

**POVERTY OR IGNORANCE?
THE CHALLENGE OF SOCIAL DISEASES IN BUKOVINA
AROUND 1900**

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Abstract: *One of the great challenges of the transition to the 1900s was the state of health of the inhabitants of Bukovina. Facing with all sorts of clinical cases, the physicians have tried to understand their mechanisms, identifying at the same time the biological and social dysfunctions or the cultural patterns that generated them. Some of these physicians would reveal to people that food is not just a blessing and that, under certain conditions, it can become the enemy of health, bringing with it misery and death. From 1880 to 1910, a large number of people, mostly adults, fell victim to pellagra, tuberculosis, and alcoholism. The campaigns to combat social diseases initiated by the personalities of the epoch, the press involvement, and the politicians' interrogations have become increasingly common. Equally, a different kind of medicine was called to affirm its ability to heal the illnesses caused by poverty and ignorance, helping and teaching the sick to avoid the adverse effects of their excesses.*

Keywords: *Bukovina, social diseases, pellagra, tuberculosis, alcoholism, social behaviour*

Rezumat: *Sărăcie sau ignoranță? Provocările bolilor sociale în Bucovina în jurul anului 1900. Una dintre marile provocări ale trecerii către anii 1900 a reprezentat-o starea de sănătate a locuitorilor Bucovinei. Confruntându-se cu tot felul de cazuri clinice, medicii au încercat să le deslușească mecanismele, identificând totodată disfuncțiile biologice și sociale ori tiparele culturale care le generau. Unii dintre acești doctori aveau să le descopere oamenilor că mâncarea nu înseamnă doar binecuvântare și că, în anumite condiții, ea poate deveni inamicul sănătății, aducând cu sine mizeria și moartea. În intervalul 1880-1910, un mare număr de persoane, în majoritate adulți, au căzut victime pelagrei, tuberculozei și alcoolismului. Campaniile de luptă împotriva bolilor sociale inițiate de personalitățile vremii, implicarea presei și interpelările politicianilor au devenit din ce în ce mai frecvente. De asemenea, o altfel de medicină era chemată să-și afirme capacitatea de a trata boala adusă de sărăcie și ignoranță, ajutându-l și învățându-i pe bolnav să evite consecințele nefaste ale exceselor lor.*

Résumé : Pauvreté ou ignorance ? Les défis des maladies sociales en Bucovine aux alentours des années 1900. L'état de santé des habitants de la Bucovine représenta un des grands défis du passage vers les années 1900. Confrontés avec toutes sortes de cas cliniques, les médecins essayèrent de démêler leurs mécanismes, identifiant en même temps les dysfonctionnements biologiques et sociaux ou les modèles culturels qui les générèrent. Quelques-uns de ces docteurs montreront aux gens que la nourriture ne signifie seulement bénédiction et que, en certaines conditions, elle peut devenir l'ennemi de la santé, apportant avec soi la misère et la mort. Dans l'intervalle 1880-1920, un grand nombre de personnes, en majorité des adultes, tombèrent victimes à la pellagre, à la tuberculose et à l'alcoolisme. Les campagnes de lutte contre les maladies sociales initiées par les personnalités de l'époque, l'implication de la presse et les interpellations des hommes politiques devinrent de plus en plus fréquentes. Une telle médecine était appelée, aussi, à affirmer sa capacité de traiter la maladie causée par la pauvreté et l'ignorance, aidant et enseignant le malade à éviter les conséquences néfastes de ses excès.

INTRODUCTION

Perceived acutely, distinctly or in relation to other factors, the diseases dictated significant changes in the rhythm of Bukovina's modernization. Their manifestations led to measures in order to reduce their impact on the province's population, favouring, to a certain extent, the medicalization, sanitation and the abandonment of some harmful behaviours and practices. In fact, since the mid-nineteenth century, the physician Carl Hampeis observed that most of the "gastro-nerve" disorders were caused by the air temperature variations (especially in spring and autumn) and by the living spaces ("miserable", "overpopulated" and "polluted")¹; to all this, the unbalanced diet and excessive consumption of alcohol were added. Under such circumstances, the occurrence of the disease was a matter of time, a fact confirmed by pellagra and tuberculosis, whose presence in Bukovina was generally linked to poverty, misery and ignorance. Unfortunately, such social infirmities did not only affect those living in the rural areas and in the outskirts of the cities, or the villains, but they touched the whole society as a degenerative phenomenon. But what were and how evolved these "abominable diseases"², as they were called, in the early 1900s, by the periodicals of Czernowitz. For a long time, the physicians have endeavoured to understand their pathological and social mechanisms, seeking their causes and trying to prevent them.

¹ Carl Hampeis, *Medicinish-topographische Skizze der Bukowina*, in "Medicinishe Jahrbücher des kaiserl.-königl. österreichischen Staate", Wien, 1846, Vol. 57, p. 110-112.

² Gheorghe Manolescu, *Pelagra*, in "Deșteptarea", Cernăuți, 1904, no. 61, 5/18 August, p. 2.

FOOD THAT BRINGS DISEASE: PELLAGRA

Due to the "transmission of a microbe" from man to animal, to the "inoculation" of dust in the skin, to the sunlight or the contaminated water³, the pellagra sparked heated discussions among physicians, the most veritable opinions linking the affection to an almost "exclusive" and "abusive" consumption of maize flower and corn meal⁴. Accordingly, there were *two major* theories developed: *the zeist*⁵ and *the toxic-zeist*⁶. The supporters of the first mentioned theory believed that the pellagra was caused by a "monotonous" diet based on corn, a food that could not be "assimilated by the digestive organs of man as well as the other cereals"⁷. The discovery of vitamins, in 1922, and then of the role of niacin (known as vitamin B3 or PP, for *pellagra preventis*) was to confirm some of the assumptions circumscribed to this theory, defining the pellagra as a nutritional or a "social disease prototype" generated by the deficiency of vital nutrients for the body⁸. In turn, the partisans of toxic theory said the disease was due to the consumption of corn contaminated with mushrooms and molds such as *Penicillium glaucum*, *Aspergillus niger*⁹ or *Aspergillus glaucus*¹⁰. In agreement with Cesare Lombroso's statement, the pellagra would not have been caused by poverty (which explains the predilection for the handy corn), but rather by a specific virus that infected the corn; obviously, this virus would have had a devastating action in an exhausted and neglected body, hence the link between pellagra and poverty (without, however, creating a causal relationship). Eliminating moldy corn from food would have led to a reduction in the number of patients and, subsequently, to the extinction of the disease¹¹.

³ Monica Ginnaio, *Pellagra in Late Nineteenth Century Italy: Effects of a Deficiency Disease*, in "Population", 2011, Vol. 66, no. 3-4, p. 586.

