

Nursing in the Sardinian-Piedmontese Army during the Crimean War

L'assistenza infermieristica nell'esercito sardo-piemontese durante la Guerra di Crimea

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ABSTRACT

Contemporary history considers the Crimean War one of the most important European military campaign between the Napoleonic Wars and World War I. For the history of nursing this is an historical landmark, where, thanks to Florence Nightingale, the professional nursing was born. At the moment, the organization of health care and nursing of the Sardinian Piedmontese Army has not been the subject of extensive study. This report is meant to start the analysis of their commitment.

Through analysis of primary historical sources, we would like to highlight the role of healthcare and nursing in the Sardinian-Piedmontese Army starting from 1855, during the Crimean War.

We have analyzed the records stored in the archive of the Ispettorato Generale (part of the Ministry of War) in Turin and the reports by Army chief physician Dr. Comisetti, as well as the surveys in the archive of the Sisters of Charity at the convent of San Salvato in Turin, the letters of Florence Nightingale and the French doctors' testimonies. So we were able to shed light on the people involved in assistance and healthcare in the Sardinian -Piedmontese Army.

A new, unprecedented historical research has shown the dedication and the daily work of male military personnel and religious during the Crimean War, a new aspect during this war that of what would later become the basis of the profession nursing

Key words: Nursing History, Crimean War, Sardinian-Piedmontese Army.

RIASSUNTO

La guerra di Crimea è considerata dagli storici moderni una tra le maggiori campagne militari europee tra le due guerre napoleoniche e la prima guerra mondiale. Per la storia dell'assistenza infermieristica è una pietra miliare, in cui, grazie a Florence Nightingale, la professione nacque. L'organizzazione sanitaria e l'assistenza infermieristica dell'esercito Sardo Piemontese, ad ora non è stata oggetto di studio approfondito. Con questo lavoro si intende avviare l'analisi dell'argomento.

Attraverso l'analisi delle fonti storiche primarie vorremmo sottolineare il ruolo dell'assistenza sanitaria e infermieristica nell'esercito sardo-piemontese, che è stato coinvolto nella guerra di Crimea nel 1855.

Attraverso un'attenta analisi dei record conservati nell'archivio dell'Ispettorato di Torino e le relazioni del capo medico dell'esercito Dr. Comisetti, nonché delle indagini nell'archivio delle Suore della Carità presso il convento di San Salvato a Torino, delle lettere di Florence Nightingale e delle testimonianze dei medici francesi, siamo stati in grado di far luce sulle persone coinvolte nell'assistenza, sulla salute e sulla mortalità dell'esercito Sardo Piemontese nella Guerra di Crimea.

Una nuova visione all'interno di questo evento bellico dimostra la dedizione e il lavoro quotidiano assistenziale del personale maschile militare e delle religiose durante la guerra di Crimea, un aspetto poco conosciuto durante un evento bellico che diventerà una delle basi della professione infermieristica.

Parole Chiave: Storia dell'assistenza infermieristica, Guerra di Crimea, Esercito sardo piemontese.

INTRODUCTION

Modern historians consider the Crimean War as the most important European military campaign between the Napoleonic Wars and World War I. This was also a period of socio-cultural and technological

changes, involving many aspects of society.

The Crimean War has been a crucial step in the history of the Unification of Italy. Camillo Benso Count of Cavour (Prime Minister of what would later become the Kingdom of Italy) saw in it an opportunity for drawing the national aspirations of the peoples living in the Italian peninsula to the attention of European governments. This was the political reason why the Sardinian-Piedmontese Army took part in this conflict.

The Crimean War opposed the Ottoman Empire together with a coalition of European nations inclu-

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ding Britain, France and the Kingdom of Sardinia—hereafter referred to as "Allies" — against the Russian Empire. The war last from 1853 until 1856. It was fought in the Baltic Sea and the Black Sea. It represented the key moment of the so-called "Eastern Question" which highlighted all the political and military events linked to the progressive weakening of the Ottoman Empire.

