Curing and Inoculating Smallpox: The Career of Simeon Worlock in Paris, Brittany and Saint-Domingue in the 1770s

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Endemic in Paris and other cities, and epidemic in the countryside once or more a decade, smallpox was a major cause of death and disability in eighteenth-century France. The people who escaped the disease in their youth lived in fear of it as adults. The observation that smallpox survivors were very rarely afflicted a second time, however, raised scope for human agency. From the 1730s, Voltaire and other philosophes urged their fellow countrymen to adopt the English practice of inoculation, a procedure that provided immunity to the disease, though at some risk. In an address to the Academy of Sciences in 1754, Charles-Marie de la Condamine claimed that smallpox, when taken naturally, killed around 1 in 10, but when inoculated, killed only around 1 in 1,000. Condamine argued that since the value of inoculation was a matter of statistics the educated layman was as fit to evaluate it as the physician. After a decade of controversy, and a ban on inoculation by the Parlement of Paris in 1763, opinion became more favourable to the practice. An improved mode of inoculation, generally known as the Suttonian method after the English family of surgeons who made it into a successful business, was attracting keen interest across Europe in the late 1760s. In France, members of the ruling class, including ministers like Étienne François, duke of Choiseul and Anne Robert Jacques Turgot, used inoculation in their own families and saw its broader value in terms of a larger and healthier population. Beginning in 1768, English inoculators came to France to ply their trade. By the early 1770s, there were pockets of inoculation activity in Paris and the provinces. The decision of Louis XVI to have himself inoculated in 1774 set the seal of approval on the practice. Though common enough in aristocratic and educated circles, the practice remained limited in scale in most regions. After the turmoil of the French Revolution, there were moves to extend smallpox inoculation (technically, variolation), but after 1800 energy was directed at introducing the new practice of cowpox inoculation (vaccination).

The history of smallpox inoculation in France is well enough known in outline. In modern historiography, the work of the Annales school ensured that the study of smallpox and

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1 “la nature nous décimoit; l’art nous millésime”. Condamine, Mémoire sur l’inoculation, 54.
smallpox prophylaxis was never confined to specialists in medical history. Pierre Darmon provided the fullest account of inoculation and opened important lines of enquiry. A number of scholars have continued to be interested in the issues of morality, science and policy that made inoculation a cause célèbre of the Enlightenment. More recently, Catriona Seth has explored inoculation as a cultural phenomenon, showing how smallpox and smallpox prophylaxis drew on, refracted and fed into broader social and cultural aspirations and anxieties. A limiting feature of much of this work is its emphasis on inoculation as simply an idea in elite discourse and culture, and a tendency to overlook the instability and messiness of inoculation as a practice. This paper seeks to add to an understanding of the French experience of inoculation by examining the career of Simeon Worlock, who won celebrity through his success in curing and inoculating smallpox in Paris, Brittany and Saint-Domingue in the 1770s. All the studies of inoculation in the French-speaking world make mention of him, generally identifying him as Sutton’s father-in-law and one of the first English inoculators in France. There is some confusion and misapprehension, however, about the man, his background and connections, and the skills that brought him celebrity. A new focus on his career provides insights on smallpox therapy, the practicalities of inoculation, the role of the government and police, the operations of the medical market-place, the relationship of professional medicine and broader cultures of healing, and the role of the print media and the public sphere. It also presents some little used source material that offers new perspectives and engaging detail on the social and emotional lives of people living in the shadow of smallpox.

Born in the British colony of Antigua, Simeon Worlock had a background in commerce. Though his date of birth is not known, he was old enough in 1764 to have a daughter of marriageable age. Rachel Worlock married the substantially older William Westley, a wealthy manufacturer and exporter of textiles, in the spa-town of Bath. The marriage attracted attention: the bride was described in the Bath Chronicle as “an amiable young lady of Antigua with a fortune of £4,000.” It is hard to imagine that her father had that sort of money. By autumn 1764, Rachel was a widow. It was to her second marriage in 1767 that Worlock owed his place in history. His new son-in-law, Daniel Sutton, was the most successful of the sons of Robert Sutton, who had built a family business out of smallpox inoculation. Daniel Sutton reportedly earned 6,000 guineas from the practice in 1766 alone. The Suttonian method of inoculation was by no means new. It bundled together improvements common to many practitioners — notably less purging in preparation; making a puncture rather than an