⁴ Iacob Felix, *Istoria igienei în România în secolul al XIX-lea și starea ei la începutul secolului al XX-lea* [The History of Hygiene in Romania in the 19th Century and its State at the beginning of the 20th Century], București, 1901, Vol. I, p. 195.

⁵ According to it, the ingestion of corn (which is poor in nutrients, especially in nitrate), whether healthy or altered, would cause pellagra; cf. *Enciclopedia medica italiana*, Firenze, 1984, Vol. 11, p. 1379.

⁶ The pellagra theory of mycotoxins (molds) from spoiled corn, cf. *Ibid.*

⁷ Iacob Felix, *Istoria igienei...*, p. 196.

⁸ Savvoula Savvidou, *Pellagra: A Non-Eradicated Old Disease*, in "Clinics and Practice", 2014, no. 4, p. 637.

⁹ *Mamaliga — eine Kranlcheitsursache*, in "Bukowinaer Post", Czernowitz, 1893, no. 5, 23 November, p. 4.

¹⁰ Iacob Felix, *Istoria igienei...*, p. 197.

¹¹ Monica Ginnaio, *Pellagra...*

Catching up the information from the European medical field, Gheorghe Manolescu described, in the Czernowitz newspaper "Deșteptarea", the symptoms specific to the disease's "stages": "Pellagra is manifesting in the beginning - in the intermittent stage - by the general weakening of the body, with a start of redness on all parts of the body exposed to the sun; the weakening is always accompanied by: headaches, dizziness, continuous fatigue, disgust, and social reserve. These symptoms disappear in the fall, but return again in the spring, more and more accentuated. After a few years of suffering, the patient enters the second stage - the remittance - which begins with the perfect redness of all parts seen by the sun, and a tingling all over the body, accompanied by cold; the skin starts to peel in scales - hence the peasants call it desquamation/ *jupuială* - then it becomes red, brown, thin and very painful. When the illness takes hold of the unhappy suffering, the third stage starts - continuously - with general brutalization, diarrhea, cramps, delirium, melancholy and finally mania that determines the patient to commit suicide by drowning or hanging"¹². Although, at that time, the "weapons of science" could not unravel the mystery of the disease, for the author it was certain that "the pellagra makes victims only in the masses of the labourer, which are inadequate and badly fed ... so the chronic hunger is the direct cause of the pellagra, which goes along with the alcohol"¹³.

Making an insight into the history of the pellagra in Bukovina, Dr. Ioan Volcinschi believed that the disease was almost unknown before the second half of the 19th century, even though, according to Iacob Felix, the corn would have entered here in culture in 1786¹⁴. It is assured that, at the end of the nineteenth century, Dimitrie Dan recognized that the basic food for the peasants of Straja was the corn meal named *mămăliga*¹⁵. Unfortunately, the poor nutrition and excessive corn consumption (combined with other favorable factors) led to contract a serious disease "as if it was created for the peasant, in his miserable life similitude"¹⁶. Dr. Volcinschi stated that the first cases of pellagra were reported around 1884, sporadically, in the districts of Suceava, Gura Humorului, Rădăuți,

¹² Gheorghe Manolescu, *Pelagra...*

¹³ *Ibid.*

¹⁴ Iacob Felix, *Istoria igienei...*, p. 185.

¹⁵ Dimitrie Dan, *Comuna Straja și locuitorii ei. Studiu istoric, topografic și folkloric. Cu 9 ilustrațiuni, portretul autorului și o hartă a comunei*, [The Village of Straja and its Inhabitants. Historical, Topographic and Folklore Study. With 9 illustrations, the portrait of the author and a map of the village], Cernăuți, 1897, p. 58.

¹⁶ Constantin Bărbulescu, *România medicilor. Medici, țărani și igienă rurală în România de la 1860 la 1910* [Physicians' Romania. Doctors, Peasants and Rural Hygiene in Romania from 1860 until 1910], București, Editura Humanitas, 2015, p. 192.

Siret, Czernowitz and Kotzman¹⁷. Quoting the Presl's statistics, Friedrich Prinzing wrote that in Bukovina, in 1887, there were 8 cases of pellagra, in 1900-27 cases, and in 1903 over 400 cases "merely in the district of Suceava"¹⁸. Having access to information on the state of health of the inhabitants, the provincial health inspector, Dr. Basil Kluczenko noted that, comparing to 1899, the number of patients with pellagra increased from 1900 to 1903 by 275%¹⁹. In 1905 there were 1,056 cases, meaning 479 more than in the previous year²⁰, or 1% of the population of Bukovina, as Dr. Ștefanovici affirmed at the Congress of Physicians and Naturalists held in Meran²¹. In 1906 the number of patients reached 2,266, and in 1909 Kluczenko recalled 1,250 persons affected by this disease. Altogether, the situation became extremely serious, Jászi noting that most of the villages were "infected with pellagra"²²; in turn, George M. Niles placed Bukovina on the second place in the Austrian empire, after Tyrol, with 2.9% of the population suffering from it²³. Not by accident, in 1910, Dr. O.G. (probably Octavian Gheorghian) wrote the following as an ultimatum: "The greatest enemies of our people are brandy - *rachiu* - and pellagra. They decimate whole villages, and if it goes on like that, then it will not take long, when hospitals can no longer count the number of sick"²⁴.

The prevalence of pellagra was higher in the districts of Suceava, Gura Humorului, and Czernowitz and less in Wiznitz, Siret, and Câmpulung. As the distribution was relatively uniform, the hypothesis of the vulnerability of inhabitants of the mountainous areas - as a result of the purchase of cheap and poor-quality corn or of its improper storage conditions - was invalidated by numbers. According to the journal "Die Wahrheit", the incidence of the disease in mountain communities was lower, as a result of their "prosperity"; several cases

¹⁷ Octavian Lupu, *Sozialmedizin im alten Österreich. Die Bekämpfung der Pellagra in der Bukowina zu Beginn dieses Jahrhunderts*, in "Österreichische Osthefte", Wien, 1971, Vol. 13, no. 4, p. 343-348.

¹⁸ Friedrich Prinzing, *Handbuch der medizinischen Statistik*, Jena, 1906, p. 396.

¹⁹ Octavian Lupu, *Aspecte din istoria medicinei în Bucovina sub dominația habsburgică* [Aspects of the History of Medicine in Bukovina under Habsburg Domination], ms., Biblioteca Bucovinei "I.G. Sbiera", fond *Bucovina*, inv. 253.528, f. 110.

²⁰ *Die Pellagra in der Bukowina*, in "Bukowinaer Rundschau", Czernowitz, 1906, no. 5165, 23 August, p. 3.

