Nonmelanoma skin cancer killed Mattia Preti (1613–1699), the “Calabrian Knight”

Mattia Preti (Taverna, Italy 1613-Valletta, Malta 1699), also known as the “Calabrian Knight”, was an Italian Baroque painter [1,2]. Born to a noble family, he served his apprenticeship in Rome (after 1630) and later worked in Venice (between 1640 and 1646) and Naples (in the late 1650s) [1,2]. Among his mentors and exemplars are counted Caravaggio, Guercino, Guido Reni, and Domenichino. Thanks to his travels to Florence, Venice, Paris, and The Netherlands he came in contact with the art works of Luca Giordano, the Caracci, Veronese, Titian, Tintoretto, and Rubens [1,2]. In 1659, Preti's noble origins enabled his acceptance into the Order of St John of Jerusalem as a Knight of Grace in the Langue of Italy. He offered his artistic services to the Order and decorated the church of St John (1662–1666). After finishing this work Mattia Preti lived another 33 years in Malta making brief visits to Taverna and other parts of the Italy. He died aged 86 in Valletta and was buried in the Church of St. John [1,2].

Based on excerpts from the Lives of the Neapolitan Painters, Sculptors and Architects [3], Mattia Preti is described as a healthy, active and productive man with a brilliant mind until the age of 84. Preti had numerous warts on the right side of his face; the biggest wart was located on his right cheek [3]. His self-portraits show him positioned at three quarters with the left side of his face in light (Fig. 1), a choice possibly due to aesthetical purposes.

Preti's barber, an old man with shaking hands, frequently cut Preti's big wart causing repeated lesions and scars [3]. In 1697, during a shaving session, the wart was completely excised and a massive bleeding followed [3]. Daily treatments were applied over a period of two years [3]. Remedies used in cosmesis to lighten the skin, i.e. rice grains added to bath water (riz délayez en eau tiède) [4] were applied at no avail. The lesion progressed and extended from the right cheek to the right upper jaw exposing the bone and altering the shape of lower right palpebra. After two years of excruciating pain, Preti died on January 3, 1699 [3].

Excerpts report that death occurred when the disease had consumed the most noble portion of his body (the heart). His physicians attributed the death to gangrene [3]. In general, if left untreated cSCC can grow large and involve regional lymphatics. Lesions on the cheek, pinna, temple, forehead, anterior scalp, and postauricular area tend to metastasize to the parotid basin and level II lymph nodes. In the case of Mattia Preti, following the accidental removal, the skin carcinoma may have ulcerated. Whether superinfection occurred or not is unknown although no pus production was described by his physicians [3].

Mattia Preti’s body was exhumed on 11 December 1962 to mark the tercentenary of his arrival to Malta [8]. The brief report of his exhumation indicates that vertebrae and the facial bones were brittle and the skeleton was that of a man of advanced age (certainly over 60) with no evident pathological features except for some degree of osteoarthrosis [8].

Skin and soft tissue infection followed by gangrene do not allow two years survival. We surmise that Mattia Preti had a nonmelanoma skin cancer (NMSC), and more specifically, a squamous cell carcinoma of the skin (cSCC); this skin cancer is the second most common skin malignancy behind basal cell carcinoma (BCC). Verrucous variants present as raised, slowly enlarging wart-like lesions that may be locally invasive [5,6]. In the head and neck, cSCC most commonly involves the ear, frontotemporal region, and cheek, the areas of the body that are exposed to ultraviolet radiation exposure [6]. Chronic inflammation, scars and wounds are another potential source of cSCC [5] Although no clear etiology from scarring or chronic wounds exists to explain the relationship with skin cancer, possibilities include decreased immune surveillance and changes in local circulation [5]. Other risk factors include chemical exposures from tobacco, arsenic, and coal-tar products [5]. Apart from UV irradiation, Preti was also exposed to chronic inflammation due to the repeated lesions during shaving sessions [3] and to arsenic contained in pigments [7].

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Fig. 1. Mattia Preti’s self-portait, ca. 1695, oil on canvas 99 × 69 cm, Uffizi Gallery.
The underlying cause of the facial bones’ brittleness was not investigated during Preti’s exhumation in 1962. Hence, whether this condition was due to taphonomy or to metastatic bone lesions remains to be determined. Based on documentary sources [3], a cutaneous squamous cell carcinoma rather than gangrene can be assumed as the most likely cause of death of the “Calabrian Knight.”

Conflict of interest

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References


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