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2 Jean-Pierre Goubert has drawn together the perspectives of Annaliste scholarship and medical history most effectively: Goubert, Malades et médecine en Bretagne.
3 Darmon, La longue traque de la variole, chaps. 4–7; Darmon, La petite vérole mortelle de Louis XV.
4 Miller, Adoption of Inoculation in England and France, chap. 8; Rusnock, Quantifying Health and Population, chap. 3; Fressoz, L’Apocalypse joyeuse, chap. 1.
5 Seth, Les rois aussi en mouraient.
6 Darmon, La longue traque de la variole, 107, 120–21; Seth, Les rois aussi en mouraient, 274; Goubert, Malades et médecine en Bretagne, 324 (where he is named ‘Werlop’); Weaver, Enslaved Healers of Saint Domingue, 52 (where he is named ‘Warlock’); McClennan, Saint Domingue in the Old Regime, 144.
7 The sources include letters in contemporary periodicals, notably L’année littéraire and Journal encyclopédique, and some longer texts, notably Gardane, Le secret des Suttons dévoilé, Sheehy, Mémoire contre Worlock, and Duboueix, “Histoire de l’Inoculation dans la ville de Nantes,” 53–78.
8 He can probably be identified with Simon Worlock of Antigua, merchant, with an interest in shipping and privatering, in 1758: London, TNA, PROB 11/903.
9 Bath Chronicle and Weekly Gazette, Jan. 19, 1764, 4.
11 The wedding took place at Chertsey, Surrey, on Aug. 28, 1767. The bride was described as “a lady whose merit and accomplishments are too great and apparent to need a panegyric.” Ipswich Journal, Aug 29, 1767.
incision; and a cooling regimen involving fresh air in convalescence. The genius of the enterprise lay in branding and publicity; a business model that combined profit from the surgical procedure, the prescription of powders and pills made up to a secret formula, the accommodation of patients, and an income from associates who bought franchises. Worlock would have seen an excellent business opportunity. Experienced practitioners in England were head-hunted in 1768 to inoculate members of the imperial family in Vienna and Catherine the Great in St Petersburg. The conditions in France likewise seemed ripe for English enterprise. A number of French notables were already having their children inoculated and there was interest in government circles in appraising the improved mode of inoculation and its utility in France.

In presenting himself as an inoculator in France, Worlock made a great deal of his relationship with Daniel Sutton.\(^\text{13}\) He presumably had some instruction in the practice and some access to Sutton’s patent medicine. Still, he does not appear in a list of Suttonian operators in 1768. Robert Sutton junior and Dr Joseph Power were listed as the associates in Paris.\(^\text{14}\) Dr Power published a work on the Sutton method for the French market in 1768 and subsequently presented certificates in Paris to support his claim to be the only authorized Suttonian practitioner.\(^\text{15}\) Joseph Sutton, another brother, openly contested Worlock’s credentials in the French capital in 1771.\(^\text{16}\) If Daniel Sutton initially supported his father-in-law, he obviously did not do so for long. Since Worlock left England precipitately, never returned, and sought naturalization as a French subject, there may be other issues involved in the rupture with the Suttons and indeed some of his own family.\(^\text{17}\) Nonetheless Worlock read the signs well and landed on his feet in France. He knew French, though sometimes he pretended he did not, had good communication skills, and was altogether more cosmopolitan than the provincial Suttons.\(^\text{18}\) On arrival in Paris, he was able to use the Sutton name to set up a meeting with Antoine de Sartine, lieutenant-general of police. Assuming that Sartine would be curious as well as cautious, he spoke in terms of demonstrating the new method and cannily asked for someone to be assigned to oversee his practice. Sartine gave the task to Inspector Buhot, who was generally responsible for keeping tabs on foreigners in Paris.\(^\text{19}\) Sartine also nominated a member of the medical faculty, Dr Gardane, to follow Worlock at a discreet distance, and learn all he could about the secrets of the Suttons.\(^\text{20}\)

In the first months, Worlock based himself at the Café Baptiste in the Rue de la Comédie Française, a haunt for English and Irish residents in Paris. In his arrangement with Sartine, Worlock was playing for the highest stakes. Inspector Buhot sought out for him a series of patients that put his mode of inoculation and his skills as a practitioner to the severest test: the sickly child of a glass-painter; a little girl who had contracted syphilis from a wet-nurse; and a priest who feared that as all his family had died of smallpox he would too.\(^\text{21}\) Interestingly, the subjects were drawn from the English-speaking community who had some familiarity with

\(^\text{13}\) The contemporary sources all state that he was Daniel Sutton’s father-in-law. Several later writers describe him as his brother-in-law, e.g. Moreau de Saint-Méry, *La partie française de l’île Saint-Domingue*, 1: 247. The confusion arose from the fact that Simeon Worlock junior, who joined him in the inoculation business in Saint-Domingue, was indeed Sutton’s brother-in-law.


