

To the biography of N.A. Semashko

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The authors of this article consider separate stages of the biography of N.A. Semashko. There is an attempt to reconstruct on the basis of available publications and archival materials (personal fund of N.A. Semashko of the Museum of History of Medicine of I.M. Sechenov First Moscow State Medical University, documents from the State Archive of the Russian Federation, the National Archive of the Republic of Tatarstan and the family archive of E.G. Farobina, granddaughter of N.A. Semashko) individual moments of life and activity of the first People's Commissar of Health. During his studies at the medical faculty of Imperial Moscow University (IMU) N.A. Semashko became a staunch Marxist. The arrest and subsequent deportation did not allow him to graduate from the University, so he was able to complete medical education at Imperial Kazan University. N.A. Semashko continued his revolutionary activity later, when he was working as a doctor. In 1905, he participated in organizing an armed rebellion in Nizhny Novgorod and was arrested. He crossed the border of the Russian Empire when he got out of prison on bail, and until 1917 was in exile. After the October Revolution, N.A. Semashko headed the People's Commissariat of Health and for 11 years dealt with issues related to the creation and development of a new Soviet health care system. N.A. Semashko is considered to be the creator of Soviet theoretical and practical health care. Some principles of the model of healthcare created by him were used in international practice. Special attention N.A. Semashko paid to preventive medicine. He also made a significant contribution to the organization of international cooperation. Despite the availability of scientific papers by N.A. Semashko, stereotypes remain in the works dedicated to him. In this regard, there is an attempt in this article to identify certain features of views of this controversial personality. According to the authors, the creation of his scientific biography remains a task for researchers despite the popularity of the name of N.A. Semashko.

Keywords: *history of health care, biography, N.A. Semashko, the first People's Commissar of Health, the Soviet model of health care*

For quotation: *Arsentyev E.V., Reshetnikov V.A. To the biography of N.A. Semashko. History of Medicine. 2017. Vol. 4. No 4. P. 383–394.*

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Biographies of well-known public figures not only typically attract the genuine interest of a diverse readership; they are also an important factor in changing perceptions of history. However, the life stories of Soviet political and social leaders remain clichéd, leading to a distorted understanding of the role of the individual in history, and to one-sided, tendentious interpretations. Recent years have seen a revival of research interest in Soviet public officials. As

key events in twentieth-century Russian history are reassessed, so the events associated with the life and work of Nikolai Semashko (1874–1949), who is justly regarded as the founder of Soviet theoretical and practical public healthcare, are also having to be seen in a different light [1].

Nikolai Semashko was born on 20 September (O.S. 8 September) 1874, in Livenskoe, a village in Yelets Uyezd, an administrative division of the Oryol Governorate (now Lipetsk oblast). His father was a teacher, while his mother was a sister of the Marxist revolutionary Georgi Plekhanov. Semashko spent his childhood years on his aunt's estate [2], and started going to the

Received: 22.03.2017

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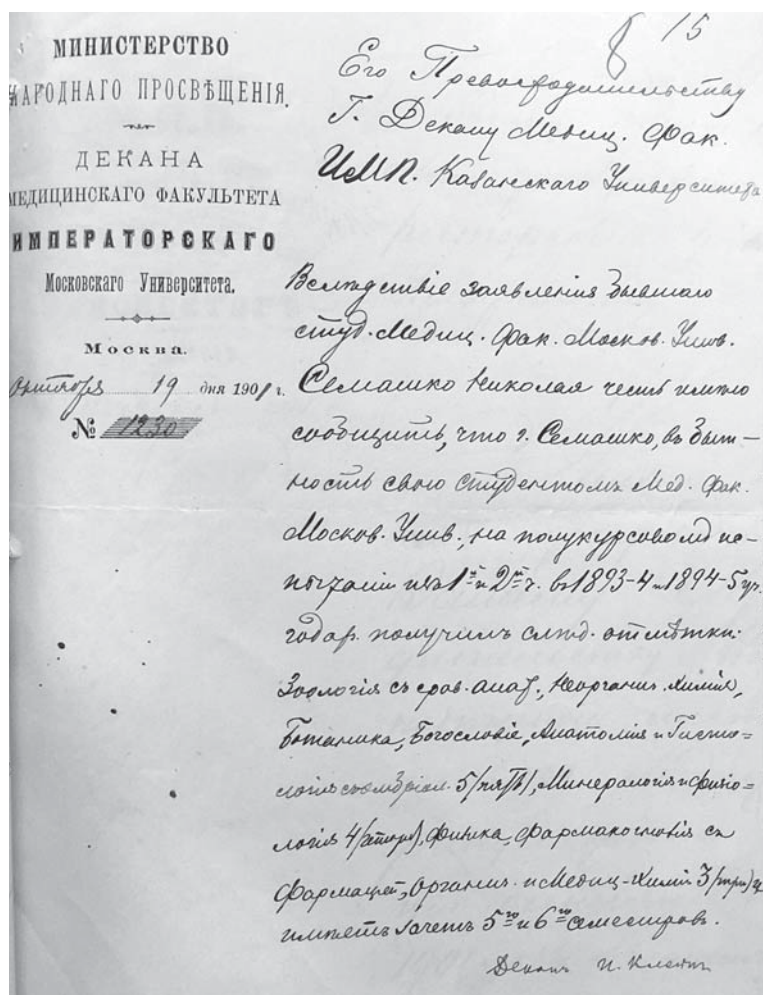


Fig. 1. Letter from the Dean of the Faculty of Medicine at IMU to the Dean of the Faculty of Medicine at Kazan Imperial University with information on Semashko's achievements during his time studying at IMU.¹ National Archive of the Republic of Tatarstan: f. 977, op. MF. d. 2266, l. 8.

