

## LEGAL POLICY OF THE UKRAINIAN SOVIET SOCIALIST REPUBLIC IN THE SPHERE OF MEDICINE AND ITS MATERIAL EXPRESSION IN DAYS OF THE GREAT PATRIOTIC WAR

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Legal policy of the Ukrainian Soviet Socialist Republic in the sphere of medicine and its material expression in days of the Great Patriotic War is considered in the article. And also legal, state regulation of medicine against military events in the territory of the USSR is considered.

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In 1941–1945 the big part was assigned to a medical provision. The formation of a network of military sanitary establishments was carried out mainly under the direct influence of an operational and strategic situation at the front which had its specifics on different directions of advance of fascist aggressors. So, fascists destroyed military hospitals in Peremyshl, Cowel, Dubno, Lvov, Drohobych in Ukraine in the first two days of the war. On their basis the Head sanitary department planned the creation of medical parts. It should be noted that the military-medical service of the Red Army had no clear ideas of a network of medical institutions on fronts of the acting army, and in our case not only operating, but receding and suffering a defeat. There were cases quite often when the created and the directed medical institutions on the front couldn't develop their activity on a place because of helplessness of doctors who didn't know how to work in the conditions of the war.

In the years of the war the main tasks of health care became: help to wounded and sick soldiers, medical care of home front workers, health protection of children and anti-epidemic actions. The wide network of evacuation hospitals (one-field and multi-field) was created, the system of stage-by-stage delivery of health care by the wounded and patient was issued. During the war all sanatoria were converted in hospitals. The organization of specialized medical care at wounds in a head, a neck, a spine, a breast and a stomach, in a thigh and large joints was improved. The service of blood worked well. Together with the centralized supply of the acting army with tinned blood, its preparations and blood substitutes, regular departments and stations of blood transfusion were created on fronts and in the army; mobile stations of blood transfusion of the People's Commissariat of Health Care of the USSR were formed.

The organization of rendering the first qualified assistance by the wounded in the army and front to backs was complicated by an

acute shortage of bed fund that was connected with the evacuation of hospitals to the deep back in connection with the prompt advance of fascists. That is why 42 Ukrainian hospitals, haven't started to work, were relocated to the east by the USSR.

In the conditions of the war the medical provision needed the highest level of centralization and management, in connection with a contribution of health workers to the victory 72,3% of wounded and 90,6 patients came back to a line. From the very beginning of the war the state policy was focused on a fast organizational reformation of all health system. In most concentrated form it is reflected in decisions of the supreme party and government bodies which were guided on places. The basic value in this regard had the main requirements "Directives of Council of the People's Commissars of the USSR and the Central Committee of All-Union Communist Party (bolsheviks) to the party and Soviet organizations of front areas" of June 29, 1941 about the mobilization of all forces and funds of the people for the defeat of fascist aggressors. The item 2 belonged to workers of health care: "To organize the comprehensive help to the acting army, to provide the organized carrying out of mobilization of spares, to provide the supply of army with all necessary, fast advance of transports with troops and military freights, the broad help the wounded granting under hospitals, schools, establishments".

The performance of this task was complicated by the objective circumstances – a condition of a health service of the Red Army for the beginning of the war and its losses during the first battles. By the beginning of the 1940th there were 13,8 thousands of medical institutions, with the total number of hospital beds to equal 791 thousand in the country. To June 9, 1941, 149 soldiers of hospitals with the general capacity of 35 540 beds appeared as a part of a health service of the Red Army. To June, 1941 the general shortage of experts of a health service of the Red Army made 20 thousands

of people. Besides, the first days were put in jeopardy of destruction both military, and civil health care: “the considerable part of mobilization, material and human resources of health care were in the western areas of the USSR and in the first days of the war it was taken by the coming parts of the opponent”. Each human life is unique, and a death of a person – it is always a tragedy. But in the functional relation “human resources” aren’t equivalent. The dead physician – is not only the dead person. It is the lost possibility to rescue many other people. Fights brought the essential human losses of a health service: more than 80% of all its sanitary losses were the share of ordinary and non-commissioned officer’s structure (the advanced link operating on a front line); more than 85 thousands of physicians were missed or lost during the war. From them were 5 thousands of doctors, 9 thousands of average health workers, 23 thousands of sanitary instructors, 48 thousands of hospital attendants – and hospital attendants-porters. In total 140 000 doctors worked on the eve of the war in the USSR (slightly less than a half – 69 600 people were called to the army from civil medical institutions at the beginning of the war).