\(^\text{15}\) Power, *La nouvelle méthode d’inoculer*.


\(^\text{17}\) Letters to Dr Sheehy from Richard Hays at Kensington Gore, Daniel Sutton’s business headquarters, written after Worlock’s departure from Paris in 1772, indicate that the Suttons believed that Worlock lacked expertise in inoculation and knowledge of their secrets, and that his mother, and other family members, including his son, who was seemingly left in the lurch in Paris, disapproved of his actions: Sheehy, *Mémoire contre Worlock*, 6–7.


\(^\text{19}\) *L’Année littéraire* (1770), 4: 115–16. The journal appeared in eight issues a year.


\(^\text{21}\) *L’Année littéraire* (1770), 4: 115–18.
inoculation. The glass-painter was Robert Godfrey, a skilled artist and craftsman, then employed at the palace of Versailles; the little girl’s mother lived in Godfrey’s house; and the priest was an Irishman, Father Mahon. 22 Worlock came through the test with flying colours: the procedure, it was claimed, even helped alleviate the baby’s syphilitic symptoms. Buhot was sufficiently impressed to have his only son inoculated. In the meantime the Sutton name continued to work its charm. At the Café Baptiste, Worlock met Dr Sheehy, an Irishman who had been trained in Paris and had some standing in the medical faculty. 23 In January 1770, a bare month or so after his arrival in Paris, Worlock entered a partnership with Sheehy in an inoculation house. The agreement was that Sheehy would pay the rent and costs of the enterprise and in return Worlock would pay him half of his earnings and teach him the Sutton method. To comply with the regulations, they needed a house outside the city boundary. With the permission of Sartine, Worlock began offering inoculation at a house at the Barrière de Charron, not far from the Maison de St Louis, known as Père la Chaise, the site subsequently purchased by the city for a cemetery.

Worlock found business slow at first. Physicians and surgeons regarded it as demeaning to advertise. 24 Though not a doctor, Worlock was happy to let others, including his partner, believe that he was. Still, he proved very adept at generating publicity. An anonymous letter from Lyon sought to settle doubts about the value of inoculation by referring to Worlock’s success since his arrival in Paris. It mentioned his arrangement with Sartine, his first three challenging cases, and his establishment at Père la Chaise. It concluded with a personal endorsement: “he is also modest, disinterested and skilled in the art of healing.” 25 The letter was written in April — it refers explicitly to Worlock’s work in the four months since his arrival in December — and may have been published elsewhere prior to its appearance in the August issue of the *Journal Encyclopédique*. If Worlock did not write it himself, he must have provided the information, and found someone interested in publicizing his work. A likely candidate is Élie Catherine Fréron, editor of the *Année littéraire*, and a staunch advocate of inoculation since 1755. 26 In autumn 1770, *l’Année littéraire* carried at least three articles on Worlock. The first of them, an article on Worlock’s practice of “the true Suttonian method”, dated Paris, August 20, provided more detail on his early days in Paris, the challenges set by Buhot, and Buhot’s request that Worlock inoculate his only son. It included the odd detail that Worlock claimed to be able to inoculate to produce a specific number of pustules and that this claim made him vulnerable to accusations of charlatanism. The article concluded by providing the details of the inoculation house and Worlock’s availability there every morning. 27

During summer, when inoculation was inadvisable, Worlock struggled to make a living. The appearance of smallpox, however, provided the opportunity to show his skills in managing the disease. 28 He had billeted his son and namesake, recently arrived from England, in a pension at Saint Cloud to learn French. When the teacher’s son caught smallpox, young Simeon knew enough words to tell his teacher that his father had the means to treat smallpox. Worlock was called in, gave him medicine, and rapidly brought down the fever. Worlock was presumably using the medicine used by the Suttons and other inoculators to alleviate the symptoms. He followed up by getting the boy out in to the garden as soon as possible. This cooling regimen, though standard in Britain by the 1760s, was the reverse of the traditional