²¹ Octavian Lupu, *Aspecte din istoria medicinei...*

²² Oscar Jászi, *The Dissolution of the Habsburg Monarchy*, Chicago, 1929, p. 232.

²³ George M. Niles, *Pellagra*, Philadelphia & London, 1916, p. 20.

²⁴ *Curățenia casei și a trupului omenesc – povețe pentru popor date de Dr. O. G.* [House and Human Body Cleaning – Advice for People given by Dr. O. G.], in "Calendar pe 1911", Cernăuți, 1910, p. 54.

originated from the "extremely precarious environments", an exception being a few "rich compatriots"²⁵. Even so, the drama consumed in August 1907 in the small town of Câmpulung opened an inquiry and a long series of questions about those 33 patients with pellagra, "officially declared" by Dr. Kubrynski²⁶. The identification of the residence of 374 patients diagnosed with pellagra (who were admitted to the Mental Hospital in Czernowitz, during 1894-1907) showed that 143 came from the district of Czernowitz, between 30 and 35 from the district of Siret, Kotzman, Storozynetz, and Rădăuți, and 23 from Zastawna; the number of those from the districts of Gura Humorului, Suceava, Waschkoutz and Wiznitz ranged between 15 and 17; 8 were from the suburbs of Czernowitz (Horecea and Roșă), and only 5 from the district of Câmpulung²⁷.

By the first decade of the twentieth century, it became certain that the disease affected the rural population, especially "the working class of peasants who are eternally overworked and under hygienic consumption"²⁸. As a result, the physicians were called to find the most effective remedies, alerting the local authorities along with their regular visits, and planning, as much as possible, the prophylaxis of pellagra. The surveys conducted by the Dr. Philipowicz, Dr. Kluczenko, and Dr. Volcinschi highlighted the link between poverty, "under-nourishment of villages population feeding, especially with proteins and fats", the alcohol consumption and the restrictions imposed during religious fasting days²⁹. Analysing the peculiar situation of patients with pellagra, Dr. Kluczenko discovered that of a total of 1,250 persons, 21% did not possess land of one are (100 square meters), 47% had up to 100 ares, and only 2% had more than 200 ares³⁰. Another analysis carried out by the same doctor showed that most of the victims were women; thus, out of a total of 2,266 patients registered in 1906, 866 (38.8%) were men, and 1,361 (61.2%) were women³¹. The reason for this difference could have been the cultural and biological particularities of the province's

²⁵ *Der Erbfeind der Bukowiner Bauern*, in "Die Wahrheit", Czernowitz, 1908, no. 7-8, 8 Februar, p. 26.

²⁶ *Pellagraenquette*, in "Bukowinaer Post", Czernowitz, 1907, no. 2104, 1 August, p. 2; *Pellagraenquette*, in "Bukowinaer Post", Czernowitz, 1907, no. 2106, 6 August, p. 3.

²⁷ *Pellagröse Geistesranke*, in "Czernowitzer Allgemeine Zeitung", Czernowitz, 1908, no. 1324, 10 Juni, p. 4.

²⁸ Gheorghe Manolescu, *Pelagra...*

²⁹ Dr. W. Philipowicz, *Beobachtungen über das Vorkommen von Pellagra in der Bukowina*, in "Wiener medicinischen Blättern", Wien, 1885, no. 14-15; B. Kluczenko, *Pellagra in der Bukowina*, in "Das österreichische Sanitätswesen", Wien, 1898; Octavian Lupu, *Aspecte din istoria medicinii...*, f. 111.

³⁰ Basil Kluczenko, *Die Bekämpfung der Pellagra in der Bukowina im Jahre 1909 (III)*, in "Bukowinaer Post", Czernowitz, 1911, no. 2638, 15 Januar, p. 4.

³¹ *Der Erbfeind der Bukowiner Bauern...*, p. 25.

population, where the women were not only wives and mothers, but also active workers of the land; they were, as a rule, less trained than men, and their role in the community (and often in the family) was a secondary one. Working during their pregnancy and even when they were breastfeeding, they could not provide for themselves the nutritional needs (niacin or tryptophan); so, the high level of estrogen in the body had favoured the development of pellagra³².

Concerning the impact of the disease on the age groups, the most vulnerable were persons aged 21-60, while the number of sick children was rather low³³. In a note inserted in the newspaper "Bukowinaer Post" of the 15th April 1906, it was estimated that in 1903 of the 6,685 deaths among children aged 0-1, only 12 were the consequence of the pellagra (as opposed to 612 caused by tuberculosis)³⁴. Beyond this information, it is almost impossible to find the real number of patients with pellagra in Bukovina, the disease having a long development, sometimes more than a decade, with fatal evolution in 3-4 years³⁵.

CONSUMING THE PATIENT: TUBERCULOSIS

As severe as pellagra, but claiming its victims throughout much of known human history³⁶, tuberculosis was caused by *Mycobacterium tuberculosis* which, probably, may have killed more persons than any other microbial pathogen³⁷. Beside scrofula or tuberculous infection of the cervical lymph nodes that affected especially the children, phthisis (or pulmonary consumption, lung ulceration or *oftica*) was the most important manifestation of tuberculosis³⁸, the most widespread, and also the most aggressive. Dr. Denarowski, the health advisor of Bukovina, described it as having a quick and tragic ending³⁹. Until the epochal discovery of the tuberculosis bacillus and, implicitly, of its treatment, the illness had acquired the dark celebrity, making a physician from the beginning of the nineteenth century declare: "Of all hectic affections, by far the most important is pulmonary consumption, a disease so frequent as to carry off prematurely about one-fourth part of the inhabitants of Europe, and so fatal as often to deter the

³² Monica Ginnaio, *Pellagra ...*, p. 590.

³³ *Ibid.*, p. 594-595.

³⁴ *Eine Landesgefahr*, in "Bukowinaer Post", Czernowitz, 1906, no. 1904, 15 April, p. 2.

³⁵ Basil Kluczenko, *Die Bekämpfung der Pellagra...*, p. 5.

³⁶ Thomas M. Daniel, *The History of Tuberculosis*, in "Respiratory Medicine", 2006, No. 100, p. 1862.

³⁷ *Ibid.*

³⁸ Lester Snow King, *Medical Thinking. A Historical Preface*, Princeton University Press, 1982, p. 47.

