

# A Doctor from Russia in Belgian Congo: Pyotr Dyleff

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Hundreds of immigrant doctors from Russia were involved in the formation of the health system in Africa during the colonial years. Petersburger Pyotr Dyleff (1888–1978) devoted 35 years of his life to the dark continent. True to the traditions of Russian country doctors, he not only healed the sick, but also developed a network of hospitals and dispensaries. For decades, on his own initiative, he tirelessly trained nurses and paramedics from the local community. Deeply attached to the Congolese and understanding them, the 72-year-old doctor was one of the few white doctors who did not leave the former Belgian colony during the most difficult first year of its independence (1960).

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Among physicians of the Russian Empire that revolution and civil war condemned to exile were several hundred who were able to find work in the African colonies. In France, as in Belgium, the practice of medicine was legally permitted only for those who had graduated not only from a local state university, but from a local state high school as well. New candidates had to pass an entrance examination within five years and then be admitted for the third year of medical school of a local university. All this took time and money. For the poor, tired, no longer newly graduated immigrant doctors this was usually not within their reach. The health system in the overseas possessions of France and Belgium were in desperate need of personnel. They even allowed immigrants there to work in their specialty. This is how Dr. Peter Konstantinovich Dyleff, born in St. Petersburg in 1888, got to Africa in 1925.

The son of a wealthy merchant-trader who owned a plastering workshop in the capital, Peter Dyleff graduated with honors from the Military Medical Academy. A year earlier, there had been a wave of student gatherings across the country. The indifference with which the government had reacted to the death of Leo Tolstoy caused an outcry in the universities. At the Military Medical Academy, Dyleff had been a “fellow meeting representative”. The military department of the Academy forbade any student meetings. This is why the organizer was sentenced to three weeks in the brig. Furthermore, the older sister of Dyleff

was a Social-Democrat and had a record with the RSDLP. Upon graduation from the academy, the young doctor was with no explanation twice denied approval for a position as a local doctor. Only the intervention with the Director Police Department, by his classmate's high ranking parents, allowed P. K. Dyleff to get a position at the County Hospital of the village Ogarëvka Bogoroditsky in the Tula province. At the beginning of the First World War, P. K. Dyleff worked as a junior doctor in a frontline State Duma funded hospital located in the South-Western Front in Galicia. The hospital was designed for 50 beds but, as soon as it opened, it became necessary to immediately admit over 300 wounded; they were put on blankets directly on the floor. "There was so much- remembers Dyleff – that we are all overworked and overstressed... We were in a state of the art hospital, but transportation of the wounded was so slow that a huge percentage of those with broken bones were already doomed to amputation. Amputations were endless." Along with the army, doctors and nurses first moved west, then began "an orderly retreat". Once, the hospital was visited by the chairman of the Duma M. V. Rodzyanko. Superiors, as P. K. Dyleff recalled, rushed "to throw on a shine, which we young doctors did not like." At a meeting with high-ranking guest, Dyleff 'blurted out': Do not think, Mikhail, that we always live so stylishly and eat so well. All of this was for your visit. But what you saw in the hospital was true: we are here for the wounded"<sup>1</sup> [1].<sup>1</sup>

A democrat, and even a leftist, Peter Konstantinovich turned up in the White camp after the Bolsheviks seized power. He joined the Volunteer Army of General Denikin and all of its combat history. After fighting in the Ukrainian, the military unit, which included Dyleff, a military doctor, retreated to Romania and then into exile to Constantinople. The doctor left Constanta. In Turkey, he could no longer treat anyone and earned a living delivering newspapers to subscribers. Since the numbering of houses there was very different from the European system, it was pure torture [2, p. 4-5]<sup>2</sup>. In 1921 he managed to finally return to his calling. He was admitted as a doctor in the Russian Zemgor gymnasium in the Bulgarian city of Shumen [3, p. 20]<sup>3</sup>.

Many Russian refugees gradually crossed into Western Europe from Bulgaria and Yugoslavia. In 1923 Dyleff went to Paris, but he was not entitled to practice medicine there. In his words, he began, "a miserable existence for the sake of existence" [3, p. 1]. There was only one way out, work in the colonies. In 1925, like for several other Russian unemployed doctors, this required permission from the French Ministry of Colonies, who wished to dramatically increase the number of health personnel in Africa. Upon arrival, P. K. Dyleff and his two Russian colleagues learned that they had been instructed to deal with sleeping sickness ("about which we knew nothing") in the colony of Ubangi-Shari (now the Central African Republic). A steamer moved up the Congo River, then along its tributary, the Ubangi. Entrusted to his care was a large plot of savanna, 800 kilometers north-east of the city of Bangui. For two years Peter Konstantinovich searched the villages for cases of sleeping sickness, prescribed injections, watching those had been previously identified, and instructed black medics in the field.