22 Robert Scott Godrey was a notable glass-painter who worked at Versailles and Chaumont-sur-Loire from the late 1760s through the 1770s: Schaeper, *Leray de Chaumont*, 24–25.
26 *L’Année littéraire (1755)*, 7: 66–72.
28 Ibid., 327–33.
treatment, in which patients were kept warm to sweat out the disease. Worlock assisted several other pupils, and one of their sisters, through the disease. The opposition of one of the boys’ fathers to the new method provided the opportunity for an object lesson. The teacher sought out his pupil in the local garde-malade and found him sealed up in a small hot room with a raging fever. At the teacher’s urging, Worlock went to see the boy, but could not persuade the proprietor to defy the boy’s father by allowing him to take the air. Worlock provided some medication that assisted him, but his recovery was slow. An account of the whole proceedings appeared in a letter, dated September, in l’Année littéraire. It was presented as a follow-up to the earlier letter, in which the author had omitted to mention that the talent of the clever English surgeon was not restricted to inoculation, but extended to the treatment of smallpox in its early stages. Worlock was presented as having snatched the teacher’s son “from death’s embrace” (des bras de la mort). The letter offered to show any sceptics sealed affidavits and gave the names of the parents of the patients for further testimony. A similar intervention on behalf of the daughter of Worlock’s landlord, who came through what had appeared to be a mortal case without any marks on her face, provided a neat opportunity to refer to his house at the Barrière de Charonne. After explaining that the Sutton method was a light procedure and involved no incision, it announced that, following the August recess, inoculation was again available at his clinic.29

During October, Worlock reportedly continued to perform “prodigies more real than those attributed to Asclepius in Epidaurus and Rome.”30 Summoned to treat a four-year-old girl, he was confronted at the door by the cadaverous smell associated with a fatal case. Julie had caught smallpox on her way from the country to her grandmother’s house in Paris. Though the family physician had given up all hope of saving her, Worlock immediately gave her a dose of his special medicine and reassured her grandmother that all would be well. He arranged for the grandmother to take a house near to his own establishment and Julie was brought by carriage the next day. Despite the grandmother’s misgivings, he insisted that she take fresh air and exercise in the garden. Julie not only survived, but staged a complete recovery.31 Though the narrative in l’Année littéraire is doubtless over-drawn, its general veracity can be assumed from the high status of the people named. Julie was the daughter of Joseph Guérin de Frémicourt, a Breton nobleman, former governor of the Île de France, and commander of the port of Lorient. Her grandmother, Madame Bourceret, was well connected in Parisian high society.32 The following issue of l’Année littéraire found space for reports of more of Worlock’s “astonishing cures”, including the children of a servant of Monsieur de Méri, and a “child of quality” left in the care of Madame de Baïr, wife of the minister of the Swedish Church.33 Interestingly, the report stressed that Worlock’s mode of treating smallpox was entirely his own and had nothing to do with the Sutton method of inoculation.34 Both reports, presumably provided by Worlock or his friends, concluded with reference to Worlock’s inoculation house at Charonne and, in case of urgent need of assistance, his contact details in the city.

If some reports merit a degree of scepticism, there survive highly positive accounts of Worlock’s practice that were clearly independent of his publicity machine. The prominent member of the Parlement of Paris Étienne Pasquier called in Worlock when his pregnant wife took very ill with smallpox. Though medical opinion feared that neither the mother nor the

29 Ibid., 333.
30 L’Année littéraire, (1770), 6: 46.
31 Ibid., 46–49. Julie subsequently married the marquis de Closmades, had a large family, and survived to the ripe old age of 97.
32 Ibid., 49.
33 L’Année littéraire (1770), 7: 328–32. For Madame Ber or Baïr: Sheehy, Mémoire contre Worlock, 15.
34 Ibid., 328–33.
baby would survive, Worlock saved both of them. When he subsequently recommended inoculation of the other children, the father agreed to the treatment of the son, Étienne-Denis, but the mother would not countenance it for the daughter. In his memoirs, the son, the celebrated Chancellor Pasquier, recalled that he himself subsequently enjoyed good health but that his sister caught smallpox soon afterwards and was left badly scarred. As he explained to his readers, his mother was one of the many devout people of the age who believed that it was tempting Providence to give a child a disease that might never occur naturally. In this case, Worlock may have had no idea that his intervention had proved so consequential. In another independently documented case, he had the immediate gratification of a flattering tribute. His patient was Vivant, Baron Denon (1747-1825), an artist and favourite of Louis XV, and in later life a diplomat, antiquarian scholar and director of the national museum. Laid low by smallpox, Denon believed he was at death’s door until Worlock intervened. During his long convalescence, he sketched his saviour’s portrait, and subsequently had it engraved and printed. It included the following lines:

I was succumbing to the blows of a monster destroyer
Suddenly Worlock appears, smashes the bloody scythe
Opposes to the deadly poisons a secret benefactor
And the first effort of my trembling hand
Consecrates the features of my liberator.36

Figure 1 Dominique Vivant, Baron Denon, “Worlock, Siméon (c.1730-c.1787)”. Date: c. 1770. © Wellcome Library.