¹ Text on the picture:

MINISTRY
OF EDUCATION
DEAN
OF THE FACULTY OF MEDICINE
OF IMPERIAL
MOSCOW UNIVERSITY
Moscow
19 October 1901
No. 1230

His Excellency
the Dean of the Faculty of Medicine
of Kazan Imperial University

Following an application from a former student of the Faculty of Medicine at the University of Moscow, Nikolai Semashko, I have the honour to inform you that Mr. Semashko, in his time as a student in the Faculty of Medicine at the University of Moscow, in the academic years 1883–1884 and 1884–1885, received the following grades in the mid-course tests, parts 1 and 2: Zoology with comparative anatomy, Inorganic chemistry, Botany, Theology, Anatomy and Histology and embryology 5/five, Mineralogy and physiology 4/four, Physics, Pharmacology with pharmacy, Organic and medical chemistry 3/three, and has credits for semesters 5 and 6.

Dean I. Klein

Yelets gymnasium school at the age of 10. Following his father's death from typhus (when the future first People's Commissar for Public Health was 13), Semashko's family was left in a difficult financial position. A history teacher from Semashko's school recommended him to a police colonel as a teacher for his 16-year-old daughter. The young man proved a talented and capable educator, and was soon being invited to give private lessons [3]. However, in his final year at school he and his friends formed a group where they read banned literature. The school authorities found out, and all the members of the group were arrested and, following a court ruling, expelled. As a "straight-A pupil", Semashko avoided this punishment, but was deprived of his gold medal.

In 1891, aged 17, Semashko got into the Faculty of Medicine at Imperial Moscow University (IMU). There, he attended lectures by physiologist Ivan Sechenov, hygienist Friedrich Erismann, paediatrician Nil Filatov, therapist Grigory Zakharyin, surgeon Nikolai Sklifosovsky, dermatology and venereal disease specialist

Aleksei Pospelov, psychiatrist Sergei Korsakov, and others. In general, Semashko was a good student (Fig. 1).²

In Moscow, Semashko participated in social democratic groups, read Marxist literature and works by his uncle Georgi Plekhanov and the young Vladimir Lenin [4], and was elected to the Joint Council of Community Associations, an illegal student body that organised student protests and disseminated banned literature.

In December 1895, Semashko was arrested for helping to organise a mass demonstration of students and workers, which the Council of Community Associations had planned to coincide with a visit by Emperor Nicholas II to Moscow. In custody, Semashko occupied himself with medicine and philosophy, read, and started learning French.³ After more than three months in prison, he was exiled for three years from Moscow to Yelets, under open police surveillance [5]. To help his family (his mother, brothers and sisters), the exiled student Semashko began giving private lessons. However, his revolutionary activities continued: he established the first Marxist society in Yelets, which he headed until the end of his time in exile. It is probable that Semashko also met up with his uncle, Georgi Plekhanov (Fig. 2) during this period.

In 1898, after returning from exile, Semashko attempted unsuccessfully to return to IMU. In autumn 1899, he managed to get into the Faculty of Medicine at Kazan Imperial University, in the fourth year [6]. To do so, he had to sign an undertaking not to engage in revolutionary activities. Nevertheless, he was directly involved



Fig. 2: N. A. Semashko and his relatives.⁵

Left to right: Sofia Aleksandrovna Semashko (Semashko's sister), an unknown woman, Georgi Valentinovich Plekhanov, Nikolai Aleksandrovich Semashko, Maria Valentinovna Semashko (Semashko's mother), Zinaida Aleksandrovna Semashko (Semashko's sister), an unknown woman.

From the family archive of Yelena Farobina.⁶

the establishment of social democratic groups in Kazan.⁴

In March 1901, a major political demonstration took place in Kazan,⁷ with Semashko among the organisers. The police did not find out about his leading role, so his sentence was relatively light: after a month in confinement, Semashko was expelled from Kazan and banned for a year from living in any university town. Since he was in his final year, this prevented him from taking the state examination and becoming a doctor. A copy has been preserved of a secret letter to the Proctor of Kazan Imperial University from the Secretary of the university's Management Board, stating that, despite this ban, "Nikolai Semashko has attended a full course in the medical sciences and

² In file 2266, "On educational credits for students of the spring and autumn semesters of the academic year 1900–1901, and the awarding of graduation certificates to them", held in the National Archive of the Republic of Tatarstan, we have found among the documents on educational credits for students at the University of Kazan a letter from the Dean of the IMU with Semashko's grades during his time there. This document was evidently required for his degree certificate to be issued.

³ Semashko studied French from the Gospels — the only book in French allowed to be brought to him.

⁴ Semashko's student file is missing from the University of Kazan repository in the National Archive of the Republic of Tatarstan. According to one account, it was removed by the NKVD when Semashko was People's Commissar for Public Health.