³⁹ Octavian Lupu, *Aspecte din istoria medicinii...*, f. 75.

practitioner even from attempting a cure"⁴⁰. In Bukovina, the traditional healers tried to ameliorate the "long-lasting chest pain", by cleansing out the mucus from the body and applying the therapeutic properties of badger's liver⁴¹, cabbage leaf, mallow, horseradish or acacia; even Dr. Carl Stransky, the Protomedicus of Bukovina had tried to treat a patient with *Ihtisia confirmata* using a weed called the "deer tongue" (*Seclopendrium Asplenium*)⁴². Unfortunately, only a few treatments had a long-term effect, knowing that in some cases, from the onset of tuberculosis to death, the estimates of survival range from days or months (as Denarowski had said) to several years.

By the middle of the nineteenth century, in Bukovina, Dr. Hampeis defined tuberculosis (or *ftizia*) as a chronic affection that was so common that it would cause the deaths of a quarter of the population⁴³. One of the most popular hypotheses of its causes was heredity, according to which "the children from parents with tuberculosis can inherit the predisposition to suffer from the same disease"⁴⁴. A favourable factor of the sickness was the unfavourable climate or especially the harsh winter weather. In a special lecture, the ethnographer, naturalist, priest and teacher Simion Florea Marian told his students that, "along with diphtheria, tuberculosis was raging among the youth"; for this reason, the pupils had to "be attentive in all respects and not go anywhere in the evenings and nights"⁴⁵. In addition, the living conditions could contribute to the spread of airborne diseases such as tuberculosis and respiratory infections like pneumonia. In his report on the residence of the Golembiowski family, Dr. Exelbirth noted that: "the above-mentioned dwelling does not cope with human comfort, and hygienically, it must be regarded as harmful to the health of its inhabitants, because the bare walls, blunted from rudimentary tree trunks, are not at all suitable to provide sufficient defence against the harsh and stormy atmospheric conditions that haunts up the mountain, all year round, as well as the air of the interior scattered with the emanations of the devious insects and the humidity of cold floors, must have very adverse consequences for the sanitation of the inhabitants". Under such circumstances, it was not surprising that the "older

⁴⁰ René Dubos, Jean Dubos, *The white plague: Tuberculosis, Man, and Society*, Rutgers University Press, 1996, p. 9.

⁴¹ Dr. Ionică Nandriș, *Din arhiva Familiei Nandriș. Satul nostru Mahala din Bucovina. Însemnări pentru mai târziu* [From Nandriș Family Archive. Our Village Mahala in Bukovina. Notes for Later], in "Glasul Bucovinei", Cernăuți-București, 1995, no. 6, p. 138.

⁴² Octavian Lupu, *Aspecte din istoria medicinei...*, f. 68.

⁴³ Carl Hampeis, *Medicinisches-topographische Skizze der Bukowina...*, p. 108.

⁴⁴ Iacob Felix, *Istoria igienei...*, p. 149.

⁴⁵ Paul Leu, *Iraclie Porumbescu*, Suceava, Editura Euroland, 2000, p. 220.

members of this family" were often the subjects of "pectoral disorders"⁴⁶. Hampeis also invoked "the life of the villagers in their miserable, over-saturated housing with the polluted air"⁴⁷. Wilt and syphilis were seen as "forces" that "favoured the excessive tuberculosis mortality, still being common among the population and less treated; this lack of attention was followed by the inevitable occurrence of pulmonary metastases"⁴⁸.

Another hypothesis, more and more widely accepted by doctors around 1900, was that tuberculosis is transmitted by persons who release large numbers of organisms (bacteria) in their sputum. In 1910, in his "Advice for People", Dr. O. G. revealed how the disease could be contracted: "I saw many young girls dying of ruthless *oftica* (tuberculosis), which was brought by the poor themselves from the village's dance party... You just observe the handkerchiefs, when a dancer or a girl blows his or her nose after the dance; the dust and the blackness do not only remain in the nose, but go down to the gentlest parts of the lungs, passing through a long incubation into the limbs of a person"⁴⁹. Trying to be fully understood, the physician summarized the stages of the disease in the following terms: "it (tuberculosis) slips into the body, for initially it does not cause special pain, but erodes slowly and surely; at the outset, the patient does not notice it, coughs a little, sweats sometimes at night, and after several weeks, the sick realizes that he/she is weakening and drying out day by day; later, is spitting yellowish, greenish phlegm, mixed with blood particles, until finally is struggling with sweat, losing sleep, losing all appetite, losing weight, and only death takes him/her away from these torments"⁵⁰.

Bratassevič's statistics indicate in 1895 tuberculosis as the cause of death in the case of 9.07% of the inhabitants of Bukovina and in 1896 – 9.06%. Regarding the civil status of the victims of the disease, in 1895, 465 men and 420 women were single, 477 men and 418 women were married, 61 men and 130 women were widows, and 5 men and 2 women had no a defined marital status. Despite a relative balance, these numbers show that women under the age of 40 were less resistant to the disease; the proportion has been definitively modified for men over 40. It was also detected a relationship between tuberculosis and the patients' profession, the physicians explaining the lower mortality rate due to the lower degree of industrialization and urbanization; in comparison with other provinces of the Austrian Empire, most of Bukovina's population was engaged in agriculture,

⁴⁶ *Ibid.*, p. 174-175

⁴⁷ Carl Hampeis, *Medicinischn-topographische...*

⁴⁸ *Ibid.*

⁴⁹ *Curățenia casei...*, p. 52.

⁵⁰ *Ibid.*, p. 49.

with a substantial majority of them living in rural areas. For example, of a total of 100 deaths due to tuberculosis, 36.80 males and 38.07 females were employed in agriculture and forestry, 6.33 males and 2.68 females in industry, 1.87 males and 1.21 females in trade and transports, 0.34 males and 0.31 females in services (or as servants), 2.18 males and 0.55 females in army and liberal professions, and 3.44 males and 5.82 females workless⁵¹. Such figures demonstrate the explicit contrast between agriculture and the rest of the occupations; furthermore, the women engaged in agriculture or unemployed were at risk, as well as the men employed in urban activities.

Even so, unlike other imperial provinces where the difference between urban and rural areas was significant (tuberculosis being an illness specific to the urban environment), there was a certain degree of uniformity of the figures for Bukovina of the last decade of the 19th century, as a result of association of the disease with poor living conditions, poverty, and untreated lung diseases, etc. As an illustration, from 1887 to 1890, in Horodnicul de Jos it was estimated that 9.16% of the deaths were directly attributed to tuberculosis⁵²; in Czernowitz, in 1895, 9.28% of the inhabitants died from TB, and in 1896, 12.36%⁵³.

