
Vladimir I. Borodulin*, Sergey P. Glyantsev*, Aleksey V. Topolyanskiy***

* The Federal Agency for Scientific Institutions’ N. A. Semashko National Public Health Research Institute 12 Vorontsovo Pole St., building 1, Moscow 105064, Russia

** The National Research Institute of Public Health of Bakoulev Scientific Center for Cardiovascular Surgery 135 Roublyevskoe Shosse, Moscow 121552, Russia

*** The Russian Ministry of Health’s A.I. Evdokimov Moscow State Medical and Stomatological University 20 Delegatskaya St., building 1, Moscow 127473, Russia

Abstract. The article is devoted to the scientific work and the tragic fate of prominent Moscow professors and cardiologists Ya.G. Etinger and V.E. Nezlin. Etinger’s book on electrocardiographic diagnosis of acute coronary artery thrombosis, small-focal and recurrent myocardial infarction and his clinical work on rheumatic heart disease and rheumatic peritonitis was high-priority, classical work. Nezlin’s books were devoted to pathology and the clinical approach to rheumatism, diagnostic possibilities using electrocardiographic methods, and clinical electrocardiographic investigation of coronary heart disease, which served as scientific and practical guidance for several generations of Soviet doctors. His monograph “Rheumatic heart disease” (1968) reflected the transition to instrumental diagnosis and a new understanding of heart defects as a now mainly surgical problem. Among the doctors closest to Etinger, were Nezlin and a renowned expert on electrocardiography, Sofia Karpai. In the late Stalin era, Etinger’s, Nezlin’s and Karpai’s names were linked to a tragic episode in the “Doctors’ case” serving Kremlin medical purposes, arrested by the KGB and rehabilitated after Stalin’s death. The authors conclude that Etinger’s and Nezlin’s scientific and medical skill level suggests that they were among the country’s leading cardiologists of the 1940s to 1960s, that is, the period that saw clinical cardiology become an independent scientific and educational discipline.

Keywords: history of cardiology, doctors’ case, rheumatism and heart disease, electrocardiography, Ya.G. Etinger, V.E. Nezlin, S.E. Karpai


The formation of cardiology as an independent scientific and educational discipline took place at the beginning of the second half of the 20th century [1]. Publications of a medical history nature that refer to this stage of development of clinical internal medicine and cardiology in the USSR (1940-60s), commonly refer to academics of the USSR Academy of Medical Sciences V.F. Zelenin, A.L. Myasnikov, M.S. Vovsi, V.Kh. Vasilenko and P.E. Lukomsy (chairman of the All-Union Scientific Society of Cardiology and, after the death of Myasnikov, editor of the journal Cardiology) as the leading cardiology therapists of Moscow. Besides these leaders, it is clear that several prominent clinicians – among them, Professor Ya.G. Etinger and V. E. Nezlin – should be included among the Moscow elite of cardiology therapists of that time, according to authors of this article.
Yakov Gilyarieich Etinger

Coming from a top guild merchant family, Etinger was born in Minsk on December 22, 1887. His parents’ prosperity explained much of his pre-revolutionary career. Significantly, it allowed him to receive a broad general education, and then later, in Germany, a second specialist education: in 1909, he graduated from the Faculty of Natural Mathematics at Koenigsberg University, and in 1913 – from the Medical Faculty of the University of Berlin. From 1914 to 1917, he served in the Russian army as an intern in a military hospital. From 1918-1920, Etinger was the head of a Red Army military hospital. After demobilization he worked as the head of the therapy department at the Vitebsk city hospital (1920–1921). From 1922, Etinger was assistant chair of private pathology and therapy at the 1st Moscow State University, which was led by Professor M.K. Ditrikh, while at the same time (1922–1933) he was in charge of the therapy department of the Yauzskaya Moscow City Hospital (which bore the strange name Medsantrud) [2].

