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ОСНОВНІ ТЕНДЕНЦІЇ РОЗВИТКУ СИСТЕМИ ОХОРОНИ ЗДОРОВ'Я ПІВНІЧНОЇ БУКОВИНИ І ХОТИНЩИНИ У МІЖВОЄННИЙ ПЕРІОД

У статті автор характеризує стан і проблеми функціонування системи охорони здоров'я Північної Буковини й Хотинщини у 1918-1940 рр. У роки Першої світової війни санітарна та лікарняна служби зазнали неоправної шкоди і мешканці краю на кілька років залишилися практично без лікарського нагляду та лікування, що призвело до поширення епідемії висипного та черевного тифу, туберкульозу, віспи, скарлатини, дизентерії, сифілісу тощо. З великими труднощами завдяки вакцинаціям населення, організаційно-просвітницьким заходам, на середину 1920-х рр. більшість масових недугів удалось подолати. Але оскільки залишалися ще деякі проблеми з поширенням скарлатини та дифтерії, а також існувала загроза зараження прикордонних районів носіями хвороб з Польщі та СРСР проводився постійний контроль за ситуацією.

Система охорони здоров'я Північної Буковини й Хотинщини до 1921 р. була майже повністю уніфікована з румунською. Але все-таки залишилася одна суттєва особливість: у всій Румунії лікування було безкоштовним, а тут – платним. Дана обставина утруднювала доступ місцевих жителів до медичної допомоги, що негативно відбивалося на демографічній ситуації і становищі мешканців краю. До позитивів у галузі можна віднести оновлення матеріально-технічної бази лікувальних установ, створення на їх основі нових філій, лабораторій та інститутів, а також розширення мережі фармацевтичних закладів.

Ключові слова: Північна Буковина, Хотинщина, хвороби, санітарний стан, гігієна, лікарня, епідемія.

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MAIN TENDENCIES OF HEALTHCARE SYSTEM DEVELOPMENT OF NORTHERN BUKOVYNA AND KHOTYN REGION DURING THE INTERWAR PERIOD

Abstract. In the article the author characterizes main tendencies of healthcare system development of Northern Bukovyna and Khotyn region in 1918-1940. Investigates the state of sanitary and hospital services, covers the problem of combating epidemic diseases. Lack of qualified and well-timed care for patients with smallpox, typhus, tuberculosis, dysentery and other diseases that became widespread after World War I, led to an increase in mortality among the population. However, over time, the normal work of medical institutions has been restored and the threat of epidemics has been eliminated, and the number of diseases and deaths has decreased significantly.

By 1921, the health care system of Northern Bukovyna and Khotyn region was almost completely in line with that in the Old Kingdom. However, the payment for treatment remained. For the most part, in 1918-1940, after receiving new equipment, continued to operate medical institutions established during the period when Bukovyna was a part of Austria-Hungary. According to the needs of time, their structure, number and qualification of medical staff was changing. New branches, laboratories and institutes were

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being opened on their basis. The pharmacy network was developing, societies of doctors and pharmacists were working, and county councils of hygiene were functioning.

While noting some of the undoubted successes in the health care system of the region during this period, it should be noted that a large number of the rural population (especially the inhabitants of mountainous areas) did not have access to medicine.

Keywords: Northern Bukovyna, Khotyn region, diseases, sanitary condition, hygiene, hospital, epidemic.

Formulation of scientific problem and its significance. The demographic situation in Northern Bukovyna and Khotyn region in the interwar period was significantly influenced by the healthcare system. Having suffered irreparable damage in 1914-1918, it could not fight the spread of epidemic diseases in the region for several years. The lack of qualified and well-timed care for patients with smallpox, typhus, tuberculosis, dysentery and other diseases that became widespread in the first postwar years resulted in an increase in mortality among the population. However, over time, the normal work of medical institutions has been restored, and the threat of epidemics has been eliminated, and the number of diseases and deaths has decreased significantly.

Analysis of recent research. Despite their importance, the state and efficiency of the healthcare system in Northern Bukovyna and Khotyn region are poorly understood. The first and at the same time the last special researches belong to the 20-30s of the 20th century. These are the works by V. Pascal¹ and C. Iubaş². Ukrainian professional scientists touched upon this topic only in fragments³. Materials from printed and unpublished sources, including, respectively, eyewitnesses' recollections, and numerous documents from the State Archives of Chernivtsi Region, provide some idea of this problem. Therefore, **the aim of our article** is to summarize the previous publications of scientists, as well as the results of the author's research work, which allow deepening our knowledge about the healthcare system of the region during the interwar period.

Presenting main material. Northern Bukovyna and Khotyn area are one of the regions of interwar Romania that suffered heavy losses as a result of the fighting of 1914-1918. The health care system was destroyed. If before the war the structure of rural and county sanitary services was insufficiently developed, the modern well-equipped hospital service operated. During the period when the region became a part of Austria-Hungary, «... hospitals were the pride of Bukovyna thanks to the buildings and modern equipment at that time, as well as thanks to the specialists who worked there»⁴, said the region's general sanitary inspector. But they were also harmed.

The medical staff of the counties consisted of a chief physician, who had a more advisory function under the prefect, as well as district village doctors, who were assigned to certain communes to provide assistance to the local population. When performing tasks, they could rely solely on their knowledge and skills, as they were left without outside help, often without even being able to consult.

By 1914, personnel were well trained to meet sanitary requirements, and during the war this was lost. All vacancies were filled, but the level of staff training left much to be desired. In the early 1920s, there was no clear subordination of doctors at different levels. If the chief physician of the county obeyed the prefect and followed his instructions, the district physicians formally obeyed both the prefect and the chief physician, and in practice – mostly to no one⁵.

