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Medical Faculties or Medical Academies? Czechoslovak Plans and Discussions in the 1950s

Zarys treści: Autor artykułu, zaprezentowawszy zwięzłe sieci i struktury medycznych szkół i jednostek badawczych w bloku państw komunistycznych (Związek Radziecki, Czechosłowacja, NRD, Polska i Węgry) w okresie od zakończenia II wojny światowej do końca lat pięćdziesiątych XX w., analizuje powody, dla których w Czechosłowacji nie dokonało się przekształcenie tradycyjnych wydziałów medycznych w wyspecjalizowane akademie medyczne, jak miało to miejsce w innych państwach bloku (np. w Polsce).

Słowa kluczowe: wydziały medyczne, edukacja medyczna, Czechosłowacja, model sowiecki, Związek Radziecki, PRL, NRD, Węgry

Keywords: medical faculties, medical education, Czechoslovakia, soviet model, Soviet Union, Polish People's Republic, German Democratic Republic, Hungary

In the post-war years, the question of whether the education of new medical staff and medical research should remain the domain of traditional faculties or should it be provided by specialised medical schools (academies or institutes) was addressed by politicians, officials of the relevant ministries, representatives of the institutions in question, and even by circles of professionals in several countries of the Soviet Bloc, including Czechoslovakia. In Czechoslovakia, plans to remove medical faculties from traditional universities¹ and turn them into independent institutions of higher education – subjected either as before to the Ministry of Education, or transferred under the jurisdiction of the Ministry of Health – culminated in the first half of the 1950s. As in many other areas, here too, Soviet models were often used as an argument in favour of such an arrangement.² In the Soviet Union, both the education of physicians and medical research were

¹ *Lékařská fakulta UK v běhu času*, ed. V. Helekalová, J. Hořejší, Praha, 2011.

² J. Connelly, *Captive University: The Sovietization of East Germany, Czech, and Polish Higher Education, 1945–1956*, Chapel Hill, North Carolina Press, 2000.

removed from universities already in the 1930s and transferred to independent institutes of higher education, so-called “medical institutes”, which were subjected to the Ministry of Health.³ Similar, at least in part, transfers were carried out also in some other countries of the Soviet Bloc where higher medical education had functioned along the lines of Central European (‘German’) tradition, that is, at university faculties.

Far-reaching changes in the organisation of higher medical education came already in the first years after the war when many countries felt the need to alleviate the serious shortage of graduates of universities which were closed during the war and to compensate for human losses in the medical profession. In East Germany (later German Democratic Republic), Czechoslovakia, and Poland – in Hungary, the situation was different – faculties which had been closed or otherwise disabled during the war were reopened soon after May 1945. Shortly later or within a few years, numerous new institutes of higher medical education were established.⁴ We can thus observe that by the late 1940s, Poland had six medical faculties at reopened or “transferred” universities and six newly established so-called “medical academies”. In 1950, a government directive removed the all existing medical faculties from universities and incorporated them into a unified system of medical academies, a structure separate from the university system.⁵ In East Germany, alongside the six medical faculties of famous universities (mainly in Berlin and Leipzig), three medical academies were established in 1954 in as yet non-university towns. Existing faculties were not removed from universities. Quite the opposite: the new academies structurally fairly closely followed the traditional university model.⁶ In Hungary, medical faculties were transformed into independent medical universities in 1951.⁷ In all these cases, in addition to practical reasons (linked mainly to the role of the clinics as health care centres) Soviet model was used as a strong argument in favour of such transformations. A comparison of developments in medical education in the abovementioned countries and an attempt to see whether this amounted to Sovietisation is a subject for future research. At the moment, I shall focus on the situation in Czechoslovakia.

³ M. Bartošek, *Vysoké školství v SSSR*, Praha, 1947.

⁴ *A History of the University in Europe*, vol. 4: *Universities since 1945*, ed. W. Rüegg, Cambridge, 2011, pp. 31–69.

⁵ *Dzieje nauczania medycyny na ziemiach polskich*, ed. M.M. Żydowo, Kraków, 2001; J. Vykoukal, “Polské univerzity 1945–1948: autonomie, rekonstrukce a politika”, *Acta Universitatis Carolinae – Studia Territorialia*, 13, 2008, no. 8, pp. 117–142.