⁵ Thought to have been taken at Semashko's mother's home, but the exact date and place are unknown.

⁶ Yelena Farobina is Nikolai Semashko's granddaughter.

⁷ Documents have been preserved on the participation by students from Kazan Imperial University in an illegal demonstration in Kazan on 11 March 1901. Among them was Semashko, then in his fifth and final year as a student.

is entitled to receive a graduation certificate”⁸. He reached an agreement with the university professors, took up residence outside the city, and, thinly disguised (with spectacles and a false beard and moustache), attended evening classes at the university, passed his exams with flying colours, and was awarded his degree.⁹

After graduating, the “politically suspect” Semashko initially had difficulty finding work. Help came from Professor Mikhail Kapustin,¹⁰ a hygienist, who was a friend of the Head of the Samara Governorate Health and Sanitary Bureau, Moisei Gran, to whom he sent a letter of recommendation asking him to take Semashko on as an epidemiologist. After studying bacteriology, the future first People’s Commissar for Public Health successfully halted a diphtheria epidemic in the village of Orlov-Gai. He was then sent to the village of Novaya Aleksandria, which was set to be burned down because of a suspected plague epidemic there. The young doctor established that the cause of the epidemic was not plague, but anthrax. As part of his job as an epidemiologist, Semashko carried out health awareness work among the local population, explaining the features of infectious diseases and how to prevent them. Medicine, however, was not his only activity, and the Governor of Samara consequently dismissed him for being politically suspect.

After leaving Samara, Dr. Semashko was appointed head of a rural hospital in Troitskoye, a village in the Oryol Governorate, in 1902. There, he was kept very busy treating both children and adults and performing surgery. Later, he wrote: “I remember with gratitude to this day my work in that rural district. I came to understand a doctor’s work in all its breadth and diversity, and this gave me a medical grounding to last me my whole life. I was a jack-of-all-trades” [7, p. 35]. In addition to

his work as a doctor, he organised illegal political groups. Learning that he was in danger of being arrested, he decided to leave Troitskoye [8]. His relatives from Nizhny Novgorod managed to get him a job as a governorate public health officer. In autumn 1904, Semashko renewed his medical practice in Nizhny Novgorod. At the same time, he began studying the influence of environmental factors on public health, and attempted to draw together his research findings. His first scientific papers were published in 1904–1905.¹¹

The young doctor also continued his political activities. In Nizhny Novgorod, he was a member of the local underground militia, and headed an illegal propagandist training group. His flat was a safe house for revolutionaries and a place where banned literature was kept [9]. In December 1904, he was arrested for a third time and held in prison. No evidence incriminating him was found (he had managed to remove the banned literature earlier). After three days, he was released and put under special police surveillance. [8].

In December 1905, an insurrection took place in Nizhny Novgorod, and governorate public health officer Semashko was one of the leaders. The insurgents used his flat as a headquarters and for storing weapons. For three days, the city was rocked by fighting. Semashko was arrested once again. He spent ten months behind bars. For his part in the uprising, he could have been hanged or at best sent to a penal colony and made to do forced labour. However, he contracted severe tuberculosis while in prison. Following an appeal from his relatives, he was released on bail¹² [3]

⁸ National Archive of the Republic of Tatarstan: f. 977, op. *Inspektor studentov* (‘Proctor’) d. 183, Correspondence between the Proctor and the University Rector and the Kazan Chief of Police. 1901. l. 115.

⁹ It took Semashko ten years to obtain his medical degree.

¹⁰ Mikhail Kapustin, Professor of Hygiene at the University of Kazan, was a public figure, a nephew of Dmitri Mendeleev, and the author of many scientific works on sanitation and hygiene. He was elected to the second and third State Dumas from the Kazan Governorate and led the Octobrist Party there.

¹¹ These were: “Data on infectious disease morbidity in the village of Bogorodskoye, Gorbatov Uyezd, in 1900–1903 (on the sanitary significance of the tanning industry)” (Records of the Nizhny Novgorod Zemstvo Health and Sanitary Bureau. 1904; 11); “Data on infectious disease morbidity in the village of Bogorodskoye, Gorbatov Uyezd, in the 1900s (on the sanitary significance of the tanning industry)” (Records of the Nizhny Novgorod Zemstvo Health and Sanitary Bureau. 1904; 11); “A public health description of the village of Panino, Gorbatov Uyezd” (Records of the Nizhny Novgorod Zemstvo Health and Sanitary Bureau. 1905; 9); “A summary report on the activities of medical and food stations in the summer of 1905” (Records of the Nizhny Novgorod Zemstvo Health and Sanitary Bureau. 1905; 10); “A public health description of the village of Panino, Gorbatov Uyezd” (Records of the Nizhny Novgorod Zemstvo Health and Sanitary Bureau. 1905; 9).

¹² The bail was set at 3,000 rubles. This amount was raised by his sister, who borrowed the money from Countess Sofia Panina, for whom she had previously worked as a teacher.

and soon afterwards fled the country.¹³ In 1907, he arrived in Switzerland and settled in Geneva not far from where his uncle, Georgi Plekhanov, lived.