According to the data presented at the Congress in Berlin (1899), for the year 1895/1896 there were disclosed in Bukovina 1,934 deaths from pulmonary tuberculosis, to which were added another 1,182 due to the tuberculosis in other organs⁵⁴; it was a relative increase compared to 1879, when there were announced 1,908 deaths (940 males and 968 females)⁵⁵. The data provided by the health inspector of Bukovina indicated, in 1896, 1,899 deceased persons who died from tuberculosis; in 1897 there were 1,725, in 1898 - 1,970, in 1900 - 1,711, in 1902 - 1,816, and in 1903 - 1,652⁵⁶. Despite this figure, in 1896 Dr. Köhler ranked Bukovina on the last places in the Austrian Empire, indicating 2.75 deaths per 1,000 patients, after Carniola (4.32), Vorarlberg (3.99), Dalmatia (2.96), and Upper Austria (2.77)⁵⁷; a few years later, the number of TB deaths reported

⁵¹ Eduard Bratassevič, *Die Sterbefälle an Tuberculose während der letzten 27 Jahre (1870—1896)*, in "Statistische Monatsschrift", Wien, 1899, p. 347.

⁵² Ecaterina Negruți, Ion Prelipcean, *Date cu privire la evoluția demografică a satului Horodnicul de Jos* [Data on the Demographic Evolution of the Village Horodnicul de Jos], in "Suceava. Anuarul Muzeului Județean", 1979-1980, no. 6-7, p. 261.

⁵³ Eduard Bratassevič, *Die Sterbefälle...*

⁵⁴ *Bericht über dem Kongress zur Bekämpfung der Tuberkulose als Volkskrankheit*, Berlin, 1899, p. 63.

⁵⁵ *Statistisches Jahrbuch für das Jahr 1879*, K.K. Statistischen Central Commission, Wien, 1882, Vol. X, p. 28-29.

⁵⁶ Octavian Lupu, *Aspecte din istoria medicinei...*, f. 12.

⁵⁷ *Bericht über dem Kongress...*, p. 50.

annually has decreased, so in 1900-1901 Dr. Teleky estimating it at 2.33⁵⁸.

However, in this picture somewhat optimistic, there are two variables to be taken into account: the first is linked to the name of the sickness, the diagnosis being a flexible one (often, the population was tempted to define as tuberculosis any disease manifested by cough accompanied by purulent sputum and lack of appetite)⁵⁹, and the second refers to the persons who recorded the death (as long as in Bukovina only a maximum of 25% of deaths were medically certified)⁶⁰. For example, the incorrect or incomplete information has led to an ambiguous situation: out of 100 TB deaths, 68.2 being questioned in 1895, and 65.7 in 1900⁶¹.

At the beginning of the 20th century, one eighth of deaths were attributable to tuberculosis: 194 in 1901, 242 in 1902, 192 in 1903, 229 in 1904, and 235 in 1905⁶². Dr. Teleky's statistics indicated for 1900, 168 deaths from TB (generally, not only pulmonary); in 1901 were communicated 194 deaths, in 1902 - 242, in 1903 - 192, and in 1904 - 229⁶³. Another statistic about the number of patients admitted to the "Hospital of Country" in Czernowitz showed for the period 1907-1909 the presence of 941 people diagnosed with tuberculosis⁶⁴. In the conditions in which the hospitals and the doctors were still few, it was clear that the fight had to be taken on the field of prevention.

ALCOHOLISM – THE PLAGUE OF ADDICTION

Seen as a contributing factor to pellagra and tuberculosis, alcoholism has become in the last two decades of the nineteenth century a social and medical issue that concerned both doctors and politicians. Nevertheless, the high rate of alcohol consumption was no unfamiliar to Bukovina, as long as from the beginning of the Austrian administration some measures were taken in order to combat the excessive use of alcoholic beverages. At that time, the sale on credit was also stopped, recommending the "orientation" of tavern keepers to the agricultural works and the "change of their profession" named by General Enzenberg as

⁵⁸ Ludwig Teleky, *Sterblichkeit an Tuberkulose in Österreich 1873–1904*, in "Statistische Monatsschrift", Wien, 1906, p. 198.

⁵⁹ Elisabeth Dietrich-Daum, "Reporting Death". *The Case of Austrian Tuberculosis Mortality Registration-Critique and Consequences for Historical Epidemiology*, in "Prague Medical Report", 2009, no. 2, p. 153.

⁶⁰ *Ibid.*, p. 154-155.

⁶¹ Ludwig Teleky, *Sterblichkeit...*

⁶² *Zur Wasserteilungsfrage*, in "Bukowinaer Post", Czernowitz, 1906, no. 1959, 23 August, p. 3.

⁶³ Ludwig Teleky, *Sterblichkeit...*, p. 199.

⁶⁴ Octavian Lupu, *Aspecte din istoria medicinii...*, p. 91.

"antisocial". Throughout the 19th century, the issue of excessive alcohol consumption has been recalled and even debated in medical circles, especially during and immediately after the outbreak of devastating epidemics such as cholera. On several occasions, the terms of a law on the alcohol sale monopoly were discussed, and the document of the 19th July 1877 criminalized drunkenness, establishing the penalties related to this delinquency⁶⁵. For example, the link between alcohol consumption and crime was illustrated in the statistics quoted by the physicians A. Baer and B. Laquer; thus, from 1876 to 1880, in Bukovina, as a result of excessive alcohol consumption, 247 people were sentenced to imprisonment for murder, and 132 for drunkenness⁶⁶. Another statistic indicated that for drunkenness were punished 353 people in 1877, 1,077 in 1878, 935 in 1879, 1,798 in 1880, 2,000 in 1881, and 1,567 in 1882; due to drunkenness 65 people were fired in 1878, 5 in 1879, 34 in 1880, 1 in 1881, and 7 in 1882; because they offered alcoholic beverages to minors, 7 persons were charged in 1877, 35 in 1878, 50 in 1879, 1,144 in 1880, 124 in 1881, 96 in 1882, 1,867 in 1883, 2,043 in 1884, and 2,273 in 1885⁶⁷. At the end of 1887, "Revista Politică" – a newspaper from Suceava – stated that: "Those who shall be found drunk in the inns and taverns, in places where spirituous beverages are sold in detail and in small quantities or where such beverages are marketed, like those who are found drunk on the streets or in other public places, as well as those who intentionally instigate someone in such places will be prosecuted under arrest for up to one month, or with a fine of up to 50 florins. Likewise, the waiters or tavern keepers will be punished as well as the owners of places where the burnt spirit drinks are sold in detail or in small quantities, like the representatives, the leaseholders or their tenants who give or allow consummation to drinkers or to children who are not accompanied by older people"⁶⁸.