⁶ A. Ernst, “Die beste Prophylaxe ist der Sozialismus”: *Ärzte und medizinische Hochschullehrer in der SBZ/DDR 1945–1961*, Münster, 1997, chap. 5.1: “Umbau der Hochschulen und der Berufskonstruktion von Hochschullehrern”, pp. 207–216; J. Brod, “O vědeckém životě v Německé demokratické”, *Časopis lékařů českých* (hereafter: ČLČ) 93, 1954, pp. 935–936.

⁷ *Memorial Book Semmelweis University of Medicine 1769–1994*, L. Molnár *et al.*, Budapest, 1995, p. 18.

Here, too, an expedited renewal of higher education was carried out, partly by extending its capacity. In medical education, alongside the three existing faculties in Prague, Brno, and Bratislava, new faculties were founded either as regional branches of the Prague faculty (in Hradec Králové and Plzeň) or as medical faculties of newly established universities in Olomouc and later in Košice.⁸ Plans and discussions about the status of institutes of higher medical education which took place in the first half of the 1950s were happening already in the context of the ongoing and hotly discussed reforms of medical study,⁹ “socialist building of science”,¹⁰ and the post-1948 process of “unification of health care”.¹¹ Various proposals for reorganisation of higher medical education (concerning its goals and content, its focus in connection with the needs of a new type of a health care system, its institutional embedding, links to new research institutions, etc.) were coming mainly from the Ministry of Education, especially its departments for higher education, and the Ministry of Health based on desiderata expressed by the Communist Party organs and various parts of the government. In the case of Charles University and its medical faculties, various plans were discussed mainly in the relevant academic assemblies (at first in the Academic Senate and the board of professors, later in the Rector’s collegium and the science council).

Various physicians, mainly university professors, were also interested in the subject of reform of medical education, scientific work, and health care reform. In this context, they also debated whether university faculties or independent medical schools are better suited to meet the new demands. Alongside official sources, we can thus learn about the atmosphere in which these discussions went on from the programme statements and polemical articles published in the *Journal of Czech Physicians* (*Časopis lékařů českých*), *Bulletin of Czechoslovak Physicians* (*Věstník československých lékařů*) and some new journals such as *Czechoslovak Health care* (*Československé zdravotnictví*) and *University* (*Vysoká škola*). Unpublished views can be gleaned from manuscripts of some protagonists of these discussions, especially Jaroslav Charvát and Ivan Málek, advocates of two opposing approaches to medical education.

⁸ P. Svobodný, “Universities in Central Europe: Changing Perspectives in the Troubled Twentieth Century”, in: *Sciences in the Universities of Europe, Nineteenth and Twentieth Centuries. Academic Landscapes*, ed. A. Simões, M.P. Diogo, K. Gavroglu, Dordrecht, 2015 (Boston Studies in the Philosophy and History of Science, 309), pp. 107–123; *A History of Charles University*, vol. 2: 1802–1990, ed. J. Havránek, Z. Pousta, Prague, 2001.

⁹ I. Málek, “Reforma lékařského studia”, ČLČ 89, 1950, pp. 211–214; id., “Reforma lékařského studia a výchova kádrů”, *Věstník československých lékařů* (hereafter: VČSL) 62, 1950, pp. 575–580.

¹⁰ Z. Servít, “Socialistická výstavba naší lékařské”, ČLČ 88, 1949, pp. 1–5.

¹¹ P. Svobodný, “Die Losung von ‘einheitlichen sozialistischen Gesundheitswesen’ in der Fachpresse im Rahmen der kommunistischen Propaganda (1945–1952)”, in: *Propaganda, (Selbst-)Zensur, Sensation. Grenzen von Presse- und Wissenschaftsfreiheit in Deutschland und Tschechien seit 1871*, ed. M. Anděl, D. Brandes, A. Labisch, J. Pešek, T. Ruzicka, Essen, 2005, pp. 261–272.