In Geneva, the future People's Commissar mainly engaged in political activities for the Russian Social Democratic Labour Party (RSDLP), but now he was under Lenin's direct supervision. He played an active role in the Bolsheviks' support for the revolutionary movement in Russia. In January 1908, Semashko was arrested by the Swiss police at the request of the Russian government. He was accused of involvement in a bank robbery in Tiflis (now Tbilisi).¹⁴ The future People's Commissar had not been directly involved in the incident,¹⁵ and the pretext for his arrest was a letter sent to him from prison, author of which was arrested. At Lenin's initiative,¹⁶ one of Switzerland's best lawyers, A. Lachenal, was hired. Semashko and the other Bolsheviks accused in the Tiflis affair were not extradited, and Semashko continued his work for the Bolsheviks in Geneva. In December 1908, having moved to Paris, Semashko worked as the secretary of the Foreign Bureau of the Central Committee of the RSDLP, part of the Bolshevik Centre, a select group of Bolsheviks

led by Lenin, and took part in meetings of Bolshevik groups abroad. In the Parisian suburb of Fontenay-aux-Roses, he worked as a doctor and taught history and geography to the children of Russian émigrés at Ivan Fiedler's New Russian School.

In January 1912, Semashko was a delegate at the Sixth All-Russia Conference of the RSDLP in Prague, at which he spoke on workers' insurance, setting out the basic principles of insurance. State insurance for workers had to provide them with financial support whenever they became incapacitated, and to cover not only the workers themselves, but also their family members. The decisions adopted at the conference had important ramifications for public healthcare in Russia, in particular, social insurance.

Following the Prague conference, the Bolshevik Semashko gave a number of speeches in France and Belgium, before being invited in 1913 to head a hospital in Serbia. After the outbreak of World War I, and the occupation of Serbia by Austro-German and Bulgarian forces in 1915, he moved to Bulgaria, where he worked as a doctor until the February Revolution in 1917.

After the February Revolution, the future People's Commissar returned to Russia. In Moscow, he was selected from the Bolshevik party list to join the Pyatnitskaya District Duma, and became Chairman of the district council. In October 1917, Semashko was involved in organising an insurrection in the capital, and during the October fighting the "Red doctor" headed the Bolshevik ambulance detachments in Zamoskvorechye District, which provided medical assistance to the participants in the uprising. [8].

After the October Revolution, Semashko was elected to the Council of District Dumas. He headed the medical and hygiene department, which was tasked with overseeing public healthcare in Moscow. He played an active role in organising treatment and prevention for Muscovites, and established a system of healthcare for the city. After this, Semashko joined the Council of Medical Colleges — the highest medical authority at the time. The Council of the People's Commissariat for Public Health did a lot of work to organise and strengthen local health and sanitary departments, and to rally medical professionals around the new government [12].

¹³ Semashko left Nizhny Novgorod in 1906 for Moscow, from where, he headed, via Saint Petersburg, to Åbo (now Turku), in Finland. His next destination was Copenhagen. He then travelled by train through Germany to Geneva [7, p. 43].

¹⁴ On 26 June (O.S. 13 June) 1907, members of an armed group of the Tiflis branch of the RSDLP robbed two State Bank treasury carriages in Tiflis, stealing 241,000 rubles (equivalent to \$5,000,000 today). Some of this money was in large-denomination notes (of 500 rubles), the serial numbers of which the Russian government had provided to all the banks in the Russian Empire. Since changing them in the Empire was practically impossible, the group of Bolsheviks attempted to do so abroad (in several cities at once). However, they were all arrested in the act [10].

¹⁵ According to Semashko himself, he had no involvement in the crime and was always categorically opposed to the expropriation of money [7].

¹⁶ It is likely that Semashko's wife sought help from Georgi Plekhanov. One author quotes the following comments from Semashko, which evidently refer to this episode: "When my wife turned to Plekhanov, who was then influential in Switzerland, and asked for his help, he answered dryly: 'Well, there you go! The company you keep determines what you reap'." [11, p. 77].

The first People's Commissar for Public Health laid down the key principles and organisational foundations of the new healthcare system in June 1918 in his report "Key objectives for Soviet medicine at a local level" at the First All-Russia Congress of Health and Sanitary Departments. Recognising the need for a People's Commissariat for Public Health, the congress, on the basis of the report, adopted a resolution outlining the key objectives for Soviet medicine: to make healthcare free of charge and equal and available to all; to provide better healthcare; and to involve the general public in the organisation of healthcare. In July the same year, Semashko addressed the Council of People's Commissars (CPC) on the need for a People's Commissariat for Public Health in the RSFSR. On the basis of his report, the CPC, on 11 July 1918, adopted the decree "On the establishment of a People's Commissariat for Public Health", creating the world's first body in charge of all a country's health and sanitary affairs. The CPC appointed Semashko People's Commissar for Public Health in the RSFSR, a position he held for the next eleven years.

Semashko's work began in the challenging conditions of the Civil War. Fighting infectious diseases was a priority. The main principles underlying the Commissariat's work were that healthcare should be free of charge and equal and available to all; a focus on prevention; close links between medical science and practice; performance of extensive nationwide sanitary, anti-epidemic and health improvement measures; and involvement of the general public in healthcare matters [13].