His long journeys to hundreds of villages, sometimes for many weeks, on stretchers or on foot, were much like the expeditions of another Russian doctor, Yakov Shvets, who had been in the

Belgian Congo before 1914. In the autobiography of P. K. Dyleff entitled, "Why my life outside of Russia was not quite useless", one finds the same humanistic features of the old intelligentsia, "Officially, I treated only patients with carotid disease. I had medicine and dressings only for them. But actually, I treated everyone. I could not deny other patients or crippled people ... I had to economize: medicated gauze I used only for the most serious injured. For others, I used suitable leaves and tied them off with vines" [3, p. 14-15].

Because he sent most of his meager doctor's salary to help student emigrants in France, after two years of his first "term" (as the French called the Russians in the colonies during the contract period, usually three years), he had no savings. "I decided to extend my contract without getting the six-month leave due to me". Then he was transferred to the upper Ubangi, in the Sultanate of Rafa on the border with Sudan, "the place is better paid but less interesting". There he continued with his previous activities. Finally getting a vacation in 1930, he dreamed of returning: "... I already understood that I was fascinated by Africa; Europe was useful there." "... I think that it was the most creative period of my life: I was working for the public good and not for the benefit of any private enterprise" [3, p. 20, 22, 30].

However, in the midst of the global economic crisis of the early 1930's, the French government stopped employing foreign doctors, replacing them with French ones. [4] With some difficulty, Dyleff obtained private employment in the "Company Miniere du Congo-Neary", which started mining copper ore near the border with Gabon in French Congo. The Directorate included a hospital for blacks; however, travelling to the villages around the mines was required. The crisis made it impossible to stay for the full completion of the "term". But by this time (1933), Dyleff had obtained a certain amount of medical fame in the colony. Russian doctors were graciously welcomed by the Belgians, who were invited to attend a course at the Institute of Tropical Medicine in Antwerp. "After eight years in the Congo, I certainly learned a lot, but it was a self-taught knowledge. The courses I took put everything into a system. And, I got the legal right to "be a doctor" [3, p. 39].

<sup>2</sup> The typewritten text of these memories of to the Hungarian engineer S. O. Korsak-Vorontsov, who knew P. K. Dyleff well.

<sup>3</sup> The typewritten text of this large article (102 pages) written by the cousin of P. K. Dyleff on the basis of his letters home to Leningrad, his memoirs and received by the author in Brussels from T. P. Korsak-Vorontsov.

Actually, as a rule, Russian medics in the French colonies held the modest position of «hygiéniste adjoint» - and, as Dyleff recalled, it was "nothing short of being a second class ranking", with a lower salary and without the legal rights of a doctor. However, in the Belgian Congo, Russians who had graduated from a Medical Faculty, whether in Russia, Belgium, France or Estonia, were entitled to practice almost all of the services of full-fledged doctors. In 1929, the Russian journalist Vladimir Tkachev, an emigrant, wrote that in the Belgian Congo, "its not just the very high pay, reaching up to 8,000 Belgian francs, it the fact that they enjoy all the rights of Belgian doctors and are unrestricted in their practice". [5]

One of the professors of the Institute of Tropical Medicine in Antwerp gave 45-year-old Peter Konstantinovich a recommendation for the gold mining "Societe Miniere de Bafvaboli", and in August 1933 Dyleff sailed to the Belgian possession. He was sent to a gold mine in the village of Angumu, southeast of the city of Stanleyville (now Kisangani in the Democratic Republic of the Congo). Anyplace with over one thousand workers was required to have a doctor. Again, he had to make the long voyage up the Congo. But, as Dyleff, who was born in Leningrad, later wrote, "I'm was not in a hurry. I was still curious to see everything around, to compare". The Belgian colony of Ubangi-Shari in Africa differed little from the neighboring French colony: "Endless forests; forests not for strolling: gnarled roots at the bottom of a swamp, gnarled ... Nothing new when compared with French Africa "[3, p. 40].

When he arrived in Angumu, Dyleff found a primitive hospital with 20 beds, located in a long, dark adobe shed with nooks for outpatient visits. There were not enough instruments and "everything here needed to be remade". The biggest problem was the lack of a nursing staff. There was only one black medic, who began studying before the arrival of Dyleff, and his young compatriot Tatiana Korsak, a paramedic. Peter Konstantovich seriously engaged in the training of assistants. "I selected them from among qualified employees .... They learned the basics quickly and, in most cases, I was satisfied with them. But those who were not sufficiently able or were too selfish returned to the mines. These medics who

had been selected from the young workers would do the bandaging and provide first aid. I taught many of them the basics of microscopy, and blood and intestinal secretions".

"The work in Angumu was much more monotonous than in the French Congo. Mornings we took in outpatients from among the workers at the Directorate and blacks from the surrounding villages. Twice a day we visited the hospitalized; occasionally were visited by sick European officials. In addition, once a month I had to visit those scattered around the camps; there were eight of them. Each camp had several hundred workers and their families living in houses built for them "[3, p. 41-42]. Soon after his arrival, Dyleff began requesting that the authorities built a hospital.