Given the fact that in enforcing the model of separation of medical faculties from universities the argument of Soviet models was often used, it seems useful to briefly remind ourselves in what ways Czechoslovak physicians familiarised themselves with these models. Already in 1948, members of a Soviet delegation returning from a meeting of the World Health Organisation in Geneva stopped in Prague and acquainted their Czech colleagues with the main principles of Soviet health care, with some issues pertaining to the education of physicians, and with the Soviet organisation of medical science. B. Albert and Vladimír Haškovec then communicated the new information to broader medical public in print.¹² In 1950, Czechoslovak physicians and natural scientists went on a well-known research trip to the Soviet Union where one of their tasks was to “get acquainted with the education of medical cadres” at Soviet medical institutes. According to Josef Lukáš, they learned mainly about the content and the plan of the study, not about the creation of specialised faculties for paediatric medicine or hygiene or even the removal of faculties from universities.¹³ Repeated visits to the Soviet Union were a source of inspiration for one of the later advocates of separation of the medical faculties, Ivan Málek.¹⁴ Czech physicians also could learn a great deal of detail about the development and current state of higher medical education in the Soviet Union, that is, about the independent medical institutes subjected to the Ministry of Health, from an extensive article by A.N. Šabanov, Secretary of the Minister of Health of the USSR, which appeared in the *Journal of Czech Physicians (Časopis lékařů českých)* in 1951.¹⁵ In the same issue, Málek described in detail the content and structure of education of Soviet physicians.¹⁶ Several months later, Málek summarised the main points in an article called *Soviet Medical Science – Our Model*, emphasising again the need to “adopt Soviet experience from educating students at faculties and young scientists in research assistant posts”.¹⁷

The possibility of removing medical faculties from universities and transferring them under the Ministry of Health “like they do in the Soviet Union” was for the first time seriously discussed during the preparation of a new university law in 1950. After “long discussions” – as Málek wrote in 1953 – it was decided that faculties should, at least for the moment being, remain part of universities. The main reason for this temporary (but in the end final) decision was that the new

¹² B. Albert, V. Haškovec, “Delegace zdravotníků SSSR v Praze”, ČLČ 87, 1948, pp. 930–931.

¹³ “Proslov vedoucího delegace československých vědeckých lékařských pracovníků prof. dr. J. Lukáše k ministru zdravotnictví SSSR E. I. Smirnovu 26.12.1950 v Moskvě”, ČLČ 90, 1951, pp. 1–3.

¹⁴ M. Franc, *Ivan Málek a vědní politika 1952–1989*, Praha, 2010.

¹⁵ A.N. Šabanov, “Vysokoškolské lékařské studium v Sovětském svazu”, ČLČ 90, 1951, pp. 361–367.

¹⁶ I. Málek, “Sovětská lékařská věda”, ČLČ 90, 1951, pp. 367–377.

¹⁷ Id., “Sovětská věda – náš vzor”, *ibid.*, pp. 1318–1319.

university law – “an effective instrument of a political reconstruction of institutes of higher education” – enabled all the desired changes in the content, plan, and forms of medical education. Secondly, the situation in health care did not favour such a transformation since at the time in question, health care was not yet fully “socialised” and centralised. Advocates of transferring the higher medical education under the Ministry of Health admitted that in 1950, the health care system was not yet ready for big challenges and moreover, it was said to be still afflicted by the fateful legacy of Adolf Procházka, the “traitorous” pre-February 1948 Minister of Health.¹⁸

During the time when the new university law was being prepared and after it went into effect, Czechoslovak health care was undergoing a far-reaching organisational transformation. The main changes concerned nationalisation and unification of all aspects of medical care (i.e., treatment, prevention, and hygiene), but also the relevant medical research, science, and education.¹⁹ The principles of this transformation were discussed by Party organs and state authorities, but also in the relevant institutions, including universities, and by the medical public. And once again, just like in the reorganisation of medical science and education, the most ardent champions of “Soviet models” turned out to be Málek and Lukáš. They were presenting their ideas about transformation of health care to their colleagues at conferences (for example, in Velké Losiny in 1950), in medical journals, and in the professorial board of the Faculty of Medicine in Prague.²⁰