The difficult conditions gave rise to a shortage of medical personnel, which needed to be addressed as soon as possible. On 20 December 1918, Semashko approved a resolution of the People's Commissariat for Public Health titled "On labour service for health workers", which established that: "1) Compulsory labour service... is performed by individuals with medical knowledge in branches of labour requiring specialised medical knowledge. 2) Medical and veterinary physicians, female doctors, dentists (including women), pharmacists, midwives, male and female medical assistants, and nurses who are not state-registered are subject to

compulsory labour service".¹⁷ This obliged local healthcare departments to register all medical workers in order to maximise public healthcare coverage. In the wartime conditions, this resolution helped to correct the significant imbalance between urban and rural areas in terms of health worker distribution. Another priority for the Commissariat was to involve scientists from theoretical, experimental and clinical disciplines in its work.

After just a year and a half under Semashko's leadership, the Commissariat had achieved significant healthcare improvements: healthcare institutions had been nationalised and integrated, patients received free home visits, emergency work and been optimised, great strides had been made towards tackling social diseases and raising public health awareness, and a huge amount of work had been done to eliminate a typhus epidemic [14].

At Semashko's initiative, a department of public health education, regarded by the People's Commissar as fundamental to the preventive side of Soviet healthcare, was established as part of the Commissariat. He instigated the practical implementation of new ways of promoting healthy living. He saw medical check-ups as a way of achieving the preventive objectives of healthcare. Semashko was the visionary behind the establishment of specialised early treatment centres and networks of healthcare facilities to combat occupational health problems [6, p. 92]. By order of the People's Commissar, groups of workers from unhealthy industries were given regular medical check-ups. The provision of a rationale for the medical check-up system and development of its methods may be regarded as a personal achievement of the first People's Commissar for Public Health [15].

Semashko realised that a methodical approach to mass health screening of the population (or individual groups), aimed at identifying a particular illness (or group of illnesses) or risk factors, was more productive from both a clinical (for the patient and the doctor) and an economic

¹⁷ Resolution of the People's Commissariat for Public Health of the RSFSR, of 20 December 1918, "On labour service for health workers". P. 1. See <http://www.consulatant.ru/cons/cgi/online.cgi?req=doc;base=ESU;n=18664#0>.

(for the healthcare system as a whole) point of view.¹⁸

Semashko's time as head of the People's Commissariat for Public Health saw a significant increase in the number of outpatient clinics and hospital beds. The number of the former more than doubled (from 5,597 in 1913 to 13,204 at the start of 1929) [1]. The number of hospital beds at the start of 1929 was 246,100, 40% more than the 175,600 in 1914, while there was a 60% increase in the number in children's and maternity hospitals (from 89,200 in 1914 to 143,600 in 1929). By 1929, the number of health workers had increased threefold since 1914 (from 19,785 to 63,219), while the number of medical school graduates in 1928 had risen sevenfold (from 900 to 6,200). Home visits in cities rose from 391,400 in 1913 to 7,304,000 in 1930 (an 18-fold increase) [16].

Semashko also made a significant contribution to organising international collaboration. He gave speeches and lectures abroad on Soviet medicine, talking about its advantages. In 1925, for example, he spoke on Soviet healthcare at the Faculty of Medicine at the University of Paris, then in Geneva at the League of Nations Hygiene Section, and in Berlin. Following a speech by him at the Society of the Friends of New Russia, in Germany, Professor Oskar Vogt and Professor Lipman, who had both visited the USSR in 1924, gave replies. They noted the significant successes of the public health and preventive measures carried out under Semashko [17, p. 232]. To strengthen healthcare ties between their two countries, Semashko and Germany's Professor Friedrich Kraus launched the *German-Russian Medical Journal*. The first People's Commissar for Public Health invited foreign scientists to

come and see Soviet healthcare for themselves, and helped to arrange working trips abroad for Russian scientists. Thanks to his efforts, Western Europeans received reliable information on how healthcare worked in the Soviet state, and a mechanism facilitating the sharing of experience was developed.

As part of this scientific cooperation, Semashko took advantage of the opportunities of working with international private foundations. In 1927, for example, an answer to a query from the Department of Research Institutions, part of the Council of People's Commissars of the USSR, stated that the People's Commissar for Public Health considered that Soviet specialist doctors could be sent on academic trips to America, paid for by the international Rockefeller Foundation [18].

In 1922, Semashko helped to establish the country's first department of social hygiene at the Faculty of Medicine at the First Moscow University, and went on to head it for 22 years. Not every clinician welcomed the decision to establish the department [19]. However, Semashko's idea of shifting focus from treatment to prevention is currently being successfully put into practice by the World Health Organization.¹⁹

Semashko's writings²⁰ are available to readers, but almost every work on him contain stereotypes of his views. For example, many works on medical ethics claim that Semashko supported abandoning the principle of patient confidentiality, on the grounds that it was a holdover from "bourgeois" medicine. However, this is only partly true. In 1925, he did indeed declare patient confidentiality a holdover from old exclusive medical practices, emphasising that Soviet healthcare needed to work towards abandoning the principle [20]. In time, however, Semashko came to conclude that it needed to be an integral part of Soviet medical ethics. In his 1945 work "On the image of the Soviet doctor", he wrote: "A doctor's primary obligation is to keep the secrets entrusted to him by a patient, and not to disclose them" [21, p. 283]. His 1947 work