The letters of P. K. Dyleff to friends in Belgium provide a good idea of his life and mood in 1935. In May, after having spent an entire day repairing the hospital buildings, he busies himself in his garden, growing melons and thinking about artichokes ... [6, 05/03/1935]. But seeing patients slowed everything down. The more the local inhabitants trust a white doctor, the longer he stays in the hospital. "... There is a lot of work. . . . Even the black women have a well-known trust of the hospital. This year, there were 3 births in the hospital"[6, 12.3.1935].

The end of his first "term" in Angumu was approaching. Vacation plans? "I am not seriously thinking about going to Europe. There is no room for me there. Here, I have no time for thinking about the vanity of human existence. Yes, and I'm getting used to the blacks; some of them I undoubtedly love. At the hospital, I have a school for aide-infirmiers [nurses]." There were six students, and the doctors liked to work with them, although too much of it was "senseless cramming." "La tête est divisée en deux parties: le crâne et la face [the head is divided into two parts: the skull and face]", the chorus is repeated by the students. They liked it".

The education of black medics was necessary to expand the health care system in these places, and Dyleff took the initiative for this. "I have to prepare two people for the dispensaires ruraux [rural dispensaries], which the government has agreed to open in Opienge Angumu under my auspices. . . . Work is increasing, but I would like to make this my long-term project. The hospital

is becoming a village of 44 buildings.... There is a project to build 2 new buildings with 50 beds. Then I will build operating and sterilization rooms.... My contract was extended for 2 years. I still have time to work" [6, 12.3.1935].

By 1939, the old adobe hospital finally collapsed. At the insistence of the doctors, the company brought light stones that meet building requirements to Angumu. Attached to it was an operating room and later a brand new clinic. Behind the hospital were the "patients' quarters" who lived there with their families. Dyleff's home stood on a huge orchard and local children, relying to the kindness of the doctor, often sold him flowers or fruit from his own garden [2, p. 7, 9]. Only the theft of alcohol by the medics was suppressed. In 1938, while he was on holiday, the daily consumption of pure alcohol in the hospital increased from three to ten liters [6, 05/01/1939].

"I am always busy here and there is never enough time." Considering himself a physician rather than a surgeon ("I do not have the gifts of a surgeon", he admitted in his memoirs [1]), Dyleff operated primarily on hernias. Along with his medical practice there was a lot of attention devoted to the building and to repairs. "I am still engaged in matters outside of the medical practice: buildings, roads repairs ...; I am also fixing the approach to the hospital" (6, 10/15/1939). Worries about the hospital budget keep me up at night. When this happens, the best thing to do is to find an escape, for example, visiting one of my fellow countrymen working in the Belgian Congo. [7] The loneliness was oppressive; Peter Konstantovich increasingly surrounded himself with animals. In addition to dogs, living in the house were an antelope, an owl, a starling and many inhabitants, whom he called "my mute family in Africa." Soon, he happily told friends that he was given two tame beasts, a mongoose and local civet. "My house is again becoming a menagerie" (6, 26/11/1939).

In 1938 he, like some others in the Russian colony, began a new hobby: collecting stuffed birds and small animals for the Museum of the Belgian Congo in Tervuren, near Brussels. In the monotonous life of the doctor, it made for some welcome variety.

Hunters who worked for him would bring in prey and other specially trained black assistants

would stuff them as trophies. It was through the help of P. K. Dyleff that the previously unknown "Congolese peacock" was discovered. Sending six exhibits of the peacock to Tervuren, the Russian doctor asked for one of them be sent to the Museum of the Academy of Sciences in Leningrad; the package was not received. Contributions to the Museum of the Belgian Congo continued for many years. In total, the doctor sent to 8000 stuffed animals. The parcels from Angumu to Tervuren included leopard skins (6, 04/21/1940).

In 1940, after completing another "term", Dyleff left the "Societe Miniere de Bafvaboli". In April of the following year, he entered the "Company Miniere des Grands Lacs", which also mined for gold and other valuable raw materials in the eastern part of the country. The Doctor was sent to the village of Teturam located in a dense forest in the north Kivu district. Peter Konstantovich was accompanied by his faithful assistant Shabani, who also worked as his lab assistant. In Teturam, Dyleff continued his collection for the museum at Brussels.

The Germans occupation of Belgium in May 1940, shocked and roused the white population of its African colonies. Settling in London, the Belgian government continued the war on the Allied side. In the Congo, colonial troops known as "Force Pyublik" readied themselves to repel a possible invasion. Immigrants from Russia working in the heart of Africa, one after the other and for a variety of reasons, began to request to be mobilized as officers or non-commissioned officers. Hitler's attack on their homeland on June 22, 1941 only increased the desire of many Russians living in the Congo to enter military service [8]. Russian patriotism and a doctor's duty also led our doctor to the colonial army.