Many doctors were of retirement age (they were 70 years old) and tried only to receive daily wages, but did almost nothing. 4 district doctors in Chernivtsi fell into this category. They did not perform direct duties⁶ and were fired. For two months it was not possible to find the chief doctors of the counties⁷.

There were no medical facilities to serve patients locally. Outpatient clinics and dispensaries were absent. For several years, there was an urgent need to create sanitary points in Kitsman and Seliatyn. In the latter, although a dispensary was opened, but even in the 1930s there was a lack of medicines to fight syphilis and tuberculosis⁸. Everything was complicated by the lack of vehicles for doctors⁹. Therefore, the population was left completely or partially without medical supervision¹⁰.

Sanitary legislation provided the control of disease spread. However, it was not necessary to record and isolate patients, and vaccination was carried out only at the request of the patient¹¹.

This state of affairs during the war led to a sharp deterioration in the medical and sanitary state of the region: typhus, smallpox, scarlet fever, typhoid, dysentery, tuberculosis and syphilis became widespread¹².

In most cases, these diseases took dangerous forms. The situation was complicated by the poverty of the population, ignoring of the treatment. In addition, the condition of the wells was catastrophic. Some reached half a meter deep, and their decoration consisted of rotten boards. And the source of the diseases was Galicia, from where they were transmitted to Northern Bukovyna¹³.

The most threatening scale of the epidemic was reached in Vyzhnytsia, Berehomet, Lukivtsi, Zhadova, Vashkivtsi, Stanivtsi, Bobivtsi, Broskivtsi, Orshivtsi, Kitsman, Zastavna, Kadubivtsi, Chunkiv, Khreshchatyk, and Vikno – settlements, situated in the northern and northwestern part of Bukovyna, which bordered Galicia. In general, there was not a single village or town where these diseases were not detected¹⁴.

As no separate medical statistics were kept, it was not even possible to determine the number of sick people. Data on the civil status of the population were mostly available only to clergymen of various denominations¹⁵. Each priest kept information about the dead, but it did not specify the cause of death. In addition, no commune had a register of vaccinations and their results¹⁶. The situation was also complicated by the constant reduction in the number of medical staff.

No special measures were taken to identify infectious sick people. More often sick were found by chance. At best, they were simply advised to go to the hospital. Almost nothing was done to prevent the spread of infections. The level of training and awareness of doctors was very low. There was no understanding of the need to isolate infectious sick, did not even make a differentiation between different diseases. For example, patients diagnosed with tuberculosis and typhoid kept together. The fight against syphilis was completely neglected. Real medical care was provided only by private doctors¹⁷. Training was conducted with working doctors, where it was necessary to explain the simplest things: how to detect infectious sick, how to isolate them, how to vaccinate, how to fight with lice¹⁸.

Orders from region's Sanitary Inspectorate to combat epidemics were often ignored. In most cases, sanitary condition depended only on local doctors, who were often negligent to their duties. For example, Storozhynets head doctor did not even know the way to the communes of the county, which were subordinated to him. In Radivtsi, the head doctor did nothing at all. However, one of the best was the activity of a county doctor in Vyzhnytsia¹⁹.

According to some sources, until 1921, the regional authorities did not care about the fight against epidemic diseases and did not take any measures, and «in order to give an example of them, would have to invent»²⁰. However, the Ministry of Health has demanded to solve these problems. For others – on the contrary – in early 1919 such work was carried out. In particular, in February 1919, in connection with the typhus epidemic, an order was issued to create stoves in each village for the disinfection of linen and clothing; to build baths to follow the rules of body hygiene²¹. There was a daily (except Sunday) free of charge vaccination²². Obviously, the effectiveness of the work was not at a high level, as epidemics still continued to spread. The situation is clearly illustrated by the telegram of general sanitary inspector of region to Bucharest: «Typhus and smallpox are widespread. It is impossible to do anything with that medical staff and the means of fight that were available»²³. Because of this, the relevant ministry allocated 400,000 lei and students of Medical-Military Institute to fight with epidemics, because there were not enough medical workers and not always everyone wanted to work. Students were sent 3 times in 10 people. Each shift worked for 25-30 days²⁴. A railway carriage of medicines to fight with the typhus was also transferred from Bucharest²⁵.

Important in the fight against epidemics at that time were organizational and educational works, which consisted in the development of instructions for the detection, isolation and treatment of patients. Vaccination points were organized in schools or other premises, in villages situated far from hospitals²⁶. A progressive step was the introduction of vaccination of newborns²⁷.

Leaflets were distributed in 3 languages (Romanian, German and Ukrainian) with recommendations for the population on how to avoid epidemics²⁸. County official gazettes regularly published appeals to residents describing illnesses, possible consequences, and, of course, basic treatments²⁹.

Often the main factor of success in the actions of local leadership was the speed of implementation of measures to combat the spread of infection. Sometimes churches and kindergartens were temporarily closed, and any movement of people between villages was stopped³⁰. It was often necessary to create isolators in school premises. In Storozhynets, the hospital was re-equipped as an isolator for infectious patients. Temporary sanitary points have been opened in Seliatyn, Bobivtsi, Broskivtsi, Kostyntsi,

Lashkivka, and Berehomet, ensuring that no patients would remain at home. Disinfection and vaccinations were immediately performed at the places of finding sick³¹. Thus, in January 1921 in Chernivtsi during the smallpox vaccination in one house with sick it was necessary to take precautions to all 85 of its inhabitants³².

After World War I, inns and food establishments worked without sanitary control. Since 1921, doctors have been required to conduct sanitary inspections of places of production and sale of food products³³. For this purpose in Chernivtsi there was a Hygiene Laboratory, which conducted analyzes of relevant products³⁴.