¹⁸ This principle can also be seen in Russian healthcare today. For example, under Russian Health Ministry Order 36an, of 3 February 2015, "On confirmation of the procedure for performing medical check-ups of certain adult population groups", free medical check-ups are available to any citizen of the Russian Federation insured under the compulsory health insurance system. See: Russian Health Ministry Order 36an, of 3 February 2015, "On confirmation of the procedure for performing medical check-ups of certain adult population groups". <https://www.rosminzdrav.ru/documents/8542-prikaz-ministerstva-zdravoohraneniya-rossiyskoy-federatsii-ot-3-fevralya-2015-g-36an-obutverzhdenii-poryadka-provedeniya-dispanserizatsii-opredelennyh-grupp-vzroslogo-naseleniya>.

¹⁹ See the "Global action plan for the prevention and control of NCDs 2013–2020" at <http://www.who.int/nmh/publications/ncd-action-plan/en/>.

²⁰ Semashko authored more than 250 scientific works on social hygiene and healthcare organisation.

“Essays on a theory of the organisation of Soviet healthcare” discusses in more detail how Soviet medicine needed to treat patient confidentiality: “A doctor is obliged to keep the secrets entrusted to him by a patient, otherwise normal relations with the patient are undermined, as is the patient’s trust in the doctor. If, however, maintaining such secrets threatens the interests of the wider public, of the collective, the doctor should not keep them. If a doctor observes an infectious disease threatening the wider public, he, under our laws, must immediately notify the authorities and isolate the patient where necessary... As public awareness and the level of culture improves, patients themselves will become less likely to want their secrets to be kept to the detriment of others” [21, p. 78–79]. Hence, it cannot be said that the views of the chief doctor of the Soviet republic on patient confidentiality were always as radical as in his “On patient confidentiality”, written in 1925.

It is also a mistake to claim that Semashko regarded disease as a social phenomenon and ignored the role of inheritance in disease etiology. In fact, he did not deny the importance of genetics, but suggested that social factors played a greater role. In 1927, he wrote in the foreword to Professor N.P. Bruhansky’s book *Suicides*: “Strictly speaking, the juxtaposition ‘social and living conditions and elements of personality’ is scientifically inaccurate. For how, ultimately, are the ‘elements of personality’ determined other than by inheritance and those same ‘social and living conditions’? And is not that ‘inheritance’ itself determined by these same ‘living conditions’ of our parents and ancestors, which influenced their ‘elements of personality’?” [22, p. 6]. In 1948, a year before his death, Semashko, addressing an academic conference at the Institute for Healthcare Organisation and the History of Medicine, part of the Soviet Academy of Medical Sciences, said: “No one denies the importance of the constitution, inheritance, and biological factors in general, but the decisive role in disease development is played by social factors, people’s working and living conditions, starting from an early age” [21, p. 313]. Most clinicians in the first half of the twentieth century did not share such views. Since then, however, they have gained international acceptance. In 1980, for example, World Health Organization experts determined the approximate ratio of the various

factors affecting human health, and in 1994, on the basis of this data, the Interdepartmental Commission on Healthcare of the Security Council of the Russian Federation determined that for the Russian Federation people’s state of health was 10–20% down to their genes, 50–55% to their living conditions and lifestyle, 10–15% to their healthcare provision, and 20–25% to their environmental conditions.²¹

Semashko saw healthy living as key to prevention and regarded it as one of the most important areas of public healthcare. He supported a total ban on alcohol sales²² and total abstinence from its use. For example, addressing the Tomsy Food Industry Workers’ Club in Moscow in February 1926, he said: “Drunkenness is rooted in the conditions of people’s cultural and social backwardness, and so the most radical measures in the fight against drunkenness and improving management and raising the level of culture. By following this path, we will find the solution to the fight against drunkenness; any other paths based on purely routine prohibition will be powerless without foundation. ...Trade unions must shape public opinion so that every drunkard feels out of place in this sober family...”.²³ Semashko was one of the founders of the All-Union Society for the Fight Against Alcoholism, which waged an extensive nationwide anti-alcohol campaign. In 1929, he and its chairman, Yuri Larin, challenged a decision by the Moscow Soviet of People’s Deputies to allow a number of Moscow’s elite restaurants (the Praga, Bolshaya Moskovskaya, Continental, Evropa, Metropol, and others) to sell alcohol on public holidays and the day before, even though this was prohibited by a resolution of the RSFSR Council of People’s Commissars, dated 29 January 1929. The Secretary of the Moscow Soviet of People’s Deputies, Comrade Kozlov, who issued the permission, commented:

²¹ For more details on this, see <http://68.rospotrebnadzor.ru/content/538/20653>.

²² Semashko regarded alcohol consumption as one of the social factors having a negative impact on public health. Yelena Farobina, who heads a clinic for child diseases at the I.M. Sechenov First Moscow State Medical University, recalls that Semashko never drank alcohol or smoked.

²³ Transcript of a speech by Comrade Semashko, “On the fight against alcoholism”, at the Tomsy Food Industry Workers’ Club, State Archive of the Russian Federation (SARF), f. A482, op. 1, d. 593, l. 17–24.