After the reorganization of the therapeutic departments with the creation of the joint department of profanaeucal internal medicine at the 1st Moscow State University (1924), Etinger was an assistant, and from 1929 – assistant professor to E.E. Fromgold. He was not on very good terms with the professor, either due to poor personal compatibility (in this respect, restrained, correct, concise Fromgold and the vivid, emotional, talkative Etinger were clear opposites), or because of different approaches to medical treatment and research. The main areas of scientific interest did not allow for Etinger to be included in Fromgold’s clinical school (as opposed to those members of the department such as A.M. Damir and A.A. Shelagurov) [3]. At the 7th Congress of the Union of Physicians in 1924 Etinger gave a presentation on “the pathogenesis of relapsing fever”. In 1929, he published domestic medical literature’s first article on the electrocardiographic diagnosis of myocardial infarction, with a description of cases of in vivo diagnosis of acute thrombosis of the coronary arteries [4]. In the same year, D.M. Grotel of G. F. Lang’s Leningrad clinic and the staff from M.P. Konchakovsky’s clinic at the 2nd Moscow Medical Institute – K.F. Mikhailov, V.G. Popov and R.G. Shik – had articles published. Thus, began the development of the USSR’s electrocardiographic diagnosis of coronary heart disease in the research work of Grotel, A.M. Damir, P. E. Lukomsky, L.Y. Siterman and others. Etinger’s high-priority research was recognized by such outstanding Soviet cardiologists as Lang, Zelenin, Lukomsky and others. During these years, Etinger was one of the first in the country to successfully use raw liver to treat Addison-Biermer anemia, later he studied the etiology, pathogenesis and the clinical picture of the disease.

From 1932 to 1941, Etinger headed the department of profanaeucal internal medicine of the Pediatric Faculty of the 2nd Moscow Medical Institute (2nd MMI) created on the foundation of the Medsantrud hospital. It is stated in the history of this department that: “His candidacy was not chosen by chance. At 45 years of age, he was already well-known in the country as a clinician-therapist, a talented scientist, an experienced educator and administrator” [6]. Other therapeutic departments of the 2nd MMI were then headed by Zelenin, E.M. Gelshtein and Vinogradov, who were among the elite of the country’s physicians. The basic direction of Etinger’s clinical scientific activities was the study of pressing issues of cardiovascular disease. He studied the particular features of electrocardiographic patterns in the acute phase of myocardial infarction and myocarditis (in particular, he showed that the changes in the final part of the ventricular complex may be a manifestation of small-focal myocardial infarction, the only manifestation of secondary heart attack, a consequence of the inflammatory lesions of the myocardium).

Starting from 1930, Etinger published a series of articles on the diagnosis and particular development of rheumatic fever and heart defects. Together with department member Nezlinn he described (1932–1937) the electrocardiographic phenomenon in cases of rheumatic heart disease – dissociation with interference, which is considered as a kind of atrioventricular rhythm, revealed that rheumatic fever can occur in two

1 See: History of the department of profanaeucal internal medicine. Official site of the First Moscow State Medical University. Information resource: http://lech.mma.ru/faculties/lech/cath/propedevt/history/from4. Last access date: 25.11.2015.

2 For details, see: History of the department of profanaeucal internal medicine at the Pediatric Faculty. The official website of the N.I. Pirogov Russian National Research Medical University. Information resource: http://rsmu.ru/1681.html. Last access date: 25.11.2015.
forms — exudative (manifested in the form of attacks on joints, and exudative processes in other organs and tissues — in endomyocardial, serous membranes) and not exudative (it may itself have no clinical manifestation, heart disease develops gradually, often unnoticed by the patient), showed that the so-called abdominal syndrome in cases of rheumatism was a manifestation of rheumatic peritonitis and described the clinical details of this syndrome, which was formerly known to pathologists and not clinicians [7–12].