To combat the epidemics of 1921, the general director assisted in the purchase of two mobile furnaces «Bessarabia» and 1-2 sulfur fumigators «Clayton» for each county. Before that, there was no working furnace, and those 5-6 that were found were out of order.

To prevent the spread of infection from abroad, the only crossing point from Poland was Grigore Ghica-Vodă railway station (nowadays – Nepolokivtsi), where the necessary personnel and equipment for disinfection were concentrated³⁵. After the war, the station became a complete ruin. In 1921, with the help of the general director, it was reconstructed and a checkpoint and a disinfection laboratory (the best in Romania) were built there³⁶. There were locker rooms, baths, and wards for hospitalization of 40 patients, housing for doctors³⁷. Furnaces and the device for sulfurization of firm «Clayton» were established. The staff had the opportunity not only to examine and treat patients, but also potentially dangerous cargoes³⁸. For some time the transportation of old things was forbidden at all³⁹. Animals and animal products were not allowed to take with one⁴⁰.

The crossing point was used by peasants from Northern Bukovyna, who had lands in Galicia⁴¹, workers and loggers from Poland, Czechoslovakia and Germany, who were hired to work in Romania, as well as raftsmen who rafted the forest through the Cheremosh and then the Prut. If a group of more than 100 people crossed the border, they were obliged to hire a doctor at their own expense to monitor their health and provide timely treatment. Even workers from Khotyn area who were sent to work in the Old Kingdom were forced to undergo an examination in Nepolokivtsi⁴². Travelers in transit through Romania also underwent a medical examination here. In particular, in 1924 an examination of Polish Jews migrating to Palestine was conducted⁴³. From all without exception 5 lei were collected⁴⁴.

However, the doctors at the station did not always perform their duties properly. Region's general sanitary inspector in 1926 reported to Bucharest that «... the Grigore Ghica-Vodă disinfection station is a ruin, and cannot fulfill its direct health care responsibilities, but, on the contrary, it spoils the reputation of sanitary services. The chief doctor, who claimed that all the emigrants and workers were healthy, simply deceived»⁴⁵.

In order to prevent the mutual penetration of infectious diseases through the Romanian-Polish border on December 20, 1922 in Warsaw between Poland and Romania was signed the Sanitary Convention, which entered into force on August 12, 1923. According to the agreement, the parts undertook to inform immediately about the emergence of infectious diseases sources, their location, number of patients, the nature of the epidemic and the measures which were taken⁴⁶. The Polish border Ternopil and Stanisławów (nowadays – Ivano-Frankivsk) voivodeships informed General Sanitary Inspectorate on a monthly basis about the number of infectious diseases⁴⁷.

For refugees from the USSR in 1926-1927, special camps were established in Zastavna and Khotyn for a full medical examination and, if necessary, disinfection and disinsection. Identified patients were sent to nearby medical institutions⁴⁸.

In general, until 1921, the situation with epidemic diseases remained extremely difficult. Only until the mid-1920s some illnesses were largely overcome. The result of the work was almost 100% elimination of smallpox and typhus. Problems with scarlet fever, dysentery and diphtheria remained⁴⁹.

In the healthcare system of region after the war, Austrian sanitary laws continued to apply, although they no longer had not correspond the requirements of the time and, moreover, were implemented less and less. But since July 1921 in Bukovyna and Bessarabia became widespread sanitary laws forced in the Old Kingdom in 1908 and 1910⁵⁰.

According to them, the healthcare system was subordinated to general director, appointed by the Council of Ministers. Various commissions were set up to help him. A law of 1923 established the Ministry of Health. In 1926 the existing norms underwent insignificant changes⁵¹.

As of 1921, the system of sanitary service in the region was practically no different from the Old Kingdom, with the only exception that in Bukovyna and Khotyn region there was almost no free of charge treatment⁵². All patients were divided into 3 classes. First-class patients paid 75 lei per day, the second – 50 and the third – 25⁵³.

As in the whole Romania, in Bukovyna and Bessarabia, the health service covered two areas: the sanitary service and the hospital service. The first – was engaged in monitoring, control and study of hygiene locally. Used various measures to combat and prevent epidemics; conducted medical care for sick outside hospitals and explanatory work on diseases among the population. The second was in charge of hospitals.

For the functioning of the sanitary service in accordance with the administrative division in each county was the head doctor. Each county was divided into sanitary districts with district doctors at the head, who were subordinated to the head district doctors. The sanitary service covered rural districts with an average of 15,000 inhabitants and urban districts – one in every county administrative center (except for Vashkivtsi, Câmpulung and Zastavna, which together with the surrounding villages formed rural districts). Chernivtsi had 5 districts⁵⁴. The city also had a head municipal doctor⁵⁵. In total, as of November 1922, there were together with private 102 doctors in Chernivtsi⁵⁶. In 1930, there were already 225 physicians in the city, who were engaged only in private practice and 20 in the county (in Sadhora, Nepolokivtsi, Kitsman, Zastavna, Luzhany, Kostryzhivka, and Verenchanka)⁵⁷.

Each district (city or village) doctor was assisted by sanitary agents (up to 20 people per county) who were graduates of special schools. Their main responsibilities included identifying patients, providing emergency care until a doctor appeared, and supervising the treatment prescribed by the district doctor. Sanitary agents were also responsible for combating social diseases. Doctors were also assisted by district midwives with special education (up to 25 people per county). One of the obstetric schools worked at Chernivtsi maternity hospital. There were obstetricians without proper education⁵⁸. However, even in the late 1930s, there were rural settlements where the population was still left without proper medical supervision. After all, the available number of physicians could not at least a few times a month to examine the population of all the communes assigned to them⁵⁹.