At the end of the 19th century, everyone seemed convinced of the danger of spreading alcoholism in Bukovina. In the absence of data demonstrating the magnitude of the phenomenon, the physicians and fiscal authorities had begun to monitor the amount of alcohol consumed at the provincial level. Compared to other territories in the Austrian Empire, for the period 1896-1899, the absolute alcohol consumption in Bukovina was average: 33,895 hectolitres (or 4 to 4 ½

⁶⁵ Friedrich Presl, *Production, Ausschank alkoholhältiger Getränke und die Trunkenheitsgesetzgebung in Oesterreich*, in "Statistische Monatsschrift", Wien, 1896, p. 610.

⁶⁶ Abraham Baer, Benno Laquer, *Die Trunksucht und Ihre Abwehr*, Berlin-Wien, 1907, p. 117.

⁶⁷ *Ibid.*, p. 204.

⁶⁸ *Proiectul de lege în contra beției* [Draft Law against Drunkenness], in "Revista Politică", Suceava, 1887, no. 12, 1 November, p. 5.

litres per inhabitant, which means 3 litres less than in 1880)⁶⁹. Yet, the Bukovinians were not great wine or beer lovers, but spirits (brandy); in addition, out of 100 stores that were selling alcohol, 93 were pubs⁷⁰. Consequently, the issue of alcohol consumption had to be re-engaged, since the prospects were not soothing. Still, in the fight against alcoholism, Dr. Lupu identified a paradox: "the support for alcohol consumption was officially directed by the supreme authorities of the empire"⁷¹. Generally, the alcohol industry represented a cost-effective market for agricultural products, and the alcohol production always found a similar retail outlet. In addition, the budgets of rural or urban communities depended to some extent on the marketing of alcoholic products, making the alcohol production an attractive source for the local officials. According to a draft law on the sale of spirits, in the localities of less than 500 inhabitants, an alehouse could be open "for sale in detail of burnt spirits"; however, in those communes "that are often visited by strangers", such a rule was no longer valid⁷². Hence, Dr. Lupu's conclusion: "tavern owners were factors of the political power in Bukovina; their value weighed more than that of community doctors", because "behind them was the most powerful industry in Bukovina: the distilleries - the so-called *velnițe* - which were 44. The owners and their beneficiaries were the new agrarians recruited from the underworld of usurers (Dr. I. Platten), bargain makers, and taverners who had invested over 2,000,000 florins in that industry"⁷³. As the taverns could not be closed (although the stereotype of the Jewish innkeeper will be invoked, more or less openly in Bukovina), the alcoholism had to be prevented through education, and this fell under the responsibility of the state, through its administrative bodies, teachers, priests, doctors, etc. In a certain circumstance, because of its degraded appearance, a school was confused with a tavern: "I was delighted by the beauty of the Ceahor Church and I could not take my eyes off it; I also enjoyed the priest's house, which does not seem to have been done for a long time; but across the road from the priest's mansion, my eyes saw a fenceless and desolate building and believing that it is a rural booze, I was very much surprised how the parson suffers to seat it so hard in his ribs and so close to the beautiful church. Enfolded by this surprise I went downwards; but I did not go too far, and my eyes saw another

⁶⁹ Abraham Baer, Benno Laquer, *Die Trunksucht...*, p. 67-68.

⁷⁰ *Ibid.*, p. 70.

⁷¹ Octavian Lupu, *Aspecte din istoria medicinii...*, f. 120.

⁷² *Proiectul de lege în contra beției...*, p. 4.

⁷³ Octavian Lupu, *Aspecte din istoria medicinii...*

desolate house. Here I commanded the hackney coachman to stop because I saw the door open and some people inside". Asking one of them how many pubs are in the village, the visitor found out that there were four, but the one next to the church was the school⁷⁴. A similar situation was in 1908 in Vicov, a village with 7,000 inhabitants, one school and 40 pubs⁷⁵.

Trying to identify the occasions when the alcohol consumption became a problem, the physicians were surprised to discover an anthropological truth: alcohol was "the liquid of socialization, by excellence"⁷⁶. In 1910, the newspaper "Patria" recorded the consequences of the excess of alcohol consumed on the feast day (as the patron saint's or locality's feast) in the following terms: "The whole village resounds with music, everybody is cheerful and merry because of the feast, and the feast is celebrated in Calafindești more intense than a jubilee. The poorest mower, who can't afford to buy a slate for his child, organizes an exceedingly feast. The little shanty barely gathers the crowd of guests; tables bend under the weight of dishes, bottles go empty and fill up like in a charming palace, music band plays on the porch and, as under the spell of a curse, the whole house is shrouded in a heavy smell of brandy. Drink, get drunk, but if they would sleep after they got drunk! No way! They rejoice at the beginning of their meeting, take counsel together, and then get into an altercation, they fight, and kill"⁷⁷. In Cajvana village, "the day after a great feast, wedding, etc." almost all the children came to school with "a bottle of brandy in their bosom or knapsacks. And do not think they took it without their parents' assent. On the contrary, mothers took care of it. Naturally, at school the bottles were confiscated and the parents called for clarification. Of course, often at such occasions, children get drunk, but with the knowledge of their parents and at the instigation of their guests"⁷⁸.

The same issue of degeneration due to alcoholism was presented by the priest T. B. who described the negative influence of parents who shape their children's attitude to alcohol and future drinking behaviour: "Young children do not like spirits such as wine, beer, brandy, and others. But not just once I saw the parents consuming brandy, the father calling his little boy to himself and urges him to drink, saying: «Take it, sweetheart, take it, taste only one drop, this will keep you going strong, the spirits are healthy, take it, taste it!» The child – what

⁷⁴ *Starea școlii din Ceahor* [Ceahor School's Condition], in "Revista Politică", Suceava, 1889, no. 5, 1 Martie, p. 4.

⁷⁵ Octavian Lupu, *Aspecte din istoria medicinei...*, f. 121.

⁷⁶ Constantin Bărbulescu, *România medicilor...*, p. 177.

⁷⁷ "Patria", Cernăuți, 1910, vol. IV, no. 75, Septembrie.

⁷⁸ Filimon Rusu, *Amintiri. Oameni și locuri din Țara Fagilor* [Memories. People and Places of the Land of Beech], București, Editura Academiei Române, 2009, p. 73-74.

does he know - hears right from his father's or mother's mouth that the spirits are good, they are healthy; they make him vigorous and strong, so he grasps and tastes it. The child tastes, but his eyes are full of tears, he croaks to cry, knocks his little hands over his chest, jumps up; the brandy burns him, and he starts to roar. Now, what is father doing? Recalling that he also experienced it when he tasted the brandy for the first time, he begins to comfort his son by telling him: «Be silent, be silent, don't cry, and drink a little bit of water. Brandy is healthy, so shut up!» The boy drinks quickly a little water. The water relieves the burning of the mouth and throat, the boy begins to laugh, and the father rejoices. Now, the boy feels he's vigorous, very strong, for he has overcome the power of the damned brandy. On another occasion, having a glass of brandy on the table, the boy takes it by himself or asks for some drink and tastes it several times, until he habituates to brandy as the duck to water, and then ... there is the drunkard"⁷⁹. From the priest's perspective, the drinker is a sinner, because "if he poisons himself by his will, then he is unworthy of mercy, unworthy of others' help, but all should send him there, where he has earned his sufferings, leaving behind a home with ragged and unhappy children"⁸⁰. A rural solution (perfectly integrated into the social environment in which it had appeared) was the oath of solemn abstinence made in front of a priest⁸¹; the bottles of brandy were symbolically buried, and these places were marked by stone crosses, but this ritual was disliked by the Austrian officials⁸².