35 Pasquier, Memoirs, 2.
36 The print can be found in Paris, L’École nationale supérieure des Beaux-Arts, Inventory Est. 7928, Notice 82702, where the sitter is mistakenly identified as “Worlock, Siméon (1753-1792)”, Simeon Worlock’s son, and in London, Wellcome Library, ICV No. 6951, digital image V0006378. Author’s translation.
Despite his “astonishing cures”, Worlock found it hard to translate his success in treating smallpox into profitable business. Though there was some demand for inoculation, there was also some competition. Dr Le Camus opened a rival inoculation house at the Grand Charonne late in 1770.37 Worlock had agreed to pay Dr Sheehy half his earnings, but he was slow in handing over money. He argued that he should only pay a third, allegedly the norm in such arrangements.38 During 1771 the partnership broke down. According to Sheehy, Worlock had not honored his commitment to instruct him in the Sutton method. Sheehy began to realize that his partner had neither medical qualifications nor access to all the Sutton secrets.39 Though he inoculated in the Suttonian mode, Worlock evidently improvised, adding his own embellishments and flourishes. He insisted that his smallpox treatment had nothing to do with the Sutton method, not least perhaps because he had no wish to share his earnings from this work with Sheehy. His success in curing smallpox was perhaps largely attributable to his close attention to the infection and his ability to identify cases that appeared worse than they were. His ability to inspire confidence in his healing power played a part too. Still, his success presumably owed more than a little to the use of the powders and cooling regimen promoted by the Suttons. In 1772, Worlock abruptly left Paris, reportedly in response to a request from M. Hay de Sladz, gentleman of the bedchamber of the count of Provence, to inoculate his children in Nantes in Brittany.40 For a time, he let people believe he intended to return. Expecting the worst, Sheehy moved to protect his investment. He contacted the Suttons, who confirmed his suspicions. He prosecuted Worlock for 3,000 livres owed to him and publicized his bad faith. Worlock was required to pay some of the debt but, in his turn, sued Sheehy for defamation. The claims and counter-claims published in 1774–1775 provide important evidence about Worlock’s standing with the Suttons and his reputation in some quarters. For Sheehy and the Suttons, Worlock was a fraud and a charlatan.41

Between 1772 and 1774, Worlock was based in Brittany. The region was generally poor and backward, and served by relatively few medical men.42 In the countryside, privilege and poverty sat side by side, with the nobility of sword and robe well connected to the court and the capital and the peasantry living in relative isolation and ignorance of the wider world. By the late eighteenth century, commercial and colonial expansion sharpened the contrast by stimulating economic development and cultural change. The larger towns and ports — Rennes, the capital; Nantes, the commercial center; St Malo and Brest, major ports; and Lorient, the new naval base — prospered, drew in new commodities and ideas from the dynamic Atlantic world, and contributed to new developments in science and technology.43

Though largely unknown in the Breton countryside, inoculation was a matter of early interest in the ports and towns. The practice began in St Malo in 1766 when a former governor of the Île de France, who had presided over the inoculation of five hundred black slaves during an epidemic ten years earlier, had his eldest son inoculated.44 His successor in Mauritius was Guérin de Frémicourt, commander of the Lorient in the 1770s. It was his daughter Julie whose life Worlock saved in Paris. Julie’s grandmother, Madame de Bourceret, inoculated by Worlock, was the widow of a member of the Councill of the Île de France. M. de

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37 L’Année littéraire (1770), 8: 211.
38 Sheehy, Mémoire contre Worlock, 7.
39 ibid., 2–14.
40 Journal encyclopédique, (Jul 1774), 149; Sheehy, Mémoire contre Worlock, 5.
41 Sheehy, Mémoire contre Worlock, passim. For the image and self-image of the charlatan in early modern Europe and eighteenth-century France, see Gentilcore, Medical Charlatanism in Early Modern Italy, esp. chaps. 1–2; Brockliss and Jones, Medical World of Early Modern France, 230–37.
42 Ramsey, Professional and Popular Medicine in France, 59–60.
44 Journal de médecine, chirurgie et pharmacie 34 (1770, Jan.-June), 135–37.
Méri, who was another of Worlock’s patrons in Paris, was secretary to the Council of the Indies. It may have been no coincidence that so many of Worlock’s clients in Paris had links with Brittany and the colonies. His standing in this circle doubtless also helped him in his move to Brittany and Saint-Domingue.