The selection of medical staff took place on the basis of competitions and exams. Although in the early years it was not mandatory due to lack of candidates⁶⁰.

With the coming of Romanian government, obligatory preventive vaccination against smallpox, typhoid, dysentery, and scarlet fever was introduced by law. Necessary disinfection was carried out during the outbreak of diseases and after the elimination of their spread. By 1928, 9 sanitary points and 27 dispensaries had been opened throughout the region⁶¹.

All sanitary and hospital services of Bukovyna and Khotyn county were subordinated to the VIII sanitary zone under the management of general sanitary inspector, who had controlling, coordinating and advisory functions. Its location was in Chernivtsi⁶².

In Chernivtsi, the Inspectorate has set up warehouses with medical instruments, medicines, vaccines and medical dressings. It opened Institute of Hygiene with 2 departments (bacteriological and chemical) for caring out various laboratory tests, testing of food and beverages⁶³.

A significant contribution to the improvement of region sanitary condition was made by the hospital service, which was divided into specialized (there were only in Chernivtsi) and mixed hospitals⁶⁴. Central Hospital in Chernivtsi continued to work, which in 1921 had a department of internal medicine with 90 bed-places (later another department of internal medicine was opened)⁶⁵, 2 surgical departments – 90 and 60 bed-places, a eye department with 80 bed-places, ENT with 20, dermatological with 160 and infectious with 100. There was a children's hospital with 80 bed-places, a hospital for mentally ill with 650 bed-places and a maternity hospital. Mixed hospitals were in Storozhynets and Vyzhnytsia (both could take 80 patients at a time)⁶⁶.

Let's consider their activities in more details. In the early 1920s Central Hospital (founded in 1886) was in a terrible state. The furniture was old, unsuitable for use. The operating room was poorly equipped with tools⁶⁷. Administration staff occupied more living space than was allocated to patients⁶⁸. Because of this, there was nowhere to isolate infectious patients⁶⁹. By order of general sanitary inspector, most of the hospital's staff was transferred to other premises within 6 months, which gave possibility to use the

building stock for its intended purpose⁷⁰. In 1920 an ENT department was established here⁷¹. To provide medicines, there was a Central Regional Pharmacy, which was located in the hospital⁷². The hospital had an Antirabic Institute, founded in May 1920, and a chemical laboratory⁷³. In the mid-1930s, due to an increase in the number of cases of citizens being bitten by rabies-bearing animals, the prefectures undertook to pay 100-300 lei for tickets to the institute for examination⁷⁴. Sometimes Zootechnical Inspectorate of the Ministry of Agriculture allocated money for the examination and treatment of citizens bitten by animals⁷⁵.

Due to the lack of access of population to consultative medical care, in 1918 the command of Romanian army established the polyclinic «Queen Maria»⁷⁶.

The best medical institution in the region was Children's Hospital «Fisher», which has been working since Austro-Hungarian times. Founded at the same time, the maternity hospital (since 1929 it was called «Obstetrics Institute»)⁷⁷, was in good condition⁷⁸. In the 1930s it had 2 modern and well-equipped operating rooms, 1 examination room and 14 patient wards. A card index of examinations and medical histories of patients has been introduced⁷⁹. If in 1911-1913 there were 25 bed-places and 2 doctors, then in 1915, respectively, 75 and 5. Since 1923, there were 80 bed-places, 5 doctors and 8 assistants. In 1932 the number of places was reduced to 75⁸⁰. In 1914 were admitted 1186 patients, and in 1916 – only 184. During the war, this number decreased due to the fact that the wounded were taken here. In 1918 there were already 1135 patients, in 1922 - 1579, in 1924 – 1267. Since then there has been a steady increase every year and, thus, in 1932 there were already 1904 patients⁸¹. The growing number of patients led to a shortage of places. They had to take 2 people for one bed-place.

Surgeons of Obstetrics Institute performed mainly gynecological operations (cesarean section), but there were also cases of operations of another direction, in particular to remove cancerous tumors. Local and general anesthesia was used⁸².

In 1914-1918, the number of births performed here fell by 2.5-3 times. Since the mid-1920s although a steady increase has begun, but only in the early 1930s the highest prewar indicator – 588 successful births per year was blocked. The main problem was that the population of region, mostly peasants, did not seek medical attention, or did so in extreme cases. Because of this, the help of doctors was often delayed⁸³.

There was an obstetric school at the institute. In the 1920s, training in it consisted of two cycles – theoretical and practical (both lasted 6 months). Subsequently, the duration of the courses was increased to 2 years. The students were provided with housing at the Institute, because in addition to training, they had to be on duty with patients. In the late 1920s and 1930s, the school trained 25-35 midwives. Only during the global economic crisis, this number dropped to 10 people⁸⁴.

A number of midwives, mostly in rural areas, practiced privately (not always with the appropriate education)⁸⁵. However, this required a special permit⁸⁶.

Since 1886 Mental Illnesses Institute functioned in Chernivtsi. In 1913 it had 600 bed-places. However, the world war, which led to a shortage of food, problems with heating of the hospital, resulted into a halving of the number of patients. The condition of the equipment also deteriorated. The economic problems of Institute were partly solved at the expense of the agrarian colony, opened in Chortoryia in 1921. At first it was organized very primitively, allowing certain categories of patients, being in the fresh air by their work, to benefit the Institute. Than reorganized into a branch for the chronically ill⁸⁷. In 1921 a section of the Institute for patients with nervous diseases was opened⁸⁸.