The war initiated by the Zar of Russia, Nicholas I, who claimed to defend the Christian Orthodox communities living in Eastern Europe (the so-called "holy places"). It was clear that this noble purpose hid the will to dominate the Black Sea and the Straits of Bosphorus and Dardanelles and to conquer the European territories that were part of the Ottoman Empire. Britain and France found their common interest in their will to preserve the trade route in the Mediterranean, therefore wanting to prevent the expansion of Russia and to preserve the Ottoman Empire.

The war started with the Russian invasion, in July 1853, in the Turkish provinces of Moldavia and Wallachia. England and France supported Turkey and in April, 1854 they sent their first troops. The war took place mainly on the Crimean Peninsula and, in particular, Sevastopol, a strategically important city in this area.

As a whole, The Crimean campaign is characterized by a disastrous level of incompetence and unpreparedness.

The Allies realized that they had a many serious problems, such as the availability of supplies, the difference in climate and terrain, the lack of an efficient military intelligence and huge epidemics of cholera that affected armies since July 1854.

Since April 1854, the Kingdom of Sardinia had been involved in negotiations with Britain and France for a possible intervention.

Prime Minister Cavour saw in that the opportunity of bringing the attention of European governments on the idea of Italy unification. He knew that he needed strong alliances with the European powers to fight against the powers who controlled most of the Italian peninsula, in particular against the Austrian Empire. Sitting at the peace table after this conflict, he thought, would put them in the position of asking for help in this matter.

The Sardinian-Piedmontese contingent arrived in Crimea on May 8, 1855, under the command of General Alfonso La Marmora, to participate in the second year of the conflict.

As we all know, during the Crimean War, Florence Nightingale laid the foundations for her innovations in nursing and the use of quantitative methods as a tool for health choices. This was the beginning of the professionalization of nursing.

The Sardinian soldiers were assisted (since the beginning of the war, unlike the British Army) by the male nurse corps and by the Sisters of Charity of St. Vincent de Paul. These nuns were involved in the care for the sick, but also in the management of kitchens, laundries and medicines.

Historical literature has been less attention about contribution of the protagonists of nursing Sardinian Piedmontese Army that Nurses Italian, both male nurse corps and the Vincentian Sisters who have provided in curing the disease, in daily care and the health organization. The Sisters impressed Florence Nightingale so much that she wrote in the preface for the Italian translation of the book "Notes of Nursing": "My opinion, based on my personal experience, is that the Italian Women have a special attitude towards the care for the sick. This opinion comes from the observation of the San Vincenzo de 'Paoli Italian Sisters while attached to the Sardinian troops in Crimea".

AIM OF THE STUDY

The purpose of this work is to describe the military health organization in the Sardinian-Piedmontese Army during the Crimean War, from May 1855 to June 1856, with particular reference to nursing duties and management Hospitals. In particular we decide to study the military male nurse corps, who were included in the military hierarchy of the Army, the Sisters of Charity and the epidemiological context within which they were to operate.

METHODOLOGY AND FINDINGS

Our study starts with referrals to secondary sources on the Crimean War, Sardinian Piedmontese Army and their health organization have been used to understand the historical issues. We have also analysed some primary sources, such as documents by the Ispettorato Generale found in Army Archives in Rome and Turin and Sister of Charity Archives in Turin and Paris.

We started with a careful analysis of the records stored in the archive of the Ispettorato in Turin and the reports by army chief physician Dr. Comisetti, the surveys in the archive of the Sisters of Charity at the convent of San Salvato in Turin, the letters of Florence Nightingale and the French doctors' testimonies. So we were able to shed light on the people involved in assistance, health and mortality of Piedmontese-Sardinian Army.

The organization and the health care greatly influenced the French Army, thanks to the cultural and linguistic affinity of these two nations.