The alcoholism was prevalent among the poor population of Bucovina as a result of the massive consumption of distilled spirits, insufficient food and considerable effort. Thus, the working-class "which is inadequate and badly fed", consumed, through work, "a lot of dynamic power"; this is "unconsciously, substituted by alcohol that, for the moment, truly stimulates the body and bends the muscles"⁸³. While, year after year, the increase in the number of victims of alcoholism among the rural population was no longer a novelty⁸⁴, Dr. Zurkan drew attention to the townspeople's "unhealthy predilection" for beer, wine and other sweetened drinks "that put their health in danger"⁸⁵. If for a juvenile in high

⁷⁹ T. B., *Îndegetări la creșterea copiilor* [Advice on Raising Children], in "Călimdarium poporului pe 1910", Cernăuți, 1909, p. 57.

⁸⁰ *Curățenia casei...*, p. 55.

⁸¹ Constantin Bărbulescu, *România medicilor...*, p. 183.

⁸² Ernest B. Gordon, *The anti-alcohol movement in Europe*, 1913, New York, p. 163.

⁸³ Gheorghe Manolescu, *Pelagra...*

⁸⁴ *Gegen den Alkoholismus*, in "Genossenschafts-und Vereins-Zeitung", Czernowitz, 1900, no. 267, 1 Februar, p. 3.

⁸⁵ *Gegen den Trunkenheit*, in "Bukowinaer Post", Czernowitz, 1894, no. 160, 29 November, p. 1.

school, "the most enjoyable delight" was smoking, for an "academician", the drink was added to the smoking⁸⁶.

As for the effects that alcohol could have on the human body and its systems, Dr. Manolescu believed that "always the potation destroys the cellular tissues, predisposing the abusive person to various illnesses and making the stomach inactive by the lack of appetite and indigestion – disorders that all alcoholics complain about"⁸⁷. Comparing pellagra with alcoholism, Dr. O. G. concluded: "Pellagra is a disease that encompasses the innocent man, while only by a man's free will the brandy enters the body"⁸⁸. Besides poverty, "ruined households, beatings, wrongdoings, thefts and murders", alcoholism generated "serious maladies of the body," the drunkard having a "dark mind" and, eventually, reaching "the house of madmen or the prison"; one inebriate "was swelled, another had a soft and fluffy face, dying by suffocating, and another got a disease of black lungs, having a yellow and black face, then dying as a result of that poison"⁸⁹. As reported by Presl's statistics, from 1883 to 1892, 11.7% of the patients from the insane asylum in Czernowitz were victims of alcohol abuse⁹⁰; in 1888, out of 111 mentally ill patients, 17 have acquired the illness due to excessive alcohol consumption (15,3%), this number rising to 23 (14.5%) in 1893⁹¹. The same author indicated that in 1884, of all patients hospitalized for chronic alcoholism, 2 were cured and one died; in 1885, 3 were treated and one died, in 1886 - 9 were treated and 3 died, in 1887 and 1888 - 2 were treated and 1 died, in 1892 - 4 were healed, but one died, and in 1893, fortunately, 6 were saved and no one lost his life⁹². The only hospital of mental illness in Bukovina announced that from 1907 to 1908, 48 patients were diagnosed with "alcoholism", representing 3.2% of all inmates⁹³.

STRATEGIES FOR COMBATING SOCIAL DISEASES

In the last two decades of the nineteenth century and at the beginning of the next one, at least at the declarative level, pellagra, tuberculosis, and alcoholism

⁸⁶ *Correspondențe particulare* [Private Letters], in "Revista Politică", Suceava, 1887, no. 11, 15 Octomvrie, p. 10.

⁸⁷ Gheorghe Manolescu, *Pelagra...*

⁸⁸ *Curățenia casei...*

⁸⁹ *Ibid.*

⁹⁰ Friedrich Presl, *Production, Ausschank alkoholhältiger Getränke...*, p. 602.

⁹¹ *Ibid.*, p. 603.

⁹² *Ibid.*, p. 609.

⁹³ Octavian Lupu, *Aspecte din istoria medicinei...*, f. 94.

turned into an "issue" to which the state (through its representatives) had to find a solution. Therefore, from a legislative perspective, had to be regulated on the one hand the alcohol consumption - "the cause of all illnesses" - and on the other hand the education that could "improve the life of the rural population"⁹⁴. Around 1900, after long and stormy debates, in some of the cities and villages in Bukovina, it was decided to close the taverns from 5 P.M. on Saturday until Sunday at 12 A.M.; the same rule was applied to public or legal holidays⁹⁵. In November 1903, the "Government of Country" regulated the import of maize from Romania and Russia, and a few months later; likewise, the authorities demanded a stricter surveillance of its marketing, disallowing the sale of "broken corn or corrupt and harmful foods". Any contravention should have been brought "immediately to the attention of the competent court, in order to punish the offenders"⁹⁶. In 1904, the measures taken by authorities in their "fight against the social diseases" included the rural development and enhancement by improving people's behaviour. The domestic industry had to be promoted, as it could provide some incomes to the villagers, especially during the long winter months; additionally, the women and girls had to be taught how to cook more meals and especially to prepare bread; the small households (unable to keep cows) were encouraged to consider raising goats and pigs. The corn import was severely controlled, and the altered maize had to be replaced in special areas such as driers and warehouses⁹⁷. A draft law advocated by Dr. Erlich aimed at rigorous control of the alcohol monopoly and alcoholic beverages⁹⁸. On various occasions, the Bukovina doctors warned about the transmission of tuberculosis, insisting on the links between illness, heredity, living conditions, occupation, and nutrition; for instance, the consumption of raw milk from unfamiliar and unhygienic sources had to be avoided. There were certain restrictions on the contact or marriage with a chronically sick person⁹⁹.

⁹⁴ *Ibid.*, f. 113.