The new university law and new legislation on health care which went into effect in 1950 and 1951 prepared the ground for another round of negotiations about the institutional forms of higher medical education. Based on the new university law, the newly created State Committee for Universities presented in 1951 a new plan for the development of higher education. Their proposal of changes in the organisation of institutes of higher education included also the issue of medical schools. It recommended the creation of a new medical school in Ostrava and a removal of all existing medical faculties from universities. Some of these new medical schools would have two faculties (in Brno and in Bratislava, where they would be joined by the existing pharmaceutical faculties). A removal of medical faculties from universities was part of a more general trend which aimed at downsizing the “excessively large” universities and their transformation into smaller, more specialised institutes of higher education based on Soviet

¹⁸ Id., “Do nové etapy přeměny lékařského studia”, ČLČ 92, 1953, pp. 503–510.

¹⁹ P. Svobodný, L. Hlaváčková, *Dějiny lékařství v českých zemích*, Praha, 2004, pp. 219–222.

²⁰ Archive of the Charles University (hereafter: AUK), collection: Lékařská fakulta UK 1883–1953 (Faculty of Medicine of Charles University, 1883–1953) (hereafter: LF UK), Protocols from Meetings of the Senior Academic Staff, Protocol 25 May 1950, appendix: Prof. Málek: Hlavní zásady losinské konference (Main Principles of the Losiny Conference).

models. The proposed step was also motivated by the size of medical faculties (the number of students, employees, research institutes, and clinics). A difference in their character also played a role: it had to do with their link to faculty hospitals, that is, medical facilities subject to another government ministry. At the same time, the report of the State Committee for Universities explicitly discouraged the transfer of new specialised institutes of higher education outside the jurisdiction of the Ministry of Education and it did not include a proposal to transfer medical institutes of higher education under the jurisdiction of the Ministry of Health. Somewhat surprisingly, it was a Soviet expert on universities who warned about mechanically following Soviet models in this respect. Another attempt to transfer independent medical schools – if they were established at all – under the Ministry of Health came a little later. This time, the initiative came hand in hand with increased pressure from the in the meantime reinforced Ministry of Health.²¹

In 1951–1954, the reform of medical studies continued, though it was sometimes criticised for being ill-prepared and open-ended. One of its main defenders, Ivan Málek, promoted continuation of this process under the slogan “let us follow the model of Soviet medical institutes”.²² Discussions about the results and shortcomings of this reform culminated in 1954 in the medical press, especially the journal *Czechoslovak Health care* (*Československé zdravotnictví*). Subjects which were discussed included the need for prolonging the study, changes in its content (study groups, examinations, clinical experience, etc.), issues of its links to secondary education (insufficient due to having been shortened) and subsequent postgraduate education, as well as continuing education during clinical practice or in a specialised Institute for Postgraduate Education of Physicians (*Ústav pro doškolování lékařů*, established by the Ministry of Health based on a Party and government resolution as of 1 July 1953).

In connection with debates about the ability of existing faculties to prepare young physicians for practicing in a new social and organisational environment and about the need for their continuing education, one also finds in these discussions contributions which explicitly or implicitly reject or defend the plan to remove medical faculties from universities and to transform them into independent medical schools under the jurisdiction of the Ministry of Health. Certain doubts about the ability of the faculties and their clinics to educate medical practitioners were expressed, among others, by Jiří Rödling, head of the Institute for Postgraduate Education of Physicians and an official of the Ministry of

²¹ P. Urbášek, J. Pulec, *Vysokoškolský vzdělávací systém v letech 1945–1969*, Olomouc, 2012, pp. 191–192.

²² I. Málek, *Do nové etapy přeměny lékařského studia*, chap. 4: “Za vzorem sovětských lékařských institutů”, pp. 508–509.