If you believe someone who knew Dyleff well when he was in Africa, as early as April 1941, when Dyleff contracted with the "Company Miniere des Grands Lacs," he warned the Director General that, as soon as Hitler attacked Russia, he would ask to be accepted into the "Force Pyublik." He added: "Promise me that if that happens, you will not interfere with my mobilization. Of course, of course", they answered. But a few months later, when he asked them to let him go to the army, the company refused. The refined doctor was

not afraid of the scandal, the company relented and on February 4, 1942 the 54-year-old Peter Konstantinovich was accepted into the leadership of the British Congolese Expeditionary Force [2, p. 7].

The mission of the 13,000 black soldiers and white officers of the Belgian Congo transferred to Nigeria was to repel a possible attack on the lands of the British crown from the French colonies in West Africa which were subservient to the Germans government of Marshal Petain. By the spring of next year, it became clear that the French possessions in North Africa sided with the anti-Hitler coalition, which meant that Nigeria was safe. After that, about 70% of the soldiers and officers of the expeditionary force were sent to Egypt. They went along the southern border of the Sahara and then through Sudan along the Nile. He never had the opportunity to serve and up to the end of 1944 stayed practically inactive in the Middle East.

According to the autobiography of P. K. Dyleff: "Initially I was assigned to a mobile hospital and later appointed physician in the artillery." After a long wait at the port of Matadi ("there were not enough steamers") the expeditionary force sailed to Nigeria. "We sailed the sea with lights extinguished, fearing attacks by German submarines." After the decision to redeploy the unit to the Egyptian sector, where the doctor was located, trucks, ambulances and jeeps moved to Cairo. Dyleff was in the 11th convoy. Like all corps doctors, he was strictly responsible for the diet of black soldiers and for the distribution of water. "I have never lived a life so in common with the natives as I have during this campaign. I get up at 3:30 in the morning to wake up the cook so that by 5 o'clock the morning tea or coffee for the soldiers will be ready; I am present during the issuance of all food, when it is placed in pots, and during the issuance of drinking water, all of which is stored with us." During all these months his faithful Shabani was always near. "When I was mobilized, it was he himself who asked to accompany me as aid. Then, he was made a medic and at the end of the campaign was promoted to corporal."

"In the afternoon we all got together, pulling our stuck cars out the sand. Sand, pits and animal burrows severely slowed our progress. There were days when from morning till dusk we managed

only 20 kilometers, as one or the other Camions [trucks] broke down. Our 11th column even had a motor pool attached to it for automotive repairs. Automotive repairs often held back our column and we moved slower than the others ...." There was almost no need to engage in the actual practice of medicine, but when they reached Egypt, villagers affected by trachoma began to besiege doctors of the expeditionary corps. "I had a good camp first aid kit, but what could I do against a national disaster?"

The Congolese corps did not engage in actual combat. By the time they arrived in Egypt, "it was all over. Yet, from a technical point of view, the transfer of 10,000 soldiers from Nigeria to Cairo was considered a major success. Fortunately, the soldiers were not needed. The war was resolved in Russia." It was rumored that the corps was stationed in Egypt for a landing in Italy, but this did not happen. "The British did not use their own native troops, who were trained better than ours. Later, I realized that, from their perspective, they were right. They did not want to teach Africans to fight in Europe!"

On April 18, 1946, in a letter to his niece in Leningrad, P. K. Dyleff reported an important detail: "In 1943, when we were near Cairo, I asked our headquarters to let us fight Hitler on the Russian front from ... the Belgian Congo. Headquarters answered me, rather ironically, that the Belgians had a military attaché and that there were no plans to increase the staff. . ." [3, p. 52-58]. In August 1944, the Allied Command finally decided that the African soldiers would not be involved in Europe, "and we had to go back to the Congo, where we arrived on January 3, 1945" [6, 05/02/1945]. In February, with the rank of Captain, Dyleff demobilized and returned to his employer in the north of Kivu, the same place he was commissioned in 1941, Teturam.

In addition to the hospital work, he traveled extensively to work in the camps, not as usual, but in a car with a driver. Congolese medics provided constant medical assistance to the workers, and they had to be supervised and inspected. His vacation was postponed; the first in eight years! And, he complained to his friends of severe fatigue from "trips and paramedical work" [6, 20/12/1945, 19/01/1946] construction, repairs ... However, he was gladdened by teaching anatomy

and pathology, in Swahili ("though not fluent") to his black medics. «Shabani ..., who accompanied me everywhere, is now my best pupil» [3, p. 63; 6, 12.10.1945].