In Chernivtsi, during the interwar period, there was a Jewish hospital maintained by the local Jewish community⁸⁹. In addition, there was a dispensary of Tuberculosis Prevention Society, a venereological outpatient clinic, 6 general dispensaries (for every medical district in Chernivtsi), 1 ophthalmological dispensary at the municipal sanitary service, 1 mixed dispensary for university students, 4 dispensaries for «Prince Mircea» society. Chernivtsi City Hall and Jewish community maintained one nursing home each. A shelter for 50 people has been opened for the homeless.

In the mid-1930s in the city there were 3 cars for transportation of patients to hospitals: 1 – property of city sanitary service (was used for transportation of infectious patients), 2 – belonged to Society of ambulance (were applied in all in other cases)⁹⁰.

There were also institutions to help orphans, canteens for the poor and 3 public baths. There were sanatoriums «Dea», «Hera» and a sanatorium named after Michael I of Romania.

There were general military and military eye hospitals in the city⁹¹.

The hospital in Vyzhnytsia was built by Bukovyna administration since 1907 to 1911. During the war, the building was almost undamaged, but medical equipment was either missing or not functioning⁹². Simultaneously with Vyzhnytsia, the similar Storozhynets Hospital was built, which, despite typical shortcomings, was the cleanest and best kept in the Inspectorate⁹³.

In the late 1920s and 1930s, there were 15 dispensaries in Storozhynets County. Well equipped were 4 of them. Others needed to improve their facilities⁹⁴.

In 1921, during a fire in Khotyn, the main building of the county hospital burned down. It was possible to build a new building only in 1935. Prior to that, the institution was located in unadapted places⁹⁵. There were also 7 smaller hospitals in Sulytsia (Novoselytsia), Lipcani, Kelmentsi, Briceni, Romankivtsi, Sokyriany and Trinca⁹⁶, and also a nursing home was opened in Khotyn⁹⁷.

If we characterize the hospital service in general, it can be noted that all medical institutions had their own premises, equipped with kitchens and dining rooms, laundries, but except for the children's hospital, none had a disinfection chamber. There was nowhere a rational disinfection system⁹⁸. X-ray machines worked only in the children's hospital. Almost everywhere there was a lack of medicines to fight social diseases (syphilis and tuberculosis)⁹⁹.

Clear gradation of qualification levels of doctors in the early 1920s was absent and staff salaries were very low¹⁰⁰. This led to the fact that, according to General Sanitary Inspect observations, «The medical staff in the hospitals resembled an army, where the generals themselves were without soldiers»¹⁰¹. Almost everywhere there were only head doctors. And some even did not go for work. Gradually the situation was corrected.

In the late 1920s, the hospital service received renovated buildings with equipment and medicine. Special rooms have been opened for the isolation of tuberculosis patients, as well as infectious diseases wards. In each hospital appeared a laboratory for clinical analysis¹⁰². The management structure of medical institutions has changed. The positions of doctor-director, head doctors in specialized departments and physicians-specialists have been introduced. However, insufficient funding remained a major problem.

The network of pharmaceutical institutions developed rapidly. Only 3 pharmacies survived World War I, but 9 new ones opened in the 1920s. Among them, the institutions of Samuel Albrecht, Joseph Hirsch, «Victoria», «At the Golden Lion», «Sanitas», «Schmidt and Foutin» were popular. All pharmacies employed from 1 to 3 people¹⁰³. At the end of Romanian rule, there were more than 10 pharmaceutical establishments in the city¹⁰⁴. There were also pharmacies in Khotyn and Sokyriany¹⁰⁵.

In the interwar period, dental services were provided to the population. According to 1920 data, dentists and technicians worked in Chernivtsi – 13, Storozhynets – 2 and Vyzhnytsia – 1¹⁰⁶.

Public baths played a supporting role in the observance of sanitary and hygienic norms by the inhabitants of the region. During the interwar period, Romanian, Sofia, and Turkish baths operated in Chernivtsi¹⁰⁷.

In Chernivtsi, Physicians Society functioned during the period under study, the charter of which was updated in 1921. It protected the interests of medical workers in various institutions, in relations with the authorities and patients¹⁰⁸. In 1921, Bukovyna Pharmacists Society was founded, the main functions of which were: the protection of interests and the assistance to members of organization and their relatives, the promotion of pharmacy¹⁰⁹.

An ancillary nature had the work of hygiene county councils, which functioned until 1925 in Chernivtsi, Kitsman, Zastavna, Storozhynets, Vyzhnytsia, Vashkivtsi and Khotyn. After the administrative reform, they were left in Chernivtsi, Storozhynets and Khotyn¹¹⁰.

According to the six-year economic development plan of Suceava district for 1939, a significant part of the funds was to go to the development of region's healthcare system, including the construction of new dispensaries, public baths, the improvement of wells condition, subsidies for growing medicinal plants and others¹¹¹. However, the plan was not implemented due to a change in the territorial affiliation of region.

Conclusions. Thus, during World War I, the healthcare system of Northern Bukovyna and Khotyn area suffered great damage. The population was left practically without medical supervision and treatment. This has led to the spread of epidemics of typhus and typhoid fever, tuberculosis, smallpox, scarlet fever, dysentery and syphilis. Until 1921, the situation remained extremely difficult. Thanks to vaccinations and organizational and educational measures in the mid-1920s, some diseases were mostly overcome.

Smallpox and typhus have been eliminated almost up to 100%. There were still some problems with scarlet fever, dysentery and diphtheria.

By 1921, the healthcare system of Northern Bukovina and Khotyn region was almost completely in line with that in the Old Kingdom. However, the payment for treatment remained. The VIII sanitary zone was created in the region under the management of the general sanitary inspector. Sanitary and hospital services were subordinated to him.

