highlight the three aspects I chose, focusing between 1820 and 1870, we see that the social processes that concerned public health in the nineteenth century were not linked to the great milestones. To understand these processes, it is necessary to take into account the documentation of everyday life.

Attention to the prison varied according to the social fears or humanitarian values of the president of the province. At times, prisoners were subjected to the most brutal deprivations, including food. At other times, due to the riots and to Rafael Tobias de Aguiar's stances, it was sought to alleviate the food shortages of the prisoners to some extent, sparing them from being used as galleys in urban reforms. At another time, they were once again used as galleys, although further prison renovations would still be carried

out. But all this was due to internal issues of the city of São Paulo, and not to legal or central power determinations.

The same can be said with regard to the cemetery, which had more to do with the deal between the public administration and the local parish priest than with any designations from the court. It is true that the discussion appears in the documentation of the city shortly after the legislation of 1828, but it only resumes a few years before 1850. Discussions advanced before the Central Board, and the cemetery was finished in 1858. That is: years before the Board, public administrators began to settle matters with the ecclesiastical authorities, an action that would dismiss future Postures from the Board in this regard.

As for food, the *casinhas* were the object of concern and supervision from as early as 1820, when the Postures already brought regulations that concerned them. The other important decisions of the city were the Postures on the fairs of 1838, the construction of the new slaughterhouse on Humaitá street in 1852, the completion of the new market in 1867, and the construction of the new slaughterhouse that would replace the one on Humaitá street in 1887. All these changes were due to the social processes and city growth: the need to regulate the items sold to an increasingly larger consumer market, organize the sale in larger spaces, as well as move the slaughterhouse – understood as pernicious to public health due to the exhalation of miasmas – out of the city. However, due to the city's growth, places that once were secluded from the city eventually are no longer, which made it necessary to choose another place, even further away. Again: the Central Board of Hygiene had no relevance whatsoever in this process. And this, as well as the other topics addressed in this article, was a first-order public health concern in the nineteenth century; however strange it might seem today.



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