The elderly lonely bachelor decided to stay in the Congo forever. "I became a white African. Twenty years have passed full term here", he wrote in French to his 9-year-old godson, the son of Russian friends in Belgium. Furthermore: "I do not expect to return to Russia. I love her; I do not think a single person has a divine right to judge its people ..., but I am against the totalitarian regime and Russia is one. Africa is my country. It is where I worked, gave my soul and all the best that is in me" [9].

In the spring of 1946, he was ordered to temporarily replace the chief physician of the northern sector of the company. The doctor did not willingly go to "The Directorate" in the village of Butembo, also in North Kivu: "As everywhere else, the Directorate is surrounded by a web of intrigue; from my point of view, more carelessness than in the Butembo hospital is hard to find". The need to sometimes organize "admissions" was a burden - "it is a foolish use [spending]" of time [6, 18/04/1946, 28/09/1946]. In addition to his duties as the chief physician, he received his former usual salary.

However, after six months of being "Director", there was hope of organizing a school for black medics. In view of the fact that after the war there was much more talk in the Congo "about the social role and special status for évolués" - Africans who had already obtained a certain level of education. Dyleff hoped that his project would be in the spirit of times and worth the trouble it would bring on. The main obstacle to establishing such a school was the fact that the future medics did not know French. In the meantime, he reported to a friend in Brussels, "twice a week I devote two hour lessons at the homes of selected infirmiers [medics]" [6, 06/01/1946, 28/09/1946].

During these six months in the new position (1946-1947), Peter Konstantinovich succeeded in organizing and improving the hospital for the Congolese people in Butembo. And, this was done at a "low-cost for the Society [Company. Aut.], almost at my expense" [6, 25.6. and 09.02.1946]. Dyleff often traveled to remote workers' camps, which his predecessor had not seen for months. And his responsibilities increased: "... Our

director is developing new types of homes for the workers (all of them, of course, live with their families); I am also participating in their development... The present-day large block barracks-style will be replaced with pavilions of up to 4 family" [3, p. 74].

"Long trips and clerical work" exhausted the 57-year-old doctor. However, he resumed pre-war co-operation with the Museum of the Belgian Congo in Tervuren. He hired a new Congolese hunter and again began to send stuffed birds and the pelts of predatory animals to the museum [6 15.05.1946, 12/06/1946]. He became a representative of the then unknown science of subspecies. In 1952, a new subspecies of birds related to the warbler was named in honor of the Russian doctor - *Cisticola tinniens dyleffi* [10].

In March 1947, P. K. Dyleff received his long-awaited six month vacation. Before leaving for Europe, where he had not been for nearly nine years, he made a will according to which 10% of his estate would be left to his beloved assistant medic, the Congolese Shabani, who had been with him since before the war years. Arriving in Paris, true to himself, his desire for new knowledge and his doctor's duty, P. K. Dyleff spent a considerable part of the holiday taking classes in the laboratories of the Pasteur Institute in Paris. On August 1, 1947, he wrote his niece in Leningrad, "I must become acquainted with the preparation of a tuberculosis vaccine. I would like to administer the vaccine on time to patients who have not yet been infected by TB."

In the same letter, he noted that "for a successful vaccination, the Congolese doctors are encountering the same obstacles as those in old Russia: vast space and the need for long distance transportation." In search for "a detailed description of the preparation of a dry, frozen vaccine, which would be specifically suitable to the conditions of Africa", Dyleff turned to the works of Soviet doctors. At his request, relatives in the USSR sent him several of the books he needed. On his own and in the same year of 1947, he and an emigrant acquaintance "returnee" sent to the Leningrad museum "some articles of iron and ivory, as well as a small collection of butterflies from the French Congo" collected over the years. None of this was received by the museum. [3, p. 64-65, 67-68]. What prevented the immigrant,

arriving in the Stalinist power, from fulfill the order we can only guess ...

After a six-month holiday in Paris and Brussels, the doctor resumed his work in North Kivu and in the same "Company Miniere des Grands Lacs." "The welcome by the blacks when I returned reminded me of my duty to them. I owe all of my moral and material well-being to them. I am in their debt and, of course, in the end, I will try to pay back this debt through my work." As before, he was in charge of the hospital in Butembo and also served as chief physician of the entire northern sector of the company. He again went on inspection trips to mines and labor camps. "This week I travelled about 1000 kilometers, i.e. about 25 hours without getting out of the car. A little tedious" [6, 07/11/1947, 11/23/1947].

On October 10, 1948, Dyleff was appointed chief physician of the company. Now he travelled for the purpose of inspecting the entire district of Kivu and tried to improve health care everywhere, both in the labor camps and among the surrounding population. Much attention was paid to teaching Congolese assistants. However, administrative meetings were a big distraction and he suffered from them. "I can conduct no major examinations in the hospital because of the constant trips." "The Head of the Directorate always gives good advice: do not overwork; think a little bit about yourself. But, all of this just piles on more work. Sometimes I want to send it all to hell. I am already tired in the mornings, eternal fatigue. But what to do? ... Knowing that many whites and many blacks look to me for support gives me strength to keep on going. I rarely finish the work before 8 pm and start at 7 am" [6, 10/23/1948, 07/27/1949].