⁹⁵ *Gegen den Alkoholismus*, in "(Neue)Freie Lehrer-Zeitung", Czernowitz, 1903, no. 19, 22 Mai, p. 5.

⁹⁶ *Contra pelagrei* [Against Pellagra], in "Deșteptarea", Cernăuți, 1904, no. 71, 9 Septembrie, p. 3.

⁹⁷ *Sanitätsrat Prof. Dr. I. Ritter von Volcinschi über Ursachen und Massnahmen gegen Pellagra in der Bukowina. Aus einem Gutachten des k.k. Landessanitätsrates für die Bukowina*, "Das oesterreichische Sanitätswesen", Wien, 1904, apud Octavian Lupu, *Aspecte din istoria medicinii...*, f. 112-113.

⁹⁸ *Universitat und Alkoholismus*, in "Czernowitzer Allgemeine Zeitung", Czernowitz, 1907, no. 1187, 24 Dezember, p. 3-4.

⁹⁹ *Zur Bekämpfung der Tuberkulose*, in "Czernowitzer Allgemeine Zeitung", Czernowitz, 1914, no. 3496, 15 Juli, p. 4-5.

Equally, the preventive measures had to be accompanied by curative decisions. In other words, the efforts to prevent the spread of the disease had to be combined with those of detecting and treating the sick. The physicians knew that the best remedy against social illness was food and its therapeutic role as important as medication. In the early 1900's, Dr. Phillipowicz, the director of Czernowitz State Hospital, called for support for his patients by adopting models that proved their effectiveness in other provinces of the empire¹⁰⁰. Not only the hospitals could offer a solution (there were, however, only a few hospitals), but also the curative and preventive institutions where the sick could be treated, and the peasants, in particular, fed and taught how to change their bad eating habits. In the first months of 1905, a special committee was set up with the objective to identify the most vulnerable communities and to estimate the amount which could be allocated for concrete actions for helping the sick¹⁰¹. With the money received from the Austrian Empire's Interior Ministry (15,000 crowns from the Fund to fight epidemics and social diseases), and from the Country Diet (5,000 crowns), 4 canteens have been opened; there, for almost 5 months, 186 pellagra patients were served¹⁰². The daily meal program started in the morning, from 5.00 to 7.00, and continued at noon from 12.00 to 14.00. Excepting the fasting days, meat was on the menu at least five times a week; the corn was completely excluded from nourishment, as well as smoking and alcohol consumption which were forbidden. Breakfast consisted of half a litre of warm milk and 250 gr. of bread, while at the lunch, the patients received 500 gr. soup, 200 gr. meat with 300 gr. vegetables, 400 gr. bread and a dessert of 350 gr. Beef, pork and sheep, and rarely chicken, along with rice, potatoes, peas, cabbage and pickles and onion sauce, garlic or plum jam were consumed¹⁰³. In addition to food, the canteens distributed quinine tinctures, Amara and Ferrata (based on iron sulphate). The medical check-up was done every 14 days, being mandatory for those who had entered the canteen. Following this program, it was found that in 38% of cases, the health improvement was "remarkable"; likewise, 58% of the patients who attended the canteens had "ameliorated their health", "increasing their weight by up to 19 kilograms"¹⁰⁴.

In turn, the teachers and priests were encouraged to educate the community members how and what to cook, which foods were healthy, and what

¹⁰⁰ *Ibid.*

¹⁰¹ *Eine Mahnung...*, in "Bukowinaer Post", Czernowitz, 1905, no. 1727, 19 Februar, p. 1.

¹⁰² *Bekämpfung der Pellagra in der Bukowina*, in "Bukowinaer Rundschau", Czernowitz, 1906, no. 5077, 6 Mai, p. 4.

¹⁰³ *Die Speiseanstalt für Pellagröse in Raraneze*, in "Bukowinaer Rundschau", Czernowitz, 1906, no. 5008, 11 Februar, p. 2.

¹⁰⁴ Octavian Lupu, *Aspecte din istoria medicinii...*, f. 115.

the body needed to function at its best¹⁰⁵. As with pellagra, the danger of tuberculosis could be overcome by compliance with the food and hygiene rules; the patient care required a "timely and appropriate food", "bedding and clothes always clean" and a room "well ventilated and free of any smell"¹⁰⁶. Obviously, it was the duty of the authorities to sanitize the localities and to gather public funds in order to help the tuberculosis patients, as long as the access of persons in advanced stage of the disease was restricted to the public hospitals¹⁰⁷. The school education also had to provide the proper environment to children and young people who represented the future¹⁰⁸; the health impairment and degeneration due to their social illness could become the darkest nightmare for Bukovina authorities and medical reformers; and that is why their education remained the solution to the province's prosperity.

CONCLUSIONS

Favoured by precarious socio-economic conditions, social behaviour, lack of education and hygiene, precarious eating and even by their own will, the social diseases have found in Bukovina, in the 1900s, a conducive environment for spreading. The statistical knowledge of social issues brought the doctors and provincial officials closer to reality, revealing it in all its complexity. The medical discourse directed attention to a less pleasant picture, showing the reforms that needed to be done; the transition from "misery, poverty, and carelessness that causes one person's illness" to "the danger of ignorance that causes the sickness of many persons" also indicated the authorities' obligation to oversee the health of the province's population. In this way, the campaigns to fight pellagra, tuberculosis, and alcoholism were born, and their subject matter became of particular interest both to press and to interpellation in the legislative and administrative forums; treating them superficially would have affected the vitality of the province's inhabitants. Unfortunately, in the years leading up to the First

¹⁰⁵ *Auszug aus dem Protokolle der Sitzung des ständigen Ausschusses des Landeskulturrates vom 21 Oktober 1907*, in "Bukowinaer Landwirtschaftliche Blätter", Czernowitz, 1907, no. 23, 1 Dezember, p. 2.

¹⁰⁶ *Curățenia casei...*, p. 54.

¹⁰⁷ For example, in Dr. Poras' sanatorium in Solca, the tuberculosis sick in advanced state or the insane were not allowed; cf. "Bukowinaer Post", Czernowitz, 1905, no. 1778, 22 Juni, p. 6.

¹⁰⁸ *An sãmmliche k. k. Bezirksschulrãthe, den k. k. Stadtschulrath und die Direction der Lehrer- u. Lehrerinnenbildungs-Anstalt*, in "Bukowiner Pãdagogische Blätter", Czernowitz, 1902, Vol. VII, no. 7, p. 98.

World War, many of these medical and administrative projects could not be applied because of the insufficient budget. The number of pellagra and tuberculosis patients remained high, the disease decreasing or disappearing from the province's nosological system along with the intervention on the hotbed of poverty, rife with illness, misery, prejudice, and ignorance.