Health.²³ Jan Konopík, Vice Dean of the Medical Faculty of Hygiene of Charles University, interpreted Rödling's words as representing a threat whereby education at medical faculties would be reduced and they would be transformed into mere pre-schools of the Institute for Postgraduate Education.²⁴ František Hora, another representative of the Institute for Postgraduate Education, went even further and clearly expressed himself in favour of transferring the responsibility for the entire system of medical education under the jurisdiction of the Ministry of Health, a proposal which would have included the removal of medical faculties from universities and their transformation into independent medical schools.²⁵ Charvát in his diary called Hora's proposal "utterly destructive" for faculties as parts of universities and opposed these views in his own article published in the *University (Vysoká škola)* journal.²⁶ Deans of various other medical faculties in their contributions also explicitly defended the traditional institutional framework of medical faculties. František Bláha, Dean of the Medical Faculty for Hygiene of Charles University, expressed his conviction that consequences of the Act 103/1951 On Unified Preventive and Health Care form an obstacle to teaching at medical faculties. His point was that this law demanded that in addition to teaching and provision of health care, faculty hospitals should also function as integrated regional or district hospitals, a step which enormously added to their workload.²⁷

On the other hand, already in 1953 we can observe some shifts of allegiance between the advocates of preservation of medical faculties at universities, a group which included mainly the "conservative" members of their academic staff, such as Charvát, and the supporters of removal of the medical faculties from universities according to the Soviet model, a group which included radical Communists, mainly Málek, Lukáš, and Raška. According to Málek, the erstwhile defender of everything Soviet, the crucial task at the moment was a unification of curricula and it had to be decided whether "we, too, should follow the model of Soviet medical institutes and introduce specialised faculties for dentistry, hygiene, epidemiology, and paediatrics, alongside a faculty of general medicine".²⁸ At the same time, the position of advocates of the removal of medical faculties from the "reactionary university" in the scientific board of the Faculty of Medicine

²³ J. Rödling, "Zdokonalování lékařů po promoci", *Československé zdravotnictví* 1954, pp. 139–143.

²⁴ J. Konopík, "K diskusi o studiu na lékařských fakultách", *Československé zdravotnictví* 1954, pp. 512–514.

²⁵ F. Hora, "Problematika výchovy mediků", *Československé zdravotnictví* 1954, pp. 367–368.

²⁶ J. Charvát, *Můj labyrint světa. Vzpomínky, zápisky z deníků*, Praha 2005, entry of 31 August 1954, p. 358; J. Charvát, "Poznámky k reformě studia na lékařských fakultách", *Vysoká škola* 2, 1954, no. 9–10, pp. 255–259.

²⁷ F. Bláha, "Otázky kolem výchovy našich lékařů", *Československé zdravotnictví* 1954, pp. 425–426.

²⁸ Málek, *Do nové etapy přeměny*, p. 508.

of Charles University was significantly weakened. This was – at least in part – a consequence of the intervention by Soviet scholar Olga V. Vasilevskaya, who privately recommended that faculties should remain part of universities. According to Charvát, this particular meeting of the scientific board was marked by a “humorous moment” when even Lukáš, who would prove to be a “dangerous defender” of the notion of transfer of medical faculties under the Ministry of Health, apparently betrayed a “touching attachment to his *alma mater*”.²⁹ After a lengthy discussion, this meeting of the scientific board produced a truly remarkable resolution (on 26 March 1953), stating that the top management of Charles University would receive a proposal for a reorganisation of the faculty and its independence within Charles University. It would be headed by its own Vice Rector and have its own administration which would coordinate the functioning of four medical faculties (a faculty for therapeutic medicine, paediatric medicine, dentistry, and hygiene and epidemiology).³⁰ In the end, a faculty of paediatric medicine and a faculty of hygiene became independent in the autumn of the 1953, though without the creation of an administrative link between the university and its medical faculties.³¹

Debates between the advocates of removal of faculties from universities and their opponents then continued mainly among the representatives of the Ministry of Education and institutions under its control (universities and faculties) on the one hand and representatives of the Ministry of Health (especially its scientific board) and institutions under its jurisdiction (such as the Institute for Postgraduate Education of Physicians and newly established research institutes) on the other hand. Long negotiations between the two ministries, relevant institutions, and medical journals did not lead to any consensus – and once again, we learn more about the background of these negotiations and its participants from Charvát’s diaries. He and his “conservative” colleagues expressed their belief that a transfer of medical faculties under the Ministry of Health would lead to their destruction.³²

These endless debates ended only after a resolution of the political secretariat of the Central Committee of the Communist Party of Czechoslovakia, which was adopted on October 25, 1954. It decided that medical faculties would remain part

²⁹ AUK, collection LF UK, Meetings of the Science Board, 1951–1959, protocol of 26 March 1953, point 4; Charvát, *Můj labyrint světa*, entry for 28 March 1953, p. 246.