Etinger received the title of professor in 1935 and the degree of doctor of medicine in 1937. In 1941–1949, he led the department of faculty therapy at the Pediatric Faculty of the same institute. In the prewar years, Etinger consulted in the Communist International Clinic, treated P. Togliatti, W. Pieck, G. Dimitrov, I.B. Tito and other leaders of foreign communist parties. For many years he worked as a consultant for medical-sanitary control at the Kremlin, and among his patients were prominent figures of the time: representatives of the political elite, the military high command, science and the arts.

According to Yakov Etinger’s memoirs, his adoptive father “was a highly educated man, fluent in three foreign languages — German, French and English, and well-versed in matters of art and literature”. Etinger’s son wrote: “One of the greatest actors of the Moscow Art Theater, N.P. Khmelev, the famous ballerina E.V. Geltser, well-known artists N.P. Krymov and S.V. Malyutin... poet S.Ya. Marshak, and many other intellectuals could often be found at our home. Of course, the friendly relationship with these people was largely due to my father’s medical practice... For many years, he treated S.M. Kirov, G.K. Ordzhonikidze” [13]. Among Etinger’s patients was the son of L.P. Beria — Sergo. From the memoirs of Sergo Beria: “A few years before the war (we were still living in Tbilisi), I came down with serious complications of the flu. Local doctors, good specialists, could not help. To our misfortune, during those very days my father had to leave for Moscow. He called home, of course, every day, but mother could not tell him anything reassuring — the disease was progressing. I do not know what conversation father held with Sergo Ordzhonikidze, but when he learned what had happened, he promised to help... I certainly owe my life to Etinger, a well-known professor-cardiologist... [14]

Among the feedback from patients about Etinger’s high clinical skills is the valuable evidence of the daughter of academic Vovsi: “Professor Etinger was arrested; dad held him in high regard, often consulting with him in severe cases. Dad had a superstitious attitude to the medical treatment of his family, he did not take on any such “responsibility” and when I was seriously ill as a teenager, he took me to Yakov Gilyarevich [Etinger]. However, dad was always wary of Yakov Gilyarevich’s manner of loudly repeating the news from the programs of all sorts of “hostile voices” and the news he read in equally “dangerous” newspapers. Etinger knew foreign languages excellently. He was not disconcerted by the presence during these conversations of other nearby casual listeners. And so his arrest in the conditions of that time was somehow explainable” [15]. Etinger’s adopted son Yakov spoke of the same thing: father, “being a free-thinking and non-party man, was by the standards of those days often careless. He expressed his opinions and indignation aloud. And much angered him. Ya. G. Etinger often told his friends about the content of broadcasts from foreign radio stations” [13]. Dissent and lack of restraint in what he spoke of led to, of course, the fateful end of the professor, who obviously overestimated the reliability of the protection from his “high-status patron-patients”. The prologue of this tragedy can be dated to June 1, 1949: he was forced to leave the department, and had to get a job as a consulting professor in a Minnefteprom clinic.

Etinger was arrested November 18, 1950, and was charged with the “harmful treatment” of prominent party and government leaders — first and foremost, the associate member of the Politburo of the Central Committee of the Belarusian Communist Party, the Secretary of the Central Committee, head of the General Political Department of the Red Army, A.S. Shcherbakov. However, the arrested professor refused to admit his guilt. In documents from a review of the case is written the following: “In November 1950, Ryumin, on the orders of Abakumov, was commissioned to investigate the case of the arrested Professor Etinger. Knowing that Etinger was brought to treat Shcherbakov as a consultant, Ryumin, using illegal investigative methods, forced Etinger to give testimony on the fictional incorrect treatment provided to Shcherbakov, which allegedly led to his death.
Then summoned by Abakumov for questioning, Etinger withdrew his testimony as fictional as a result of the demands of Ryumin. In connection with this, Ryumin renewed his tortuous methods of investigation on Etinger, leading him to a state of complete exhaustion, from which Etinger died in prison in March 1951” [16].