He reassured his relatives in Leningrad that these trips were somewhat useful for him: "I am tired of any other type of travel, no one bothers me at night and there are no sick calls ..." [3, p. 73]. However, his friends in the Congo saw him taking on even more responsibilities; the old doctor "could not refuse helping the blacks directly". [11] But he did not want this and complained: "I work in the hospital very irregularly; it's bad for patients. But I cannot do anything about it, and therefore, it gives me no satisfaction, though black and continue to place undeserved trust on me ..." [6, 10.29.1949].

Escape from the routine allowed for the writing of letters and for collecting zoological exhibits for the Museum of the Belgian Congo ("I am still keeping the hunter to gather exhibits for Tervuren, but ... my collection is generally poor" [6, 9/12/1948]) and, of course reading. The books were mostly Soviet ones which were sent to him by fellow doctors. Dyleff sometimes received Soviet newspapers from his niece living Leningrad. Through friends, he bought classical literature from a Russian émigré bookstore in Brussels: from Dostoevsky to Alexei Tolstoy. Nor did he pass on the new ones, such as the book by the Soviet engineer "defector" V. A. Kravchenko "I Chose Freedom" (1946), exposing the Stalinist regime. "M. b., [Kravchenko. – Avt.] and he is right too. Nowhere is there freedom from capital, but oppression of the individual is even worse" [6, 27.06.1948, 25.01.1949, 06.19.1949, 27.07.1949].

As before the war, Peter Konstantinovich spent only a part of his salary on himself. The rest of the money he spent helping family and old friends in different countries. For example, on February 1, 1949, he set letter to his colleague Denisov, who was spending a holiday in Finland, asking him to send a pullover, a coat and woolen stockings to Leningrad for his niece's little boy. P. K. Dyleff also gave money and food parcels to other people in the Soviet Union, fellow expats in Bulgaria, France, Belgium, and Denmark ... He even sent money to strangers if he heard that they needed help [6, 07/27/1949, 02/22/1950].

In 1952, the unexpected happened: 64-year-old Peter Konstantinovich married. The bride was the widow of a deceased Russian friend still in Bulgaria, Maria Alexandrovna Bushuyeva. She was already 76 years old. She was then living in Argentina, very destitute. The old doctor asked her to move in with him in the Congo and become his legal spouse in his spacious but bachelor home, filled only with books [12]. He told a friend engineer: "If I die before her, she would get my pension as the widow" [2, p. 8]. Friends P. K. Dyleff saw this as a chivalrous act, others as sacrifice, and others as folly.

The bride got to Butembo and loneliness ceased for the both of them. In his autobiography, P. K. Dyleff wrote: "I tried to relieve Maria Alexandrovna of any economic worries. This was the reason for my quite numerous trougues."

There were about 60 people in the house and in the garden. While the doctor worked, his wife worked in the garden and read "modern (Soviet) Russian literature with great interest". "Very quickly she became friends with all of the Europeans and all local the children who called her grandmother. Sometimes it happened that I had not yet met the new employees, but their children were already her friends" [3, p. 79-80].

In the autumn of 1955, having reached the employee age limit set by the "Company Miniere des Grands Lacs" (67 years old), its chief doctor had to leave the company. His retirement would be enough for him and wife, but Dyleff told his niece in Leningrad, "not working does not suit me, so I became the superintendence at the government dispensary; it is also in Butembo." It was a small public clinic for the Congolese people, first with 20 beds and later with 40. There was also a dispensary, a clinic for pregnant women and a maternity home. "I like blacks and they still show great confidence in me as a doctor", said Dyleff [3, p. 81].

All of his nursing staff was Congolese. "Before my eyes grew a new class of society, which until recently did not have a higher cultural level than the telegraph operator in Chekhov's "The Wedding", the doctor shared with his family in Leningrad on April 3, 1958. Right now, my chief assistant (assistant médical) is no less than a paramedic of the 1914 war.... There are already two universities in the Congo for blacks! "In the eyes of an old country doctor and democrat with leftist leanings, the appearance of a class of European educated Congolese, the sharp decrease in infant mortality, the termination of civil wars and cannibalism, testified to the fact that the colonial system, although it had destroyed the traditional way of life of the local population, had still brought progress.

The small dispensary Dyleff "managed to put on steady footing. For example, in March of that year [1958 Author], in addition to 300 visits to the clinic per day, we had ... an average of 93 admissions [per day]; the birth home had 60 births; the clinic for pregnant women saw 116 women every week. Theoretically, I should have worked two and a half hours per day. I got paid for those. But in practice I work 6 or 7 hours a day, in other words, as long as necessary. This work gives me great satisfaction" [3, p. 84-85]. Do not forget that this was written by a man who was then 70 years old.