³⁰ AUK, collection LF UK, Meetings of the Science Board, 1951–1959, protocol of 26 March 1953, point 5.

³¹ *Spondeo ac polliceor = Slavnostně slibuji. Vyprávění o 2. lékařské fakultě Univerzity Karlovy v Praze k 50. výročí založení*, ed. J. Koutecký, Praha, 2003; *Quod bonum, felix, faustum, fortunatumque sit = necht' je to k dobru, štěstí, blahu a zdaru*. 3. lékařská fakulta Univerzity Karlovy v Praze, ed. J. Veis et al., Praha, 2013.

³² Charvát, *Můj labyrint světa*, entries for 19 September 1954 (pp. 364–365), 21 September 1954 (p. 366), 26 September 1954 (p. 369), 1 May 1955 (p. 391), 1 April 1956 (pp. 428–429).

of universities, that is, under the jurisdiction of the Ministry of Education, since the Ministry of Health – then headed by Josef Plojhar, member of the Czechoslovak People's Party – was not fit to provide a “correct ideological leadership to the faculties”. This decision from the top solved the fundamental disagreements between the government ministries. The most pressing trouble spots, that is, issues regarding the administrative position of faculty clinics and the dichotomy of their educational and health care personnel, were supposed to be solved by giving faculty hospitals a new status.³³ But – as various sources including Charvát's diaries testify – even after this decision, the medical faculties managed by the Ministry of Education faced various challenges.³⁴

The status of faculty hospitals was addressed in a joint resolution of the Ministry of Education and the Ministry of Health, which went into effect in January 1955 as an amendment of the Act on Unified Preventive and Therapeutic Care (Act No. 103/1951 Coll.) and the Act on Universities (Act No. 58/1950 Coll.). It regulated the status of university clinics within state hospitals (organisation of their operation, internal structure, planning, management, and the relation between teaching and health care staff).³⁵ This new status was supposed to “coordinate the needs of teaching, research, and therapeutic and preventive care. Instead, however, it fossilised the existing dismal situation where the two government ministries fight each other”. Shortcomings of this solution were noted by all participating parties. Some viewed it with resignation (the top management of the Faculty of General Medicine³⁶), others took it in their stride (for example, the director of the Faculty Hospital in Brno³⁷), and yet others were highly critical (though the position was expressed only on the pages of a private diary, as in the case of the abovementioned Charvát³⁸).

In further discussions about the tasks and reorganisations of medical education and research or planned transformation of medical studies in the second half of the 1950s, the option of removing faculties from universities was no longer mentioned.³⁹

³³ Urbášek, Pulec, *Vysokoškolský vzdělávací systém*, p. 192.

³⁴ Charvát, *Můj labyrint světa*, entry for 31 October 1954, pp. 370–373.

³⁵ *Vysoká škola* 3, 1955, appendix P58, *Statut fakultních nemocnic*.

³⁶ AUK, collection LF UK, Scientific Board 1951–1959, session of 10 March 1955, item 8.

³⁷ L. Dobeš, “Několik poznámek ke statutu fakultních nemocnic”, *Československé zdravotnictví* 4, 1956, pp. 111–112.

³⁸ Charvát, *Můj labyrint světa*, entry for 28 November 1953 (pp. 319–320), 30 January 1955 (pp. 385–386).

³⁹ Id., “Lékařská výuka a výzkum”, *ČLČ* 97, 1958, pp. 53–56, 669, 827, 1490; I. Málek, “Lékařská výuka a výzkum i některé jiné otázky”, *ČLČ* 97, 1958, pp. 1529–1536; O. Šmahel, “Závěrečné slovo k diskusi o lékařské vědě”, *ČLČ* 98, 1959, pp. 673–675.