In January 1856 there were a total of 128 doctors; among them one Physician in Chief, Dr. Antonio Comissetti. The Doctors were divided into first and second class divisional Doctors, regiment Doctors and Battalion physicians. The total ratio was of about one to every 145 soldiers.

The official reports do not show a hierarchical distinction between surgeons and physicians, although they had distinct tasks and activities in the field.

Health facilities were divided into general hospitals (away from enemy fire, with, on average, 500 beds), hospitals, temporary hospitals (with the army, with 100 to 600 beds) and infirmaries (point of first response, near places of combat with 40 beds).

The hospitals, built in stages, were:

- First General Hospital on the Bosphorus
- Second General Hospital on the Bosphorus
- First Navy Hospital of 600 beds in the Crimea
- Second Naval Hospital of 600 beds in the Crimea
- Temporary Hospital of 400 beds in Balaclava
- Military Infirmary in Kamara
- Safe Infirmary of 40 beds of Balaclava

Number	Type	Location	Bed
2	General Hospital	Bosphorous	500
2	Navy Hospital	Crimea	600
1	Temporary Hospital	Balaclava	400
1	Military Infirmary	Kamara	40
1	Safe Infirmary	Balaclava	40

Tab. 1 Sardinian Piedmontese Hospitals Location

Each division was equipped with five ambulance carts containing materials such as first aid dressings sufficient for treating 2000 soldiers. In addition, each division possessed ambulances, larger, mule-drawn carts, containing surgical instruments, equipment and materials for dressings.

These vehicles were used for the transport of the wounded and the sick. They could take up four lying and three sitting people.

The military male nurse corps was included in the military hierarchy. However, the files of the Ispettorato show that, unlike doctors and vets, male nurses were placed in the departments of the administrative staff with the grades of officers and soldiers.

The male nursing staff was a total of 451 units (about one in every 41 soldiers) including 19 officers. Of these, 74 were returned to Piedmont in the first month due to illness, 55 died during the campaign and 2 officers and 2 soldiers were removed from the mili-

tary due to court sentences.

The official activities of the male nurses were mostly administrative, supply and hospital management, while the soldiers assisted in nursing interventions and treatments.

The reports indicate that there was a serious shortage in the first nursing support. Therefore convalescent or wounded soldiers or those unfit for combat, were used. Because of theft and disservice, this choice caused great disasters for the assistance to the sick and for the distribution of foodstuffs.

The Savoy expedition in Crimea was also accompanied by female nurses, the Sisters of Charity of St. Vincenzo de' Paoli, just like the French Army.

Female nurses were all part of a religious order, while male nurses were soldiers.

In Turin, the Sisters of Charity had arrived in 1833 on the invitation of King Carlo Alberto, who gave them the monastery of Saint Salvario. The idea was of Blessed Marcantonio Durando, local superior of the Vincenzians and brother of Giacomo Durando, Minister of War.

Marcantonio Durando, saw the usefulness of introducing the Sisters of Charity into Northern Italy. The Sisters had been dispersed during the French Revolution and had just begun to re-organize. The idea of Father Durando was to use the aid of these communities of sisters. Immediately after their arrival from France, the Sisters of Charity began to assume the responsibilities of various hospitals, both military (in Turin and Genoa) and civilian (in Carignano, Turin and Castellamonte).

The first contingent of 18,000 soldiers left Marseille on April 14th, 1855 and arrived in the Crimea on May 5th. This first expedition was accompanied by 28 nuns. During the campaign, more nuns arrived totalling 64. Their mean age was thirty years (the youngest was 23 and the oldest 46 years old). Most of them were from the Italian Peninsula (mainly Piedmont, but also Liguria, Tuscany and Lombardy) while 7 of them came from France.

Their selection was made by the General Inspector of the religious order. He evaluated their physical fitness (endurance of fatigue and health), but also the psychological (dedication, obedience, courage and discretion) and cultural (the ability to write and read in Italian and French, math skills, apprenticeship and training at military hospitals) capabilities.