According to Ya.Ya. Etinger, who studied the circumstances of his adoptive father’s death, he suffered 29 heart attacks during the investigation. “Each successive attack of angina pectoris may lead to an adverse outcome,” stated the medical certificate issued by the Lefortovo prison medical unit. On March 2, 1951, after returning from questioning to his cell, he, according to his case file, “approached the table, ate a bite of bread, took a few steps toward the door and fell unconscious. His death was caused by heart failure” [13].

**Students. Veniamin Efimovich Nezlin**

Ya.G. Etinger did not leave behind an original scientific school; apparently he did not want this. At the same time, working under his leadership, doctors and researchers, of course, felt the direct impact of such a strong and vibrant creative personality and were to some extent his students. Etinger was no longer alive when Sofia Karpai and Veniamin Nezlin – two doctors who were close to him – were arrested.

Sofia Efimovna Karpai (1903–1955), a renowned expert on electrocardiography, headed the office of functional diagnostics of the Lechsanupra Kremlin Central Clinical Hospital until 1950. Under the scientific supervision of Etinger and Nezlin, she prepared and defended her thesis on electrocardiography; in 1948, the first edition of her joint work with Nezlin – a practical guidebook on electrocardiography – was published. For the KGB serviceman who prepared the “Doctors’ case”, she was of particular interest as she had close relatives living abroad, which allowed them to suspect that she could be connected to a “Zionist conspiracy”.

On June 14, 1951, the deputy chief military prosecutor, Lieutenant General of Justice Vavilov, authorized a resolution, which was approved by the acting minister of state security of the USSR, Lieutenant General Ogoltsov. The resolution called for the arrest of the Central Ministry of Health Clinic doctor Karpai on the grounds that “…according to the USSR Ministry of State Security data, S.E. Karpai has for a long period of time been connected with the treatment of government leaders and in regards to her duties has been criminally negligent”.

In the hands of experienced torturers, who used sophisticated methods of psychological and physical pressure, those who had been arrested were “broken”, giving the statements needed to provide the authorities with the basis for an expansion of the number of victims of this repression. As such, all the more worthy of admiration is the courage and dignity of this 48-year-old woman who did not break down in the dungeons. On the first night interrogation, she was asked the following questions:

“Investigator: Why were you retrenched from the Lechsanupr Kremlin system?

**Answer:** I do not know the real reasons for dismissal, but I believe that a prominent role was played by the fact that three of my brothers and sisters are living abroad...

“Investigator: You’re under arrest for carrying out hostile work against the Soviet authorities. Proceed to the testimony on this.

**Answer:** I did not carry out hostile work against the Soviet authorities, I have nothing to reveal”.

Sofia Karpai stubbornly refused to testify about the “harmful work” of professors Nezlin and Etinger: “I know nothing, please, believe me, that I never had any criminal associations with Etinger” [17]. The investigation of the “Karpai’s case” ended with a minister of state security’s memo addressed to Stalin:

(Document № 163) “from 02.04.1952 Top secret. To Comrade Stalin. I report to you that the USSR Ministry of State Security has finished the investigation into the following the case. <...> 4. The investigation into Karpai Sofia Efimovna, a former doctor of the Central Ministry of Health clinic, born in 1903, a Jew, a former member of the CPSU (b). She is accused of carrying out terrorist activities. From 1930, she liaised with the particularly dangerous state criminal Ya.G. Etinger, aware of his individual hostile manifestations. Medical investigations carried out during the case have found that Karpai incorrectly transcribed A.A. Zhdanov’s electrocardiogram and his myocardial infarction was not detected, as a result A.A. Zhdanov’s treatment regimen was broken. /.../ A continuation of the investigation into Karpai was not possible because of her severe illness. It is advisable that the
Veniamin Efimovich (Khaimovich) Nezlin (Fig. 1) was born in 1894 in Kolyschi (the Vitebsk region) [2]. Perhaps influenced by his brother (S.E. Nezlin — a doctor, professor, known for his work on tuberculosis), he chose a career as a physician. After graduating from the Faculty of Medicine at the 1st Moscow State University (1919), he served as a medical officer in the Red Army. From 1930–1938, Nezlin was an assistant in the department of propaedeutic therapy at the 2nd Moscow Medical Institute, which Ya.G. Etinger headed from 1932. In 1939, Nezlin received the title of doctor of medical sciences, and in the same year, he became associate professor of the department of therapy at the Central Institute for Professional Development of Doctors, led by M.S. Vovsi. In 1942–1944, Nezlin was in the field army (Fig. 2); in 1944–1946 he was the chief physician of the Voronezh Military District, and at the same time he was head of the department of therapy at Voronezh Medical Institute. In 1947,