For the most part, in 1918-1940, after receiving new equipment, continued functioning medical institutions established during the period when Bukovina was a part of Austria-Hungary. According to the needs of time, their structure, number and qualification of medical staff changed. New branches, laboratories and institutes were opened on their basis. The pharmacy network developed, societies of doctors and pharmacists functioned, and county councils of hygiene functioned.

While noting some undoubted progress in the region's health care system during the mentioned period, it should be noted that a large number of the rural population (especially mountain dwellers) did not have access to medicine.

¹ V. Pascal, *Serviciul de sănătate publică în Bucovina 1918-1928* [Public Health Service in Bukovina 1918-1928], in «Zece ani dela unirea Bucovinei 1918-1928», p. 193-216.

² C. Iubaș, *Trei ani de activitate medicală (1930-1933)* [Three Years of Medical Activity (1930-1933)], Cernăuți, Tipografia Universității, 1933, 27 p.

³ О. Добржанський, Ю. Макара, О. Масан, *Хотинщина: Історичний нарис* [Khotynshchyna: Historical Essay], Чернівці, Молодий буковинець, 2002, с. 219; І. Піддубний, *Місто у міжвоєнний період* [The City in the Interwar Period], in «Чернівці: Історія і сучасність (Ювілейне видання до 600-річчя першої писемної згадки про місто)», Чернівці, Зелена Буковина, 2009, с. 193-194.

⁴ V. Pascal, *Serviciul de sănătate publică în Bucovina 1918-1928*, p. 195.

⁵ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921* [The Situation of the Sanitary Service of Bukovina in 1921], București, Cultura, 1921, p. 6.

⁶ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 9.

⁷ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 10.

⁸ Державний архів Чернівецької області (далі – ДАЧО), ф. 14 Генеральний окружний адміністративний інспекторат Буковини м. Чернівці, оп. 2, *спр. 253 Звіти про адміністративне, економічне, санітарне становище і стан культури комун Буковини на 1 листопада 1932 р.*, арк. 4.

⁹ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 60.

¹⁰ V. Pascal, *Serviciul de sănătate publică în Bucovina 1918-1928*, p. 196.

¹¹ V. Pascal, *Serviciul de sănătate publică în Bucovina 1918-1928*, p. 195.

¹² ДАЧО, ф. 18 Префектура Заставнівського повіту, оп. 1, *спр. 1602 Статистичні таблиці про епідемічні захворювання по комунах повіту за 1924-1925 рр.*, арк. 2, 7.

¹³ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 54.

¹⁴ О. Руснак, *Стан і проблеми функціонування системи медико-санітарного забезпечення населення Північної Буковини та Хотинщини у 1918-1940 рр.* [The State and the Problems of Functioning of the System of Medical and Sanitary Provision of the Population of Northern Bukovina and Khotyn Region in 1918-1940], in «Питання історії України. Збірник наукових праць», Чернівці, Технодрук, 2009, Т. 12, с. 258-259.

¹⁵ V. Pascal, *Serviciul de sănătate publică în Bucovina 1918-1928*, p. 196.

¹⁶ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 6.

¹⁷ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 7.

¹⁸ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 11.

¹⁹ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 8.

²⁰ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 52.

²¹ ДАЧО, ф. 6 Бюро президії міністра-делегата Буковини, м. Чернівці, оп. 1, *спр. 223 Рапорти і статистичні дані про епідемічні захворювання на Буковині*, арк. 1.

²² ДАЧО, ф. 6 Бюро президії міністра-делегата Буковини, м. Чернівці, оп. 1, *спр. 223 Рапорти і статистичні дані про епідемічні захворювання на Буковині*, арк. 3.

²³ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 52.