Peter Konstantinovich not only invested his last breath in what he loved, but his personal funds as well: he paid for equipment and medical supplies to equip the room. Dyleff was paid very little at the clinic: "I am a 'cheap' doctor for the colony" [6, 10/23/1956]. However, if he added to this "work at one of the 'colons' [apparently a medical examiner of workers on private plantations. - Author], and that once a month he made a trip to camp M. G. L. [company, where he served until retirement. Author]" [6, 01/18/1957], he did it not for the sake of making a living, but for the sake of completeness of existence: "My life is much better ..."

Like all of Africa at the end of the 1950s, the Belgian Congo was in full swing towards decolonization. Almost all of the white population of the country was extremely gloomy. Only a rare few like our doctor, a man with leftist views, used to doing good and having trusting relationships with his black skinned assistants and patients remained optimistic. The old doctor (he was already 72) hoped that his experience and knowledge would be useful even after the Belgians had left. But he foresaw difficult times, particularly because of the lack of understanding by black activists and the economic problems of the future independent state: "The need for the Congo to maintain roads, schools and health facilities is growing and requires large expenditures", he wrote to a relative in Leningrad, on November 19, 1959, "but the problem of real value is incomprehensible to most Congolese leaders, and twice I heard a naive argument: "How can there be a lack of money, machines can print money not just 8 hours but 24 hours a day ...". We'll see what happens. We lived here in the good years and we'll survive the difficult ones" [3, p. 85].

In the spring of 1960, a few months before the Belgian flag was lowered in Leopoldville (now Kinshasa), thousands of Europeans, including many Russian immigrants, hastily left the Congo [7, Vol. 2, s. 387-391]. The doctor, however, continued to radiate cheerfulness and optimism, at least in his letters to Leningrad. Having spent half of his life in Central Africa, P. K. Dyleff was almost at one with the surrounding Congolese. His long faithful assistants were more than just help to him; all their children were his godchildren. It had been only three years since Peter Konstantinovich and his wife had moved into a cozy new house

near Butembo. Leaving it was too late. There was no place to go and no reason for it.

Dyleff looked at all of this soberly. Challenging times were not just ahead, they were already here. Nevertheless, in March 29, 1960, the doctor assured his niece, "I am a natural optimist. I am sure there will be difficulties, big mistakes, and yet people will cope. We are going through a very difficult economic period. I say 'we' because Maria and I decided to stay in the Congo, to share his fate" [3, p. 87].

The first months of the independent Congo were a time of acute political crisis, chaos and armed violence. The accustomed way of life collapsed. All the structures of the country, including the health care system, experienced a severe shock. In November, the doctor wrote to a friend in Brussels: "Although no one has touched us personally, obviously, this year not been very good." By September Dyleff was the only doctor remaining in north Kivu. The hasty departure of many Europeans was a blow not only to the local people who lost their jobs, but also to those whites who had not yet departed and lost many services, such as qualified medical care. In early November, the 84-year-old wife of Dyleff "became ill with severe otitis. There were no longer any specialists in the Congo" [6, 27/11/1960].

What about the public hospital in Butembo that was headed by Dyleff? "Our clinic continues to operate without interruption, he said with pride in Leningrad on January 3, 1961. We have clinics for pregnant women and newborns. I have very good black assistants. They work selflessly even though it is very difficult for them. In general things have become very difficult for all of the Congolese who do not have their own land. Their salaries are very intermittent . . . . The political struggle is burning and becoming fiercer... I have the only government doctor position protecting us in an area with a radius of 250 km ..." [3, p. 87-88].

Due to the departure of many white physicians, work in the small clinic in Butembo significantly increased. But wages went unpaid for great periods of time. Shortages of medicine arose and it became necessary to save on the petrol required for trips to the district. A number of Congolese workers entered politics and became congressmen in the Kivu assembly. The situation

for Dyleff himself became even better: all of the paperwork in his hospital was handled by a black director sent by the provincial government, and the doctor could devote himself entirely to the sick. Since the treatment was now paid ("although cheap"), the doctor more frequently turned to the director, "so that the unemployed could finish their treatment" [3, p. 88-89].

P. K. Dyleff, a 73-year-old doctor, used the last of his strength to organize the activities of a medical service located at the center of a vast region. According to a biography of Dyleff based on his letters to his niece: "For many months, Peter Konstantinovich did not get his pension, doctor's salary or special pay for outcalls. Gasoline was not enough to even make the daily two kilometer car trips between Dyleff's home and the hospital. The power station in Butembo stopped working; there were no lights and instruments could not be used in the laboratory and offices. There was no medicine, dressings or other things."