Fifteen nuns died in the Crimea and another five

Male military nurses	Male military nurses returned at home	Male military nurses died	Sisters of Charity	Sisters of Charity returned or died
451	74	44	64	20

Tab. 2 Sardinian-Piedmontese nurses during the Crimean War

once back to their monasteries, because of diseases contracted during the War.

Their Superioress was the Countess Cordero de Vonzò Elena Maria Giulia. She was born in Mondovì (near Turin) in 1816. She became nurse in 1842. Before the Crimean War, she had worked at the Military Hospitals of Racconigi, Nice, Siena and Turin. After the war, she became inspector in Siena and then in Naples. We could not find much news about her works. Her name appeared in a letter written in 1859 by Florence Nightingale to Lady Canning, where she is called as "one of the most remarkable women it has ever been my good fortune to know".

The primary activity of the Sisters was to co-ordinate the male nurses' work in the hospitals (akin to what now is the duty of the Head Sister). They also supervised the distribution of food, laundry, kitchens, cleaning and medicines.

The male nursing corps operated in all hospitals and first aid points in the battlefields, unlike the Sisters of Charity who were only in the Hospitals.

Their management and coordination activities are very similar to what Florence Nightingale described as the main activity of modern nurses. What Nightingale didn't agree on, though, was their membership of a religious order.

British Army lacked in fact, of a male military nurse corps, There were orderlies, attendant without any qualification. Only through direct knowledge they could become an assistant ward to help young doctors. Florence Nightingale achieved main measures: for example, as the Sister of Charity, the female nurses were responsible as head sister. In the British Army female

nurses were secular or belonging to different religions (Catholic or Anglican). She managed the shifts of the attendants, she instructed the women who accompanied the Army as soldier's wife in order to take care of laundry and kitchens. The measures most remarkable were those of collect data weekly on mortality and sick broken down by military units.

The Sardinian Piedmontese Sisters of Charity are often cited as an example of skill and dedication. In his report, the chief French doctor wrote "The Piedmontese have an advantage over us [French troops], in their hospitals of war: the management of practical matters - by that I mean the venues for the sick, the furniture, the kitchen, pharmacy etc.. - is entrusted to the Sisters of Charity. These cannot be replaced by men, as of the devout care. Men haven't got the same level of feelings that women have, especially Gospel women"(Dr.Scivè, 1856).

Minister Giacomo Durando, in a letter to Cavour quotes: "Miss Nightingale visited the Piedmont Hospitals to the Bosphorus, and much admired their organization. She was in the best terms with the Sisters, which she retained in high regard."(Durando, 1856).

In its report, Comisetti provides an overview on the health of the army. In June, a month after their arrival, the Sardinian Army was hit by an epidemic of cholera, with a total of 1,200 deaths, including 954 in hospital, out of about 18,000 soldiers. According to the analysis of the Head doctor, the main causes for this violent contagious outbreak was to the precariousness of the first housing as well as poor nutrition. The mortality rate of the other allied armies was considerably higher. The highest rate for zymotic disease was

Half year	Apr. – Sep. 1854			Oct.'54–Mar. 1855			Apr. – Sep. 1855			Oct. '55 – Mar. 1856		
	British	French	Sard.-Pied	British	French	Sard.-Pied	British	French	Sard.-Pied	British	French	Sard.-Pied
Hospitals in Bosphorus	★	★		★	★		★	★	★	★	★	★
Hospitals in Crimea	★	★		★	★		★	★	★	★	★	★
Point of First Aid	★	★		★	★		★	★	★	★	★	★
Male Nurses	★	★		★	★		★	★	★	★	★	★
Religious Female Nurses	★	★		★	★		★	★	★	★	★	★
Lay Female Nurses	★	★		★	★		★	★	★	★	★	★
Legend	Red star means Lack and green star means presence of the element indicated											

Tab. 3 Main Health Organization differences between the Allies (British, French and Sardinian-Piedmontese Army)

registered in June 1855, with 55.1 per thousand. In January 1855 Florence Nightingale recorded an incredible 1,022.8 for the British army.