“It is the government’s task to protect first and foremost workers and labourers from excess consumption of vodka, but not members of other classes, let alone foreigners and the well-to-do”.²⁴

In 1920, after the Bolsheviks had taken Crimea, “the chief doctor of the republic” was sent there to set up health resorts and recreation centres. After returning to Moscow, he presented a draft version of the decree “On the use of Crimea for the treatment of workers”, of 21 December 1920, which was subsequently passed by the government. For the first time anywhere, the state took responsibility for organising visits to health resorts for its citizens. In January 1921, the first patients from across the country were sent to Crimea for treatment, and during the year, thanks to Semashko’s work, an “All-Russia Health Resort” was established there.²⁵

After the establishment of Soviet rule in Crimea, and despite the acute shortage of medical personnel, mass repressions were instigated against “class enemies”, including doctors, nurses and medical assistants, who were incriminated by their assistance to the Whites. Semashko came to Crimea with a mandate from the RSFSR Council of People’s Commissars that allowed many medical workers to avoid the death penalty [22, p. 350].

Correspondence between Semashko and the All-Russia Extraordinary Commission on the possibility of releasing health workers convicted during the Civil War has been preserved. In several hundred letters, the People’s Commissar for Public Health asks for the guilty verdicts against regular health

workers to be reconsidered.²⁶ Thanks to his intervention, dozens of doctors, nurses and medical assistants were cleared.

On the other hand, Semashko played a role in the deportation of intellectuals who did not toe the Party line. On 21 May 1922, Semashko wrote a secret letter²⁷ to Lenin and the members of the Politburo of the Communist Party Central Committee, in which he spoke of important and dangerous trends in the medical profession, and the need (as agreed with the State Political Directorate under the NKVD of the RSFSR) to remove the high-ranking Menshevik and Socialist Revolutionary physicians who had addressed the Second All-Russia Congress of Physicians, held in Moscow on 10–14 May 1922 [24, p. 72].

This letter was most probably an important factor in the decision to exile the scientists from the country [24]. Semashko wrote: “...To be extremely cautious in matters of the reconstruction of our Soviet system... Any concept of the ‘zemshchina’ needs to be mercilessly eradicated... To consider any attempts to replace Soviet (class-based) medicine with community (‘popular’) and insurance-based (‘non-Soviet’) medicine politically unacceptable... The State Publishing House is not to permit specialists and their societies to publish newspapers and journals of a socio-political (not scientific) nature...” [24, p. 96]. In fact, Semashko exaggerated the separatist tendencies in the medical community by ascribing a political bent to them: the delegates at the Second All-Russia Congress of Physicians had not suggested changing the country’s political principles, but had recommended complementing the state healthcare system with community healthcare [25, 26]. However, had their proposals been implemented in the form in which they were presented, the fundamental principle of the Semashko Model — the existence of a single, centralised governing body for healthcare (a kind of “general staff” of healthcare) — would have been undermined, which, given the

²⁴ Semashko and Larin challenged the decision to allow a number of Moscow’s elite restaurants to sell alcohol on public holidays and the day before, issued by the Secretary of the Moscow Soviet of People’s Deputies, Comrade Kozlov. After a review, it was confirmed that the permission had been granted unlawfully. See: File on the protest by Comrade Semashko, People’s Commissar for Public Health, and Yu. Larin, Chairman of the Society for the Fight Against Alcoholism, against an order of the Moscow Council of People’s Services permitting the sale of alcohol on public holidays and the day before, SARF. f. 1235, op. 74, d. 2526, l. 7.

²⁵ Under Russia’s programme of free public healthcare, the government undertakes to provide treatment at health resorts for certain categories of citizens, paid for out of the federal budget under Russian law.

²⁶ Semashko asked for the reason for their detention to be clarified, for their sentences to be reviewed if possible, and for the possibility of acquitting them to be considered. See, for example: SARF. f. A482, op. 1, d. 226. Correspondence with the All-Russia Extraordinary Commission on the detention and release from detention of physicians.

²⁷ The full text of this letter was not published until after the fall of the Soviet Union.

socioeconomic crisis at the time, could have made the situation in the country significantly worse.²⁸

Semashko played an important role in the fate of Alexander Chizhevsky [27], supporting his research (in 1927–1929, excerpts from Chizhevsky’s research were published in the *German-Russian Medical Journal*, which was edited by Semashko) even though many Marxist scientists regarded Chizhevsky’s groundbreaking ideas as pseudoscientific and counterrevolutionary. Chizhevsky wrote: “Nikolai Aleksandrovich was the editor of my ‘heresies’, and fully shared the view that these natural phenomena needed to be studied in depth. For this editorial work, he incurred the dissatisfaction of Stalin, who had been given a grossly distorted picture of the nature of my works, but after the latter had talked to Semashko in person the matter was resolved without any repercussions” [28, p. 13]. According to Chizhevsky, Semashko was one of the scientists who “knew even then that statistical patterns were fully equal in value to laboratory experimentation” [29, p. 730].