Since the doctor would not spare the medicine, by mid-June 1961 there was only a one month supply left. In desperation, he appealed to the American naturalists in New York. They had met through the Museum of the Belgian Congo in Tervuren, where for many years he sent stuffed birds and mammals. In his own words, he "practically went to President Kennedy with an emergency request to send medicine" [3, p. 95-96].

If there was anything that brought satisfaction to the doctor in these difficult months, it was his friendship with several Congolese. He had been with his faithful Shabani since before the war, and two teenagers, one studying carpentry the other a mechanics, came to Maria Alexandrovna in 1960 to study various school subjects. After they had finished elementary school, Dyleff hired one of them to work as an assistant gardener. It was precisely the doctor and his wife who pushed the boy to continue his education and they even paid for his first year of professional training. "Sometimes our African friends join us in their spare time. We have a very good record player and many records. The Congolese love music very much, especially Russian songs, of which we have many" [3, c.91-93].

Despite the problems associated with the survival of the clinic, P. K. Dyleff willingly continued the work begun before the war -

collecting zoological material for the museum. Now, he was contributing to the collection of the Zoological Institute of the USSR in his native Leningrad, and led his team with a lively correspondence. "In view of the fact that the former citizens of Leningrad "have arrived" in the Congo, Leningrad should have some benefit from it." In 1961, he first sent a parcel with 34 African stuffed birds, directly "by sea" from the Congo to his native city on the Neva. Soon he sent a second one with birds and mammals. "There was a bat, an unusual insectivore with a crest something like a rat's and an antelope, the smallest and relatively rare species, the scientific name of which I do not know" [3, p. 90-91]. The packages arrived safely.

Meanwhile, the financial system in the province of Kivu continued to fall apart under the authority of the local radical supporters of assassinated Prime Minister Patrice Lumumba. The old doctor from the public hospital wound up without a penny. The money he had saved in local banks disappeared entirely. However, unlike other European workers, P. K. Dyleff decided that he did not have the right to transfer money from the Congo to Europe. Friends persistently tried to convince him and his wife to go to Belgium, where Peter Konstantinovich would receive a pension and would be able to ride out the difficult months until he could return to Butembo. After friends sent money for the trip, the old couple left the Congo at the end of September 1961 [3, p. 97-98], forever, as it turned out. He donated his home near Butembo to the local Catholic mission [2, p. 10].

Arriving in Belgium, the old doctor wrote that after the Russian Revolution, "we were all discarded. Much later, we were temporarily under the illusion of our usefulness to the Congo, but we were discarded from there as well." He added philosophically: "Perhaps our understanding of the world is at fault." But even more painful were the doubts about the durability of the work to which half a life had been devoted. ("the illusion of usefulness to the Congo"). "I have been in Africa for 35 years. Maybe the seed that was sown is all that is left; I am not sure, although my assistant remains. With my help, he became a doctor". [1]

Out of a hundred and fifty "Russian Congolese" who were forced to return to Europe

between 1960-1970, about a dozen ended their days in a nursing home for veterans of the colonies, located in the Belgian town of Genval, near Waterloo. Almost all of them very soon passed away and only Dr. Dyleff died in 1978, having reached the age of 90. He long hoped that the situation in the Congo would stabilize, and that he would return to his favorite cause. But when he started to lose his hearing, he realized that he could no longer work as a doctor [3, p. 98-99]. In a nursing home, he continued to correspond with his former aides in the Congo. In the first months after his departure from African, in the winter of 1961/1962, he received an emergency request for medicine, dressings, Vaseline, etc, from the hospital in Butembo. He even appealed for assistance from his acquaintances among the staff of the Zoological Institute in Leningrad. The old doctor even helped individual Congolese: some by providing money, some by providing needed instruments. In response, there were touching signs of gratitude and devotion. A teenager who once worked for the doctor and was given shelter by him, later asked him for permission to add the doctor's name to his. "Now his name is Melchizedek Dyleff Kusereka. This means that, someday, there will be a little black Dyleff ..." [3, p. 96, 99]. The childless 80-year-old Peter Konstantinovich was particularly touched by this story. Actually, in his letters to his family in Leningrad, between 1960-1970, he willingly and often remembered Africa and often spoke of it.

And in the Congo itself, the memory of the Russian doctor long remained. The Soviet journalist N. P. Khokhlov in 1965, wrote in "Izvestia" about his 1965 prison meeting in Leopoldville with Congolese Senator George Grenfell, who suddenly remembered that during the war he befriended a compatriot of Khokhlov, "I think his name was Dyleff, an amazing doctor!" [13]. In 1978, at Genval funeral of the old doctor, there were many speeches. The last one was made by a black doctor who had been a medic and student of Dyleff in Butembo. "It is from him, said the African, that I learned what it means to be doctor. How he loved us. He shared with us his soup and bread with us. But we had to part". He finished in Swahili: "Give me your hand, doctor. Good bye" [2, p. 12].

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