Etinger, Karpai and Nezlin were united by their common characteristics: “...the highest professionalism, the breadth and depth of knowledge, dedication to the doctor’s calling, selfless desire to help the sick. I will always remember V. Nezlin’s jesting remark: “There are two kinds of practice — one unpaid, when they sent a car for me, and the other paid for — when I myself paid for the taxi”.3

1 On this, see: Roald Nezlin. It took half a century... Information resource: http://berkovich-zametki.com/Nomer36/Nezlin1.htm. Last access date: 25.11.2015.

4 Photos of V.E. Nezlin from the family archive. The authors thank Anna Davidovna Nezлина for the photos.
Nezlin returned to the post of associate professor in Vovsi’s department.

Unlike his impulsive boss Etinger, Nezlin gave the impression of being modest and more prudent, but with a great sense of self-worth. When Etinger became a chairman at the 2nd Moscow Medical Institute, Nezlin was an already long-established physician and mature man. According to family recollections, he just winced when he was called a disciple of Etinger. In the memoirs of Ya.Ya. Etinger it is noted that: “Nezlin often advised prominent officials. But when he received an invitation to take a full-time post of consultant for the Kremlin Hospital, he turned down this prestigious and well-paid work in order to avoid daily contact with high dignitaries, who usually related to their doctors as a kind of service personnel” [13].

In 1948, Nezlin was involved in the treatment of Zhdanov. Academic V.N. Vinogradov testified to this in particular during questioning (interrogation report November 18, 1952):

“Question: What else did you personally work at?

Answer: August 31, 1948, seeking to snatch from the hands of Doctor Timashuk her main trump card – electrocardiographic data – I had consultation correspondence with the participation of professors Zelenin, Etinger and Nezlin and that provided me with the right conclusion.

Question: When did they enter into a conspiracy with you?

Answer: I said nothing directly to Zelenin, Etinger and Nezlin, but had the consultation in such a way that it was clear what conclusion I would like to receive from them. I have known Zelenin for decades, this professor of the old pre-revolutionary school firmly abides by the rule “Do not do evil to another”, and I was sure that if he understood my predicament, he would always give a helping hand. And that is how it turned out. Zelenin gave a vague conclusion, which later allowed me to say that the council did not find myocardial infarction in the case of the patient A. Zhdanov. Etinger was also a person who was close to me, my relationship with him allowed me to hope that he would not let me down, and Nezlin, his student, always followed after his teacher. In short, all three – Zelenin, Etinger and Nezlin – after the beginning of the consultation when I emphatically told them that in my opinion the patient did not suffer from a heart attack, came to my point of view”. (FSB Central Office, Archival collections. A copy certified by a Ministry of State Security seal) [18].

So the fateful medical consultation was held on 31 August, 1948, and all participants are likely to have felt the political atmosphere, the approaching storm. There were obvious and growing manifestations of anti-Semitism. This provides an understanding of the motives behind the departure (or rather escape) of Nezlin from Moscow – regardless of whether he himself made this decision, or he was "prompted" to it by the authorities.