After inoculating Hay de Sladz’s children in Nantes in May 1772, Worlock offered his services more generally in the town.45 M. Libault, a former mayor, had his daughter inoculated, and other townspeople sought to follow his example. According to Dr Duboueix, a resident of Clisson, the medical fraternity in Nantes had reservations about the practitioner and the practice and wished to dampen popular interest.46 Concerned that inoculation would spread infection, the authorities prohibited the practice near places of public resort, like the market and the church. Many people remained doubtful about the procedure. When M. Montaudouin, a man of academic distinction as well as a successful businessman, decided to have his son inoculated in November, the practice became decidedly fashionable: “Many pretty ladies had the glory to give an example to their sex,” Duboueix wrote, “and the commendable prudence to protect their good looks from the sad stigmata of smallpox.”47 Over the winter of 1772–1773, Worlock inoculated on some scale. He veiled his operations in an air of mystery and made a great deal of the powders in color-coded packets that he administered. Duboueix, who had tried in vain to promote inoculation in the district, was irritated by the fact that people responded so readily to an English showman and accepted his claim that he was the only person in France who knew the secret of the procedure. Following reports of mishaps fairly and unfairly attributed to Worlock, and allegations of charlatanism, in April 1773 some local notables invited Duboueix to provide independent advice. Duboueix, who had assumed that Worlock was a physician or surgeon, began to suspect otherwise when he discussed medical matters with him and witnessed his fairground showmanship. Still, Duboueix was intrigued and impressed by Worlock and proud of his own role in reassuring people about inoculation and helping to establish the practice on more solid foundations.

In the meantime, Worlock’s connections with the nobility provided another chance to demonstrate his prowess as a healer and the value of inoculation. In May 1773, he was invited by the countess d’Amilly to inoculate her two children in Rennes. Her sister, the countess of Robien, was staying in the same house, along with her adolescent daughter, who was believed to have had smallpox. Once the children were safely through the disease, Worlock returned to Nantes. When Robien’s daughter subsequently became unwell, a family friend rode to Nantes to ask Worlock to return. On his arrival, Worlock found the girl in high fever and the smallpox starting to come out. The family’s surgeon believed it to be a severe case. Worlock gave her medicine and began his regimen, and by the next day she was showing some improvement. During this time, the count of Robien, procureur-general-syndic of the Estates of Brittany, was attending the court in Versailles. Returning to his hotel in Paris, he found a letter informing him that his daughter was seriously ill with smallpox. According to the account that he wrote, in his own name, for l’Année littéraire, he set off immediately, travelling through the night to reach Rennes late the following afternoon. In narrating his homecoming, he paused for dramatic effect, inviting tender-hearted fathers to imagine his situation: he knew nothing of Worlock and his methods; he was received at the door by a somber-looking servant, the house appeared deserted, and he was sure his daughter must have died. Informed that she had gone out for a walk, he was incredulous. When his wife tried to explain the treatment, he abused her for sacrificing their daughter to an experiment. An hour passed by and his anxiety grew. Suddenly, his daughter appeared and threw herself into his arms. Though marked by smallpox,

45 Journal encyclopédique (Jul 1774), 149.
46 Duboueix, “Histoire de l’Inoculation dans la ville de Nantes”, 53–78. Dr Michel Duboueix was the pupil of a student of Dr Antoine Petit, who argued in favor of inoculation in the debates of the 1760s.
47 Duboueix, “Histoire de l’Inoculation dans la ville de Nantes,” 60.
she was on the mend. In a short time, as Worlock promised, her face cleared leaving no trace of the disease. Since he refers to Worlock’s other successes in his article, Robien probably received some encouragement and assistance in telling the tale.48 There can be little doubt, however, as to its authenticity as a tender-hearted father’s story.