Conclusions

1. Answer to the fundamental question whether Czech universities were in mid-1950s under threat is – in view of the planned removal of medical faculties from universities – clearly positive. Their removal was a real threat and opponents of this plan viewed its possible implementation as a step that would have highly destructive consequences for the universities.

2. Regardless of better or worse factual arguments presented by either of the parties concerned, Soviet models were actually used as a very strong argument in favour of transferring medical faculties from the jurisdiction of the Ministry of Education under the Ministry of Health during the discussions. A decision was in the end taken by the highest political authorities and not by the government ministries which were supposed to solve the problem. Charvát remarked: “It is a political issue whether we shall respect a local tradition and faculties stay with the 600 years old university or whether we shall copy the USSR to the last dot”.⁴⁰

3. The removal of medical faculties from existing universities and their independent status within medical academies was also intended to have an impact on their position of the leading centres of medical science. Until the early 1950s, medical faculties in Czechoslovakia and their institutes and clinics also functioned as the main institutions of medical science and basic and applied medical research. To some extent, this position was already earlier threatened by the creation of the State Health Institute of the Czechoslovak Republic in 1925. This institute alongside practical tasks in the area of medical prevention and hygiene also became a centre of research in some biomedical disciplines (such as microbiology, serology, etc.). After 1948, the State Health Institute was transformed into the Institute of Hygiene and Epidemiology, which functioned in close coordination with the Medical Faculty of Hygiene of Charles University.⁴¹ But the most important factor in ending the exclusive position of medical faculties as research centres after 1950 was the establishment of institutes of theoretical medicine and related biological and chemical disciplines, which were created within the framework of the nascent Czechoslovak Academy of Sciences (which was founded in 1952). In the first half of the 1950s, it was even proposed that these science institutes which existed outside universities should be united in a separate Academy of Medical Sciences, which would exist in parallel with the Czechoslovak Academy of Sciences. In this context, it is important to distinguish between attempts to take medical faculties out of universities and create medical academies (in the sense of separate universities) with parallel and concurrent efforts to create an Academy of Medical Sciences which would provide a base for medical

⁴⁰ Charvát, *Můj labyrint světa*, entry for 19 September 1954, p. 365.

⁴¹ J. Kříž, R. Beranová, *Historie Státního zdravotního ústavu v Praze*, Praha, 2005.

research.⁴² New research and clinical institutes were from the mid-1950s established also within the department of the Ministry of Health, which have been then gradually united into a new Institute of Clinical and Experimental Medicine.

4. All of the abovementioned changes in medical education and science, regardless of whether they were implemented or remained only on paper, were led by efforts to improve medical care. This is also why they were closely linked to parallel reforms of the health care system, which was – at least at a declaratory level – one of the main successes of the “building of socialism” in Czechoslovakia.

Medical Faculties or Medical Academies? Czechoslovak Plans and Discussions in the 1950s (Abstract)

In post-war Czechoslovakia, the re-organisation of public health care was closely linked to problems and new challenges in organising the academic education in medicine and medical science. Reforms in this area were seen as one of the basic starting points of health care reforms whose aim was to improve the health care and health of the population. Alongside elements such as the nationalisation of health care system, the system at this time focused not only on curative but also preventive medicine and hygiene. Similar trends were at that time in evidence in other countries of the then forming Soviet Bloc.

In the early 1950s, medical faculties were in some countries of the Soviet Bloc (Poland, Hungary) removed from the structure of traditional universities and transformed into medical academies. These medical academies were supposed to take over the existing functions of academic faculties of medicine and provide teaching, research, and curative medicine, but newly also preventive care. In other countries (Czechoslovakia, GDR), medical faculties remained part of both the traditional and newly established universities, though their transformation into medical academies had also been discussed.

The contribution includes: 1. a brief description of the network of academic medical education in 1945–1950s in countries of the Soviet Bloc (Soviet Union, Czechoslovakia, GRD, Poland, and Hungary); 2. analysis of reasons why in Czechoslovakia the transformation of faculties into academies was not carried out, while in other countries it was. These reasons include references to the strength of tradition, factual arguments, or ideologically based argumentation pointing to “Soviet models”.

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