- ²⁴ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 52.
- ²⁵ ДАЧО, ф. 6 Бюро президії міністра-делегата Буковини, м. Чернівці, оп. 1, *спр.* 372 *Листування з Міністерством Громадських робіт про надання делегату Буковини Генеральною дирекцією залізниць вагонів для перевезення палива й медикаментів у зв'язку із епідемією тифу*, арк. 2.
- ²⁶ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 56.
- ²⁷ ДАЧО, ф. 286 Генеральний санітарний інспекторат Буковини м. Чернівці, оп. 1, *спр.* 138 *Статистичні звіти санітарних відділів про мешканців, які пройшли протиепідемічне щеплення від віспи*, арк. 1.
- ²⁸ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 55.
- ²⁹ *Consiliul de igienă și de ocrotire al județului Cernăuți* [The Hygiene and Protection Council of Chernivtsi County], in «Buletinul Oficial al Județului Cernăuți», Anul VIII, №5, 1 aprilie 1933, p. 24-25.
- ³⁰ ДАЧО, ф. 12 Секретаріат міністерства внутрішніх справ Буковини м. Чернівці, оп. 1, *спр.* 7492 *Листування з генеральним санітарним інспектором Буковини і субінспектором сігуранци м. Чернівці про заходи з ліквідації епідемічних захворювань у прикордонних зонах*, арк. 10, 13.
- ³¹ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 56.
- ³² ДАЧО, ф. 12 Секретаріат міністерства внутрішніх справ Буковини м. Чернівці, оп. 3, *спр.* 196 *Листування з примарією та дирекцією поліції м. Чернівці про сприяння у проведенні противіспових щеплень мешканцям міста*, арк. 1.
- ³³ ДАЧО, ф. 13 Другий міністерський Директорат Буковини, м. Чернівці, оп. 2, *спр.* 136 *Відомості про перевірку санітарного стану бакалійних магазинів та корчм у повітах за серпень 1930 р.*, арк. 1.
- ³⁴ ДАЧО, ф. 13 Другий міністерський Директорат Буковини, м. Чернівці, оп. 2, *спр.* 133 *Місячні та зведений статистичний звіт про діяльність санітарно-гігієнічної лабораторії в м. Чернівці за 1930 р.*, арк. 3.
- ³⁵ ДАЧО, ф. 12 Секретаріат міністерства внутрішніх справ Буковини м. Чернівці, оп. 1, *спр.* 7492 *Листування з генеральним санітарним інспектором Буковини і субінспектором сігуранци м. Чернівці про заходи з ліквідації епідемічних захворювань у прикордонних зонах*, арк. 13.
- ³⁶ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 12.
- ³⁷ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 13.
- ³⁸ ДАЧО, ф. 286 Генеральний санітарний інспекторат Буковини м. Чернівці, оп. 1, *спр.* 28 *Угода між Румунією та Польщею про надання взаємної допомоги в боротьбі з епідемічними захворюваннями, укладена у Варшаві 20 грудня 1922 року*, арк. 5.
- ³⁹ ДАЧО, ф. 12 Секретаріат міністерства внутрішніх справ Буковини м. Чернівці, оп. 1, *спр.* 7492 *Листування з генеральним санітарним інспектором Буковини і субінспектором сігуранци м. Чернівці про заходи з ліквідації епідемічних захворювань у прикордонних зонах*, арк. 13.
- ⁴⁰ ДАЧО, ф. 286 Генеральний санітарний інспекторат Буковини м. Чернівці, оп. 1, *спр.* 89 *Донесення прикордонного пункту Грігоре Гіка Воде і листування з міністерством внутрішніх справ та охорони здоров'я про виїзд з Польщі в Румунію польських робітників на роботу і транзит євреїв з Польщі, які емігрують в Палестину, а також про їх санітарну обробку на прикордонних пунктах*, арк. 38.
- ⁴¹ ДАЧО, ф. 12 Секретаріат міністерства внутрішніх справ Буковини м. Чернівці, оп. 1, *спр.* 7492 *Листування з генеральним санітарним інспектором Буковини і субінспектором сігуранци м. Чернівці про заходи з ліквідації епідемічних захворювань у прикордонних зонах*, арк. 13.
- ⁴² ДАЧО, ф. 286 Генеральний санітарний інспекторат Буковини м. Чернівці, оп. 1, *спр.* 170 *Директивні вказівки міністерства охорони здоров'я про санітарний огляд робітників, що прибувають з Польщі і Чехословаччини на роботу в Румунію*, арк. 3, 6, 18.
- ⁴³ ДАЧО, ф. 286 Генеральний санітарний інспекторат Буковини м. Чернівці, оп. 1, *спр.* 29 *Листування з Міністерством Охорони Здоров'я про організацію на станції Грігоре Гіка Воде санітарного огляду євреїв з Польщі, які емігрують через Румунію в Палестину*, арк. 1.
- ⁴⁴ ДАЧО, ф. 286 Генеральний санітарний інспекторат Буковини м. Чернівці, оп. 1, *спр.* 89 *Донесення прикордонного пункту Грігоре Гіка Воде і листування з міністерством внутрішніх справ та охорони здоров'я про виїзд з Польщі в Румунію польських робітників на роботу і транзит євреїв з Польщі, які емігрують в Палестину, а також про їх санітарну обробку на прикордонних пунктах*, арк. 38.
- ⁴⁵ ДАЧО, ф. 286 Генеральний санітарний інспекторат Буковини м. Чернівці, оп. 1, *спр.* 170 *Директивні вказівки міністерства охорони здоров'я про санітарний огляд робітників, що прибувають з Польщі і Чехословаччини на роботу в Румунію*, арк. 6.

⁴⁶ ДАЧО, ф. 286 Генеральний санітарний інспекторат Буковини м. Чернівці, оп. 1, *спр.* 28 *Угода між Румунією та Польщею про надання взаємної допомоги в боротьбі з епідемічними захворюваннями, укладена у Варшаві 20 грудня 1922 року*, арк. 1, 4.

⁴⁷ ДАЧО, ф. 286 Генеральний санітарний інспекторат Буковини м. Чернівці, оп. 1, *спр.* 684 *Статистичні бюлетені про епідемічні захворювання на території Тернопільського і Станіславського воєводств за 1935-1936 рр.*, арк. 1-37.

⁴⁸ ДАЧО, ф. 286 Генеральний санітарний інспекторат Буковини м. Чернівці, оп. 1, *спр.* 170 *Директивні вказівки міністерства охорони здоров'я про санітарний огляд робітників, що прибувають з Польщі і Чехословаччини на роботу в Румунію*, арк. 29.

⁴⁹ V. Pascal, *Serviciul de sănătate publică în Bucovina 1918-1928*, p. 200.

⁵⁰ О. Руснак, *Стан і проблеми функціонування системи медико-санітарного забезпечення населення Північної Буковини та Хотинщини у 1918-1940 рр.*, с. 260.

⁵¹ V. Pascal, *Serviciul de sănătate publică în Bucovina 1918-1928*, p. 197.

⁵² V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 6.

⁵³ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 23.

⁵⁴ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 6.

⁵⁵ V. Pascal, *Serviciul de sănătate publică în Bucovina 1918-1928*, p. 197.

⁵⁶ *Indice asupra numelor și locuințelor corpului medical din Cernăuți* [Index on the Names and Dwellings of the Medical Staff from Chernivtsi], Cernăuți, 1922, p. 15.

⁵⁷ ДАЧО, ф. 13 Другий міністерський Директорат Буковини, м. Чернівці, оп. 2, *спр.* 229 *Список приватних лікарів Чернівецького повіту*, арк. 11.