During 1773–1774, Brittany experienced a “particularly deadly” smallpox epidemic.49 Fear of the disease prompted recourse to inoculation. In the port of Brest, some five or six hundred children perished. The municipal police heard that some elite families had called in Worlock to inoculate their families. Recognizing that the practice could spread the infection, they insisted that the inoculations should only take place in isolated houses outside the town. When Worlock arrived and showed them royal letters permitting him to practice, they reviewed their decision. After consulting Dr Chardon de Courcelles, physician of the navy, they relaxed their ruling and allowed Worlock to inoculate in the town as long as patients were not permitted to walk around town during the infective stage.50 Dr Duboueix’s report and the count of Robien’s article played some part in encouraging a more favorable climate of opinion. The scale of the inoculation activity was significant, but not as great as might be imagined. In a report in October 1773, Worlock referred to very many inoculations, all happy in their outcome, in and around Nantes, but only gave a figure of two hundred.51 Though also upbeat about the take-up of the practice, Duboueix likewise seems not to have inoculated on any scale. He took special pride in his inoculation of his five-year-old daughter who was lodged in the convent of the order of Fontevrault, just outside Nantes, in August. Madame du Buttay, the prioress, took an interest in inoculation and was keen to witness the operation in August, but younger nuns reportedly bewailed the fate of the little girl and regarded her father as a barbarian.52 Still, Worlock played an important role in establishing the practice of inoculation in Brittany and extending its reputation. Supporters of smallpox prophylaxis in Poitou noted Worlock’s inoculation of the children of M. d’Aubenton, intendant of the marine, in April 1774, and expressed regret that the practice was still not being taken up in their own province.53 A Breton slave-trader, who was in Nantes over winter 1773–1774, inoculated six hundred slaves during a smallpox outbreak on board ship at Zanzibar early in 1775.54 In the meantime, Louis XV’s death from smallpox in April 1774 and the successful inoculation of Louis XVI and other members of the royal family marked a turning-point in attitudes. Still, many parts of France saw little extension of the practice prior to the Revolution.55 Along with Lorraine, on the eastern border, Brittany was one of the few regions where there was significant inoculation activity.56 The profile of inoculation in the Atlantic world and its particular utility in the navy explain some of this interest. The contribution of Simeon Worlock, however, was by no means negligible. Prior to leaving Brittany, he took issue with Dr Duboueix for his rather patronizing account of his role in introducing inoculation to the region. He concluded good-humoredly: “I have opened a mine in your country, exploit it; live in peace, and don’t quarrel with neither the English nor the healers.”57

By this stage, Worlock was planning the next phase of his career. In moving to Saint-Domingue in 1774, he was returning to his Caribbean roots. His familiarity with tropical

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48 L’Année littéraire (1773), 4: 201–9.
49 Goubert, Maladies et médecine en Bretagne, 318–23.
50 Bernard, “La municipalité de Brest de 1750 à 1790,” 518.
51 Journal Encyclopédique (1774), 5, no. 1: 151.
52 Duboueix, “Histoire de l’inoculation dans la ville de Nantes,” 75–76.
53 Feyel, La presse d’information en France sous l’Ancien Régime, 1173.
54 Vernet, “La première traite française à Zanzibar,” 496–7. Unaware of Worlock’s activity in Nantes, Vernet took the view that Morice could not have learned the technique in France.
55 Darmon, La petite vérole mortelle de Louis XV, 148–54.
56 Darmon, La longue traque de la variole, 109.
57 Journal encyclopédique (1774), 5,1: 150–1.
conditions and plantation societies, he doubtless hoped, would help him make his way in the richest colony in the world. He went on the recommendation of the new naval minister, none other than Antoine Sartine, who had assisted him on his arrival in Paris in 1769 in his capacity as lieutenant-general of police.\(^{58}\) It appears, then, that he still had friends in high places and the relocation to Saint-Domingue may have enabled him to leave some troubles behind. Worlock would have known that there was a market for his expertise in Saint-Domingue. Inoculation had been known there for a decade or more.\(^{59}\) An epidemic in 1771, and a growing awareness of the advantages of the new mode of inoculation, stimulated more activity. J.-L. Polony, a physician, inoculated himself and his family in Cap-Français, and Fournier de Varenne, a planter, inoculated his slaves and wrote a short account of the method.\(^{60}\) Plantation-owners were keen to protect their investment in their slaves, and there was doubtless a market for a specialist inoculator. If expertise in smallpox management was his initial calling card, however, Worlock had larger ambitions. He inoculated on a massive scale, reportedly tens of thousands, but he invested the proceeds of his work in leases and purchases of property. With his son joining him in Saint-Domingue, he aspired to landed gentility. He was also able to establish himself in the colony as a gentleman of science. Despite his lack of medical qualifications, he was a correspondent of the Société royale de médecine in Paris, won an award for his work on an unknown disease that spread among horses in Saint-Domingue, and became a resident associate of the Cercle des Philadelphes in 1787.\(^{61}\)