In 1951, he became a professor and in 1959, he was in charge shortly before the department of balneology and spa treatment at the Central Institute of Professional Development of Doctors was formed on the basis of the Pyatigorsk Balneological Institute; at the same time he was scientific director of the V.I. Lenin Kislovodsk Cardiology Clinic. He gave lectures on resort-based cardiology, held clinical and clinical-anatomical conferences and classes for researchers and sanatorium physicians in electrocardiography, did the rounds of patients and consulted city doctors during “open-house days” [19]. In scientific terms, he directed the efforts of his employees in research on the diagnosis and treatment of neuroses in cardiovascular patients with acquired and congenital heart disease, hypertension and coronary heart disease. His arrest led to a break in this intense medical, teaching and research activity at the turn of 1952–1953.

The First Deputy Minister of State Security of the USSR, the case officer of the “Doctors’ case” S.A. Goglidze, reported to Stalin on 14 January, 1953, on the arrests of Jewish nationalists, writing: “Professor V.E. Nezlin, who had a criminal relationship with the doctor-terrorists, has been arrested in the mountains of Kislovodsk and has been transported to the Ministry of State Security for interrogation” [20]. According to the memoirs of A.M. Nogaller, “at the end of 1952, Prof. V.E. Nezlin was arrested. At a general meeting of the department in conjunction with the general staff at the hospital in the resort of Kislovodsk where this took place, speechmakers issued an angry condemnation of this vile enemy who had found his way into our team. Most of those present chose to keep quiet. However, Assistant Professor Evgeniya
Pavlovna Fyodorova said approximately the following: “There must be some mistake. I have known Veniamin Efimovich [Nezlin] for about 20 years in working together in Moscow. He would not hurt a fly, let alone be involved in killing people or espionage. His honesty and integrity are known to all”. In those days, such a speech was a very courageous step and could lead to very grave consequences” [21].

During the Khrushchev Thaw, Professor Nezlin returned to Moscow. In 1960-1962, he was in charge of the cardiology department at the Scientific Research Institute for Cardiovascular Surgery at the Academy of Medical Sciences of the USSR, taking over the post from Professor Damir, and then, until 1973, he worked there as a consultant; he was a member of the Scientific Council at the institute. According to the institute’s report for 1961, the cardiology-therapeutic department with its 57 beds received 459 patients over the year, of which 314 of the patients had heart defects, and surgical treatment was carried out on 132 patients. From the standpoint of modern heart surgery, such numbers point to, of course, a low level of surgical activity in the treatment of heart defects, which was due primarily to physicians’ caution given high postoperative mortality and the crucial fact that many surgical approaches were still under development, and modern anesthesiology was only just emerging. However, in those years cardiac surgery was rapidly forming and a drastic revision of the diagnostic criteria and treatment tactics for heart defects was taking place, and Nezlin was among those who first paved the way. Nezlin died in 1975 at the age of 81. In 1976, the journal Clinical Medicine (editor – V.Kh. Vasilenko) published an obituary in which he was described as a prominent therapist-cardiologist [22].

Nezlin’s rich literary heritage includes work on the problem of rheumatism; his study of rheumatic heart disease, initiated jointly with Etinger, was summarized in his doctoral thesis and monographs “Pathology and Clinical Picture of Rheumatism” (1940) and “Rheumatism” (1947). His practical guidance on electrocardiography “Analysis and clinical evaluation of the electrocardiogram” (1948, 1959, in conjunction with Karpai) can be called a classic. It became a reference book for several generations of doctors – general practitioners and cardiologists. The monographs “Coronary disease” (1951) and “Violations of coronary circulation” (1955) were a valuable contribution to the development of the study of angina pectoris and myocardial infarction. Nezlin described atypical symptoms of angina, gave clinical and electrocardiographic characterization of myocardial papillary muscles, developed a method of recording ECG in postinfarction heart aneurysms; electrocardiographic pictures of anterior myocardial infarction with R-waves regression in the chest leads was for a long time called “Nezlin failure”. Work at the Research Institute of Cardiovascular Surgery led to the creation of the Rheumatic Heart Disease book (1968), with original observations on pulmonary hypertension, clinical description of tricuspid stenosis, setting out the tasks of the therapist in the surgical treatment of heart diseases (indications for surgical treatment, preoperative preparation and treatment of postoperative complications). This book, along with the book by A.A. Busalov and Damir – Mitral Defect in the View of Physicians and Surgeons (1962) – marked the beginning of a new period in the history of studying the problem of acquired heart disease – the beginning of instrumental diagnosis and surgical treatment and transformation of the problem from purely therapeutic to mostly cardiosurgical.