The “chief doctor of the Soviet republic” played an equally important role in the fate of Vladimir Vernadsky,²⁹ who was arrested by the Cheka in Petrograd in 1921. Thanks to a personal appeal from Semashko (who had studied under Vernadsky at IMU), the outstanding scholar and scientist was released [29, p. 62].

Despite its significant achievements, the work of the People’s Commissariat for Public Health under Semashko also had its shortcomings. In 1926, the RSFSR Council of People’s Commissars criticised the Commissariat for the shortcomings in rural healthcare. It also highlighted the need for better measures against occupational health problems, for specialised healthcare, and for better medical services for children. At the same time, the Commissariat was tasked making medicines more widely available.

Semashko acknowledged that the healthcare system had its problems, and did not put all the blame on insufficient funding. For example, in his

1929 article “All focus on streamlining”, he called for better management in the sector, bearing in mind the shortage of resources: “There is no hiding the fact that a great many of the shortcomings in medical work are the result not so much of a shortage of resources as of our poor management: the queues at health centres, irregularities in patient treatment, breaches of workplace discipline and many basic issues in healthcare practice, could be eliminated, or at least mitigated, were efficiency more deeply embedded in our culture” [30, p. 4].

At the end of the 1920s, the drive towards collectivisation and industrialisation meant that healthcare services for industrial and agricultural workers needed to be established as soon as possible. Semashko believed that the kolkhoz and sovkhoz movements would make treatment and prevention work easier, but that it was too early to introduce a healthcare system based on class. In October 1929, Semashko gave a speech to a meeting of the Organisational Bureau of the Communist Party Central Committee, in which he analysed the healthcare system, identifying obstacles to its development (inadequate funding, the shortage and inadequate training of medical personnel, and low pay for health workers), and ways to improve the effectiveness of public health services, and criticised class-based healthcare, specifying the obstacles to its implementation in practice [31]. It may be that it this objective assessment of class-based healthcare was the reason for his dismissal from his post as People’s Commissar for Public Health.

In December 1929, the Communist Party Central Committee proposed that the people’s commissariats for public health of the Soviet republics radically restructure their activities to reflect the challenges facing the country [32]. The work of the People’s Commissariat for Public Health was declared unsatisfactory, and in January 1930 Semashko was relieved of his duties as People’s Commissar for Public Health³⁰ (officially at his own request).³¹ In his last People’s

²⁸ It should, though, be noted that this remains a matter of debate.

²⁹ Vladimir Vernadsky was a mineralogist, crystallography and geologist, a founder of geochemistry, biogeochemistry and radiogeology, and the study of living matter and the biosphere, and of the latter’s transformation into the noosphere.

³⁰ Semashko was succeeded as People’s Commissar by Mikhail Vladimirovsky, until then Chairman of the Central Auditing Commission of the All-Union Communist Party (Bolsheviks).

³¹ File on the release of N. A. Semashko from his duties as People’s Commissar for Public Health and on his appointment to the Praesidium of the All-Russia Central Executive Committee, SARF. f. R1235 op. 75, d. 117.

Commissariat for Public Health order, No. 232 of 25 January 1930, he thanked his colleagues for their honest and productive work.³²

Semashko headed the Commission for the Improvement of Children's Lives. He successfully addressed the problems of child homelessness, established children's recreation centres, and developed some extremely important decrees on child health protection. At his initiative, the first edition of the Soviet Union's *Great Medical Encyclopaedia* was compiled and published in 1927–1936. He also chaired the Supreme Council for Physical Education, and played an active role in the establishment of institutes of physical education in Moscow and Saint Petersburg. He was the first director of children's literature publishers Detgiz. The former People's Commissar for Public Health played an active role in the establishment of the Academy of Medical Sciences of the USSR, and in 1945 was elected a full member of the RSFSR Academy of Pedagogical Sciences. From 1945 to 1949, Semashko directed the Institute of School Hygiene, part of the RSFSR Academy of Pedagogical Sciences, and successfully led theoretical work on schoolchildren's daily routine of activities and rest, and their hygiene education. In 1946, he set up and headed a commission of the Praesidium of the Academy of Medical Sciences

to study the public health consequences of the war. Nikolai Semashko died on 18 May 1949 and is buried in Moscow's Novodevichy Cemetery.

Some of the principles of Semashko's healthcare model (national healthcare and universal social protection) were later adopted internationally.³³ The methodological foundations of public healthcare laid out by Semashko are currently being successfully put into practice in Russia under its programme of free public healthcare. However, despite the numerous Soviet works on Semashko's life, an ideologically neutral assessment of the character of the first People's Commissar for Public Health remains an issue.

Acknowledgements

The authors would like to thank Yelena Farobina for her contribution to this article.

³³ To an extent, the Semashko Model may be seen as a precursor of that developed by the British economist William Beveridge, who headed a committee tasked with surveying Britain's social insurance and allied services. His report formed the basis for the healthcare model named after him (the Beveridge Model). This model was developed in 1942, and in 1944, the British government set about reforming the UK's social insurance system on the basis of the Beveridge Report. A fundamental difference between the Soviet model of healthcare, the methodological foundations of which were laid out by Nikolai Semashko in 1918, and the Beveridge Model developed in Britain in the 1940s was that in the former the state paid all, not just basic, healthcare costs.

³² SARF. f. A482, op. 42, d. 5465, l. 6.

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