Worlock remained a man of restless ambition. He cut his ties with Britain and converted to Catholicism. He petitioned Louis XVI for letters of naturalization and a salaried position in Saint-Domingue in 1779. He may have returned to France to present his petition in person in Versailles. Among the signatories to the grant was Marquis Sartine, his old patron.\(^{62}\) The nature of the connections that served him so well during his career remain a little mysterious. He may well have been a Freemason. The possibility of a visit to France in 1779 raises the intriguing possibility that he met Mesmer who was then taking Parisian society by storm. One of the last references to Worlock is as member of La Société de l’Harmonie, established in 1782 to share the secrets of Mesmerism, “essentially a joint-stock company for animal magnetism.”\(^{63}\) A letter to Mesmer from the assistant secretary of the Société in Cap-Français in 1785, reporting that Worlock had inoculated over 40,000 people in the colony, rather implies that Mesmer knew his name.\(^{64}\) If Worlock appears to have fallen on his feet in Europe’s richest colony, however, the ground was crumbling beneath him. The uprising in Saint-Domingue in 1791 brought to a sudden and violent end the old regime in the French Caribbean. Worlock, who presumably died in the late 1780s, may have prepared a bolt-hole.\(^{65}\) Simeon Worlock junior escaped to Trenton, New Jersey, in 1791. Since the young man died within a year, either he moved quickly to purchase the Bloomsbury estate or it was his father’s purchase. His wife arrived from Saint-Domingue after his death. Writing from Philadelphia, she enlisted the help of friends in commemorating him. A fine headstone and an informative epitaph mark his grave


\(^{59}\) Some of the slaves seem to have practiced a form of inoculation that they had brought from Africa: Weaver, *Enslaved Healers of Saint Domingue*, 53–54.

\(^{60}\) McClellan, *Saint Domingue in the Old Regime*, 144.

\(^{61}\) ibid., 144.

\(^{62}\) Aix-en-Provence, Archives nationales d’Outre Mer, COL E 392.

\(^{63}\) Brockliss and Jones, *Medical World of Early Modern France*, 787.

\(^{64}\) Laborie, “La Société de l’Harmonie du Cap-Français à Mesmer, 10 July 1785,” 7–81.

\(^{65}\) He cannot have been the Simeon Worlock, described as of Hanover Square, Middlesex, and deceased by February 1784, whose estate consisted solely of a longstanding claim to a sum of money held in trust: London, TNA, PROB 31/725/126.
in the First Presbyterian graveyard.66 Nothing is known of the final resting-place of the old miracle-worker.

There is much that remains obscure about the life and career of Simeon Worlock. It is possible nonetheless to add materially to the brief notices of his inoculation activity in the early 1770s. Though he was the father-in-law of Daniel Sutton, he cannot be regarded, as he has been, as an authorized Suttonian operator in France. His mode of inoculation had a family resemblance to the Sutton method, but involved improvisation and idiosyncrasies. His claim to fame in Paris was his startling success in treating smallpox patients, seemingly through his observation of the patient and early intervention using therapies, especially fresh air, associated with the new inoculation. His brio and the trust he inspired, and perhaps some good fortune, doubtless also made a difference. As he acknowledged, his methods were not always successful.67 A review of his remarkable career in France raises interesting issues with respect to the history of medicine, the medical profession, and the politics of inoculation in the early 1770s. The government, or at least the influential minister Antoin Sartine, offered protection and patronage. Worlock secured permission for an inoculation house at Charonne, attended notable families in Paris, produced royal letters in Brittany authorizing his inoculation activity, and received assistance for the move to Saint-Domingue. The blurred edges of professional status, especially outside the university circles, is evidenced by the initial assumption by Dr Sheehy in Paris and Dr Duboueix in Brittany that Worlock was a doctor, especially since there is no evidence that Worlock ever actually claimed this status. Finally, Worlock’s approach and methods reveal the limitations of regarding inoculation as a well-defined practice and its acceptance as a badge of Enlightenment. In Worlock’s hands at least, it was embedded in a broader art of healing in which wonder and miracles played as much a part as calculation and reason. Worlock’s success with curing smallpox, as Colin Jones observed in respect of Mesmer’s animal magnetism, highlights “the fragility of the philosophe claim that the age of Enlightenment was tolling the death-knell of public credulity.”68 The connection with Mesmer, however tentative, seems apposite. In his response to Dr Duboueix, Worlock refused to accept the binary divide of doctor or charlatan: “I am not a doctor, still less a charlatan;” he wrote, “I am a healer.”69

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66 Hall and Hall, History of the Presbyterian Church in Trenton, 210.
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