

Antonio Scarpa: an ethnophysician, a doctor-periodista, a disease ecologist

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Abstract. Antonio Scarpa can rightly be considered the first ethnomedical practitioner. For 55 years he travelled all over the continents and approached hundreds of ethnic groups curious to learn how they alleviated suffering through the particular practices of their traditional medical systems. During his expeditions, he collected objects, instruments, medicines and iconographic material which are now housed in the museum dedicated to him and donated to the University of Genoa. The result is a precious testimony of a medical knowledge endangered, an historical journey of man in the universe *sub specie medicinae*. The Ethnomedicine Museum, together with the activity of Genoese Anthropology, led to the establishment of the UNESCO Chair in Anthropology of Health. Biosphere and healing systems. The challenge of the Chair is to promote encounters between different interpreters of traditions and cultures of care, health and healing, starting from the recognition of cultural diversity.

Keywords: ethnomedicine, cultures, traditional practices, museum, anthropology of health

Antonio Scarpa, a physician-periodista, a curious observer

Born in Loreo, near Rovigo (Italy), on 25th March 1903, Antonio Scarpa graduated in Medicine and Surgery at the University of Padua in 1927, sustaining a thesis in Exotic Pathology and later turning to Pediatrics (Fig.1). In 1930 he was assistant at the Pediatric Clinic of the same University.

The interest in Ethnomedicine starts from a study on galactagogues and the phenomenon of *lactatio serotina* (1), which he later called *lactatio agravidica* (2), or the possibility for women from traditional populations to have their milk returned to feed newborns orphaned by mothers, through particular empirical procedures.

In 1938 he carried out the first ethnomedical expedition to Algeria and Morocco which he completed the following year with a tour of Africa (3-5).

In 1951, as Regional Director of the *Opera Nazionale Maternità e Infanzia*, he promoted a campaign

throughout Italy to disseminate a prophylactic standard against congenital hip dislocation, following the example of what is used by many people on earth.

In the meantime, the ethnomedical expeditions and missions lead Scarpa, through impervious districts of the five continents, to get to know the therapeutic habits of hundreds of ethnic groups (Fig. 2).

The Ministry of Education, on the basis of the scientific results of A. Scarpa's research, established in 1955 the *Teaching habilitation in Etnoiatria* (or Ethnomedicine), the Italian supremacy. The following year the scholar obtained the first (still the only one) teaching habilitation in ethnoiatria and started a free course in the discipline at the State University of Milan, until 1968.

In 1967 he founded, at the *Ospedale del Circolo* in Varese, the Italian Institute of Ethnoiatria and gave life to the first international magazine of Ethnomedicine: *Etnoiatria*, which after three brilliant issues will be silent due to financial difficulties.



Figure 1. Antonio Scarpa (1903 – 2000)



Figure 2. Antonio Scarpa - Tanzania

In 1980 the Institute moved to Rapallo (Ligurian Region, North Italy) and became the Italian Institute of Ethnomedicine.

At the same time, the scholar promoted important scientific and cultural events in the sector in Italy and



Figure 3. Antonio Scarpa - Ethnoiatric Group of Thailand

the *Ethnoiatric Group of Thailand* (1963) was founded in Bangkok (Fig. 3).

The last mission was carried out by Scarpa in 1992 in North Africa. But he continued his scientific activity until 1999.

Antonio Scarpa died in his house in Rapallo (near Genova) on 18 January 2000.

The teaching activities

As Antonio Scarpa's first and only pupil, it is not easy for me to go beyond the chronological facts of such an intense, long and complex life.

I met the Master in 1967, still a university student. I had the great pleasure of accompanying him on some of his scientific missions and for 26 years, weekly, I met him in his home on the Ligurian Riviera, or at the Institute of Anthropology of the University of Genoa (obviously when Scarpa was not travelling around the world) where we arranged and catalogued the very rich museum heritage he had collected over the course of over half a century (Fig. 4).

I learned from him that few sectors of human knowledge demand interdisciplinary competencies such as ethnomedicine: medical, natural, ethno-anthropological, historical, social sciences converge in defining the human universe *sub specie medicinae*. Biology-culture, scientific disciplines and the humanities have never before lost their warlike dualism in the service of health.



Figure 4. Antonio Guerri – Museo di Etnomedicina A. Scarpa

While the recent trend towards specialisation (witnessed by the emergence of ethnopharmacology, ethnobotany, ethnozoology, ethnopsychiatry, ethnopediatrics, ethnogerontology, etc.) provides more information in individual cultural competences, there is a risk of losing the overall view of the moment or therapeutic act.

The active principles of natural medicines perform and/or amplify their functions more effectively if the physician-patient relationship, or faith, or the ritual of taking them converge into a therapeutic *unicum* that is appropriate to the anthropological peculiarities and cultural expectations of the sick person. These concepts, today well known to anthropologists, were certainly less widely used in the 1940s.

The pioneers of the different disciplines are recognised as such because they combine multidisciplinary knowledge and have no mental constraints to create barriers between different knowledge. In the ethnomedical field, one of the first to contribute to the expansion of the discipline from the historical-ethnographic to the bio-medical and anthropological fields, without denying the intellectual patrimony acquired, is Antonio Scarpa himself.