The death trends were different among the two armies. The British Army had a relatively low rate in August 1854, and the highest rate in January 1855. This contradicts the epidemics of cholera, which is a summer disease.

It then stabilized in September 1855. The Piedmontese Army, instead, had an outbreak just after their arrival (June 1855). This was due to a bad camp location and delays in the delivery of supplies coming from Europe. The first camp, was initially located at Karani. It was overcrowded and it was built on the graveyard where the infected soldiers of the British and the French the previous winter were buried. The report states: "... almost all public buildings, as well as all sorts of healthy houses, had been previously occupied, or promised to the allies. So it was very difficult to get some space for our settlements..." (Commissetti, 1857).

Another reason Commissetti addressed for the spread of disease was low and not very nutritious food. In particular, we read: "... the Piedmontese soldiers could never get used to the British ration composed of salted beef, biscuits (indeed of poor quality), wheat flour, dried peas (unsuitable for cooking), rum, etc. ..." (Commissetti, 1857).

Sardinian-Piedmontese kitchens later became a point of reference for the other armies, with the production of fresh bread, daily administration of lemon juice against scurvy and meat being served at least twice a week.

In the official Report, the other diseases that affected the Army were typhoid fevers, dysentery, malaria and blindness, as well as trauma from gunshot and freeze. Data show that the number of deaths due to zymotic diseases had always been higher than the ones due to wounds, except for very few months. For the British Army this took place in September 1854 (Battle of Alma and the beginning of Siege in Sevastopol) and September 1855 (end of for the Siege in Sevastopol). For the Sardinian-Piedmontese Army it happened in August 1855 (Battle of Chernaya River)

CONCLUSION

The consequences of the war were not visible immediately, but become evident over time.

The Sardinian Piedmontese Kingdom prepared for the Unification of Italy. Thanks to the political leadership of the Count of Cavour, the Kingdom could participate at the peace table, appealing internationally and has managed over time to unify the Italian nation.

Thinking of epidemiological context, we could say

that there was an improvement of mortality in the British Army instead of the Sardinian Piedmontese one, but we do not know if this improvement can be attributed also to nursing activities. The comparison of mortality data coming from different sources can only give an idea of the phenomenon. It cannot be used to compare the level of nursing and health management. During the study of the East campaign, we found many variables that have not been subject to analysis for the purposes of this discussion.

On the strength of the data found, we believe that both the military male corps and the Sister of Charity have been involved in activities of nursing care and assistance (medicines and nutrition) of the sick soldiers in a context that today we could define highly complex with implications for emergency and urgent.

The Vincentian Sisters arrived experienced in the East because we could find the data about their earlier training in coordination functions. This role was crucial to guarantee the quality of the supply of sustenance of the soldiers. We have not found any proof of whether it was the Sisters of Charity who learnt from Florence Nightingale or the other way around. We could get evidence though that there was a friendship and a mutual admiration.

We could find the demonstration of their preparation in the words of Florence Nightingale who had great esteem. Doctors also realized the preparation and organization of care and they expressed a positive evaluation. Finally, the Sisters of Charity reported their experience in Italy spreading the need for nursing education in several Cities, in Italy, China and Africa. Based on the data identified, we also could observe many similarities in actions between the Sardinian Piedmontese Sisters and Florence Nightingale. Surely they should give a careful assistance and a good training, in a particular historical background and in a very difficult environment.

Compared to historical research on the Crimean War, the Sardinian-Piedmontese participation and in particular the health organization and the nursing still remains a topic undeveloped area that needs further investigation. There is still a lot of research which needs to be carried out on this matter.

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