

it possible to sketch the major aspects of the presence and effects of the plague, with the following proviso: the available information becomes more thorough and reliable the closer our own time is approached, and data is less complete and less certain the further one travels from towns and coastal regions. From the early 16th to the mid-19th century, the plague was virtually always present in at least one of the Ottoman provinces, spreading periodically over a much larger area, even the whole of the Empire. While the mortality rate of the disease was always very high—an average of three fatalities for every four patients—its intensity varied considerably: in some cases it would cause only a few deaths, then return to the same area some years later and wipe out a quarter of the population within weeks.

The 16th century is the period in which lacunae are most apparent. It is possible, however, to point to a huge pandemic in the years 1572-89, at which time the plague is found to have affected, with a few brief interruptions, the Near East as well as Egypt, Anatolia, the Balkans and North Africa. On the other hand, the plague was much in evidence during the whole of the 17th century, as is shown by these two examples: in Algiers it is recorded in 1600-2, 1605, 1606-9, 1611-3, 1620-4, 1626-7, 1630, 1639-44, 1647, 1649, 1654-61, 1665, 1673, 1675-6, 1680-3, 1686, 1689-95, 1697-1702, thus every other year on average. Cairo was affected, to a degree sufficient to have drawn the attention of the chroniclers, in 1601-3, 1619, 1620-6, 1642-4, 1667-8, 1671, 1696, thus 18 years in total. The plague was still rife in the 18th century; in 100 years, 68 years of pestilence have been recorded in Istanbul, 57 in Aegean Anatolia, 44 in Egypt, 42 in Albania-Epirus, 41 in Bosnia, 33 in Syria, 18 in Bulgaria, 45 in the Regency of Algiers and 19 in that of Tunis. Improved sources of information reveal that these epidemic instances were of limited intensity and that the deadly epidemics, those which could wipe out between one-tenth and one-third of the population of an urban area, the large cities in particular, occurred only rarely, once in each generation on average. This was the case in 1705, 1726, 1751, 1778 and 1812 in Istanbul, 1713, 1741, 1762, 1781 and 1818 in Salonica, 1718, 1733, 1762, 1787, 1812 and 1837 in Aleppo. The beginning of the 19th century was a continuation of the 18th with two great pandemics which ravaged almost the whole of the Empire in 1812-19 and 1835-38. Then, in the years 1840-44, the plague seems to have disappeared from the Ottoman Empire, with the exception of limited outbreaks in Cyrenaica in 1856-59 and in 'Irāk in 1856-9, 1874-7 and 1891-2. It emerged again in 1894, persisting for more than half a century, in African and Asian territories which were formerly Ottoman.

The plague was above all a disease affecting various species of wild rodents, which played a decisive role in the perpetuation of the disease according to a complex process, in which their fleas participated, in what used to be called the natural centres of the plague. In terms of the Ottoman Empire, this refers to Persian Kurdistan, the Libyan desert and the 'Asīr [q.v.] massif between Yemen and Hijāz. It was from these zones that the disease spread, always carried by rodents, over vast territories and long periods of time, thus forming, in the 17th and 18th centuries, temporary centres, notably in Albania-Epirus, Moldavia-Walachia, Istanbul, Anatolia and Egypt. In these centres, the epizootic disease was communicated, fortuitously, to humans through the intermediary of fleas. On becoming an epidemic disease it would subsequently be diffused, by land and sea, throughout the whole of the Empire, carried by couriers, merchants, sailors,

nomads, soldiers and fugitives—any travellers, in fact.

It is difficult to evaluate precisely the demographic effects of the plague. However, the 16th century seems to have enjoyed a fairly long epidemic remission, accounting for the relative prosperity of the population observed in Anatolia and the Near East. This came to an end in the 1580s, and the 17th and 18th centuries show an increase in the frequency of the disease, probably responsible for a stagnation of the Ottoman population taken as a whole. In its more severe manifestations, the plague also damaged economies, disrupting harvests in the countryside and commercial and industrial activities in the towns. The plague was thus one of the decisive factors behind the problems and weaknesses of the Ottoman Empire in the 18th century.

The beliefs and the behaviour of Muslims when confronted by epidemics of the plague were determined in the Middle Ages, and works of this era, especially those of Ibn Ḥaǧǧar al-'Asḳalānī in the 15th century, were regarded as authoritative in succeeding centuries. The situation changed from the early 19th century onward, with the appearance in the Near East, in 1820, of a new epidemic disease—cholera, originating in Bengal, which, spreading from Mecca, was to add its effects to those of the plague. The change came about through the influence of the Europeans resident in the Levant, who successfully applied the techniques of protection in use in Europe, and especially through the awareness on the part of rulers of Muslim states of the importance of the demographic factor in military, fiscal and economic spheres. Traditional resignation to divine will was replaced, at least in the higher echelons of the state, by a conception which sought to reconcile the *Shari'a* with modern science and the interests of the state. From the 1830s onward, the Ottoman Empire, Egypt, Tunisia and Morocco, equipped themselves with sanitary authorities and regulations, placing quarantine stations on maritime and terrestrial frontiers. These innovations were achieved with the aid of Westerners, diplomats and doctors, who saw an opportunity to enhance their influence. The rapidity of the results obtained, such that no cases of plague were recorded in the Ottoman Empire after 1844, resulted as much from the efforts of local sanitary institutions as from natural extinction of the temporary centres of the previous centuries. Later recurrences of the plague, few and of limited scope, were energetically combated.

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WABĀR, in Arabian lore a district and tribe localised in the southern part of the Arabian peninsula. Al-Bakrī, *Mu'djam*, ed. Wüstenfeld, 835, and Yākūt, *Buldān*, ed. Wüstenfeld, iv, 896, give the name

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