Scarpa is the western physician who observes, inventories and classifies other cultures; however, he is also the scientist who tries to go beyond the classic scheme of the morbid picture: aetiology-pathogenesis-symptomatology-diagnosis-treatment. In his writings he constantly tries to highlight the limits of investigation techniques considered universal, making the contextualistic and critical model prevail in the examination of human problems (6).

Numerous are the traces proposed by him for research subsequently carried out or still to be carried out. All this in the awareness of the anthropological limits of cultural transpositions and aware that a large part of traditional medicine is the result of intuitive mental processes that proceed in the knowledge of phenomena thanks to synthetic-inductive conceptual instances: for this reason the individual is examined on the basis of a complete vision of his being / existing. And always aware that more than 3 and a half billion individuals do not use biomedicine and that they will never become users, because they are destitute.

Let me just list some of the many original research conducted by Antonio Scarpa that have attracted the attention of the international scientific world.

Results of a survey on the phenomenon of milk secretion obtained by some populations of Africa independently of puerperium (1935); surveys on galactagogues in Algeria and Morocco (1940); plants used as *anthelmities* in Africa (1942); on a probable pharmacological action of *kbellin* (7) or visamine in whooping cough (1952); on the etiopathogenesis of hystero-choreomanias in Madagascar and, in the same year, he studied the medicine of the Karen of Thailand (1963); on the use of traditional medicine to help those affected by the atomic bomb (8) in Hiroshima and Nagasaki (1971); some clinical documentation on the action of a plant extract obtained from *Plantago lanceolata* and widely used during the war in the institutions of *Opera Nazionale per la Protezione della Maternità e dell'Infanzia* (ONMI) in the province of Rovigo (1973); Chinese acupuncture equivalents (9) in historical and popular European medicine (1975); the traditional medicine of the Bafulero of Central Africa (1980); psychosomatic factors in traditional medical systems (1989); *lactatio agraavidica* in Ivory Coast (1992); new hypotheses on the origin of the “caliente” and “frio” theory in Latin America (1995).

The Museum of Ethnomedicine

The Museum of Ethnomedicine of the University of Genoa bears its name and is today *unique* in the European museum panorama (10). In fact, it is the only museum entirely dedicated to the collection,

conservation and enhancement of objects (instruments, remedies, texts, apparatus, iconographic and filmic material) linked to the different medical traditions of the world. Each object has a complex history behind it, a dense web of physiological, anatomical, linguistic, historical and cultural references that link it in an indissoluble way both to the particular culture and history from which it comes and to the general phenomenon of the human body suffering or in need of treatment.

Many of these objects have disappeared from their areas of origin, and can only be studied and admired in the rooms of the museum; others can be catalogued as true works of art; still others refer to drugs that have revealed therapeutic properties so effective that they can be considered as a true heritage of humanity.

This very rich material, which sums up the travels and 55 years of activity of this physician-periodista, curious to learn how the people of the five Continents are treated by following their traditional medicines, thanks to my insistence, was donated by my Master to the University of Genoa in 1995 and is now under the aegis of the Department of Education Sciences, University of Genoa, Italy.

The result is a precious testimony of a medical knowledge endangered, a historical journey of man in the universe *sub-specie medicine*.

Therefore, the first objective is to collect and archive. At the same time, the topicality of certain therapeutic solutions is underlined, drawing the attention of specialists to “active principles”, or to simple but effective procedures which, however “strange” they may appear, are worthy of attention, if only because they emerge from age-old observations of direct human experimentation (11). Scientific, didactic and social values represent a great resource for social and civil growth.

Conclusion

With this Museum, the only one of its kind in the world, A. Scarpa has filled a gap in the knowledge and development of Ethnomedicine (12) in the conviction of inducing a better *knowledge* and *recognition* of the contribution offered by “traditional practices” to the

progress of all those sciences that work in an attempt to alleviate human suffering (13).

In 2013 the United Nations Educational, Scientific and Cultural Organization (UNESCO) recognized the international excellence of the research conducted by the Genoese Anthropological School and the existence of the Museum of Ethnomedicine by establishing the UNESCO Chair in “Anthropology of Health. Biosphere and healing systems” at the University of Genoa (14). I am leading it with the close collaboration with the collaboration of the interdisciplinary group composed of Ezio Fulcheri, Stefania Consigliere, Anna Siri, Adine Gavazzi, Piero Coppo, Gianni Perotti e Tania Re. The Chair’s project aimed at combining a cultural need, which takes into account contemporary trends in scientific research aimed at recognizing a link between the concepts of health, the environment, and care, and the patrimonial reality of the Museum of Ethnomedicine A. Scarpa.

The challenge of the Chair is also to promote the encounter between different interpreters of traditions and cultures of care, health and healing, starting with the recognition of cultural diversity. In particular, it examines the vast context in which medical-anthropological research is developed in the area of health and wellbeing and, in order to promote social inclusion, intends to increase the channels of knowledge related to the material and immaterial anthropological and ethnographic cultural heritage, with particular attention to the traditional medicines of peoples and the preservation of their practice.

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