⁵⁸ V. Pascal, *Serviciul de sănătate publică în Bucovina 1918-1928*, p. 197.

⁵⁹ ДАЧО, ф. 19 Префектура Хотинського повіту, м. Хотин, оп. 1, *спр.* 61 *Звіт і рапорти преторів про проведення будівельних робіт по комунах і заходах із покращення сільського господарства*, арк. 2.

⁶⁰ V. Pascal, *Serviciul de sănătate publică în Bucovina 1918-1928*, p. 199.

⁶¹ О. Руснак, *Стан і проблеми функціонування системи медико-санітарного забезпечення населення Північної Буковини та Хотинщини у 1918-1940 рр.*, с. 260.

⁶² ДАЧО, ф. 286 Генеральний санітарний інспекторат Буковини м. Чернівці, оп. 1, *спр.* 46 *Протокол засідання ради гігієни Хотинського повіту*, арк. 2.

⁶³ V. Pascal, *Serviciul de sănătate publică în Bucovina 1918-1928*, p. 199.

⁶⁴ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 13.

⁶⁵ С. Loghin, *Cernăuții* [Cernivtsi], Cernăuți, Tipografia Mitropolitul Silvestru, 1936, p. 107.

⁶⁶ ДАЧО, ф. 286 Генеральний санітарний інспекторат Буковини м. Чернівці, оп. 1, *спр.* 33 *Статистичні звіти про роботу лікарень і судової медичної експертизи, підвідомчих генеральному санітарному інспектору*, арк. 1.

⁶⁷ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 23.

⁶⁸ ДАЧО, ф. 13 Другий міністерський Директорат Буковини, м. Чернівці, оп. 2, *спр.* 228 *Список лікарів центральної лікарні м. Чернівці, які мешкають у державних приміщеннях з вказуванням займаної посади, отримуваної заробітної платні та плати за квартиру*, арк. 2.

⁶⁹ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 13.

⁷⁰ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 14.

⁷¹ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 19.

⁷² V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 22.

⁷³ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 31.

⁷⁴ ДАЧО, ф. 19 Префектура Хотинського повіту, м. Хотин, оп. 1, *спр.* 48 *Копія наказу Міністерства Внутрішніх справ і циркуляри префектури про порядок надання проїзду залізницею хворим на сказ*, арк. 2.

⁷⁵ ДАЧО, ф. 19 Префектура Хотинського повіту, м. Хотин, оп. 2, *спр.* 70 *Листування з префектурою Чернівецького повіту, з примаріями Чернівецького повіту, лікарнями та жандармськими постами про матеріальне становище і стан здоров'я жителів, інтернованих у лікарні*, арк. 549.

⁷⁶ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 32.

⁷⁷ С. Iubaș, *Trei ani de activitate medicală (1930-1933)*, p. 8.

⁷⁸ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 34.

⁷⁹ С. Iubaș, *Trei ani de activitate medicală (1930-1933)*, p. 11.

⁸⁰ С. Iubaș, *Trei ani de activitate medicală (1930-1933)*, p. 9.

- ⁸¹ C. Iubaș, *Trei ani de activitate medicală (1930-1933)*, p. 12.
- ⁸² О. Руснак, *Стан і проблеми функціонування системи медико-санітарного забезпечення населення Північної Буковини та Хотинщини у 1918-1940 рр.*, с. 261.
- ⁸³ C. Iubaș, *Trei ani de activitate medicală (1930-1933)*, p. 17.
- ⁸⁴ C. Iubaș, *Trei ani de activitate medicală (1930-1933)*, p. 27.
- ⁸⁵ ДАЧО, ф. 286 Генеральний санітарний інспекторат Буковини м. Чернівці, оп. 1, *спр. 18 Книга реєстрації акушерок на Буковині*, арк. 1-9.
- ⁸⁶ ДАЧО, ф. 286 Генеральний санітарний інспекторат Буковини м. Чернівці, оп. 2, *спр. 91 Списки, заяви і листування про видачу дозволів акушеркам і ведення приватної практики*, арк. 5.
- ⁸⁷ C. Loghin, *Cernăuții*, p. 107.
- ⁸⁸ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 36.
- ⁸⁹ C. Loghin, *Cernăuții*, p. 107.
- ⁹⁰ C. Loghin, *Cernăuții*, p. 109.
- ⁹¹ C. Loghin, *Cernăuții*, p. 122.
- ⁹² V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 49.
- ⁹³ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 51.
- ⁹⁴ O. Grigorovici, *Situația Județului Storojineț pe anul 1930* [The Situation of Storojineț County for 1930], p. 11.
- ⁹⁵ О. Добржанський, Ю. Макар, О. Масан, *Хотинщина: Історичний нарис*, с. 219.
- ⁹⁶ ДАЧО, ф. 286 Генеральний санітарний інспекторат Буковини м. Чернівці, оп. 1, *спр. 83 Інвентаризаційний журнал Сокирянської лікарні Хотинського повіту на 1922/1939 рр.*, арк. 1-3.
- ⁹⁷ I. Bejenaru, *Istoria satului Dinăuți* [The History of Dinăuți Village], Chișinău, 2003, p. 107.
- ⁹⁸ V. Pascal, *Situația serviciului sanitar al Bucovinei în anul 1921*, p. 15.
- ⁹⁹ ДАЧО, ф. 14 Генеральний окружний адміністративний інспекторат Буковини м. Чернівці, оп. 2, *спр. 253 Звіти про адміністративне, економічне, санітарне становище і стан культури комун Буковини на 1 листопада 1932 р.*, арк. 4.
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