**Conclusion**

In the mid-20th century, that is, at a time when domestic cardiology formed as an independent scientific discipline, its leaders included, in addition to those mentioned at the beginning of the article: academics Zelenin, Myasnikov, Vovsi, Vasilenko, and Lukomsky, Moscow cardiologists who enjoyed an exceptionally high reputation included Fogelson (one of the founders of clinical electrocardiography in the USSR), Damir (chairman of the All-Russian Scientific Society of Cardiology), Popov (a student of D.D. Pletnev, a brilliant clinician and experimentalist, developer of new tactics of providing medical care to patients with acute myocardial infarction in the USSR). However,
according to materials of the authors of this essay, this list is not exhaustive: it has been cut short as a result of the impact of factors and events from the so-called external history of science. The mid-20th century in Russia was the time of the climax and fall of the Stalinist regime, the years of “cold war” with the Western world, the growing ideological grip and repressive policy of state anti-Semitism (“the struggle against cosmopolitanism”, which targeted, in particular, a prominent therapist-cardiologist E.M. Gelshtein). The hallmark of the era was widely known as “the case of the Kremlin doctors”, which was prepared, and then (after the death of Stalin) discontinued by the security services on the orders of the political leadership of the country. Among the victims of the regime, who were in one way or another connected with the “Doctors’ case”, were Etinger, one of the leading cardiologists at that time, professor at the 2nd Moscow Medical Institute; doctors Karpai and Nezlin who worked closely with him were also arrested in the case.

Etinger and Nezlin’s medical talent (there are the well-known cases where Nezlin diagnosed obliterative phlebitis of hepatic veins, or Chiari malformation (1936), and was first after strategically describing Quincke’s edema in vivo to diagnose this disease and give medical diagnostic criteria), and their original, significant research on the urgent problems of pathology of the cardiovascular system, lets us raise the question of the need to return to their names in our collective memory, to a place that they rightly held in life – among the prominent Moscow therapist-cardiologists of the mid-20th century.

REFERENCES


6. Anisimov V.E. Istoricheskies ocherkh v svyazi s 50-letiem so dnya obrazovaniya kafedry propedevetiki vnutrennikh bolezney pediatricskogo fakul'teta (1932–1982) [Historical essay on the 50th anniversary of the foundation of the Propaedeutic Department of Internal Medicine, Faculty of Paediatrics (1932–1982)]. Moscow, 1982. [in Russian]


About the authors

Vladimir Iosifovich Borodulin – Doctor of Medical Sciences, Professor, Chief Researcher at the Department of the History of Medicine of N.A. Semashko National Public Health Research Institute, The Federal Agency for Scientific Institutions, Moscow (Russia).

Sergey Pavlovich Glyantsev – Doctor of Medical Sciences, Professor; Chairman of the Department of History of Cardiovascular Surgery of The National Research Institute of Public Health of Bakulev Scientific Center for Cardiovascular Surgery, Moscow (Russia); Chairman of the Department of History of Museology of N.A. Semashko National Public Health Research Institute, Moscow (Russia).

Aleksey Viktorovich Topolyanskiy – Doctor of Medical Sciences, Associate Professor at the Department of Therapy, Clinical Pharmacology and Ambulance of the Moscow State University of Medicine and Dentistry named after A.I. Evdokimov; Chairman of the Cardiology Department, S.I. Spasokukotsky City Clinical Hospital, Moscow (Russia).