In these conditions the implementation of the Directive of Council of People’s Commissars of the USSR and the Central Committee of All-Union Communist Party (bolsheviks) began: “in July, 1941 the additional formation of evacuation hospitals began on 75 000 beds. It made for about 1600 hospitals. Besides, from the beginning of the war till the 1<sup>st</sup> of December, 1941 were created: 291 divisions with medical battalions, 94 shooting brigades with medical and sanitary companies, 38 companies of medical strengthening, 12 hospitals for the treatment of lightly wounded, 37 field evacuation centers, 79 evacuation receivers”. Thus the powerful health service was created, meeting requirements of mass military operations, and providing continuous return wounded varying severity in a line. Evacuation hospitals were formed in the area of PCH, the People’s Commissariat of Defense of the USSR (PCD), some part – through line of the All-Union Central Council of Trade Unions. The departmental “delivery” couldn’t complicate system of the management of evacuation hospitals and had an adverse effect on the medical process. Therefore at the end of September-October, 1941 the evacuation hospitals which were created in the wartime and located in rear regions of the country were transferred under the uniform management of the People’s Commissariat of Health Care of the USSR. Regional departments of health care transferred evacuation hospitals to Councils of War which were in front and army areas.

According to the resolution of the State Committee of Defense (SCD) “About the improvement of medical care of wounded fighters and commanders of the Red Army” of September 22, 1941 for the improvement of medical care of wounded fighters and commanders of the Red Army and streamlining of matter of evacuation the medical care of wounded and sick fighters and commanders in rear regions of the country was assigned to the People’s Commissariat of Health Care of the USSR (in the army and front areas – on the Head military and sanitary department of the Red Army). All evacuation hospitals created in the wartime, located in rear areas were placed under the authority of People’s Commissariat of Health Care (except the constant hospitals PCD). To leave evacuation centers in submission of the Head military and sanitary department of the Red Army. The following tasks were also assigned to the People’s Commissariat of Health Care:

a) the organization of treatment of wounded and sick fighters and commanders of the Red Army in evacuation hospitals of rear regions of the country;

b) the maintenance of staff of these hospitals;

c) the support of evacuation hospitals by all types of medical and sanitary economic property;

d) the management of medical care of the hospitals created on the basis of the sanatoria and All-Union Central Councils of Trade Unions rest houses containing at the expense of means of the All-Union Central Council of Trade Unions, and supply with their medical property on time sheets and norms for evacuation hospitals of the People’s Commissariat of Health Care of the USSR.

It was assigned to the People’s Commissariat of Defense of the USSR (PCD):

a) the support of evacuation hospitals of People’s Commissariat of Health Care of the USSR by food, fodder, money allowance, travel documents of wounded and sick military personnel and an exchange collection of linen on norms and as it should be, established in the Red Army;

b) the organization of evacuation of wounded and patients to rear areas;

c) the distribution of wounded and sick fighters and commanders through the evacuation centers on evacuation hospitals of the People’s Commissariat of Health Care of the USSR. The measures for the increase in the country of medical shots were taken.

In the conditions of the war the level of questions increases and becomes complicated which the public health service of each army has to carry out naturally. On August 11, 1941 the Resolution of the State Defence Committee SDC “About the reorganization of the Sanitary

management of the Red Army in the Main military – sanitary management of the Red Army” is accepted and a new provision “The provision on the Main Military and Sanitary Management (MMSM)” is approved. According to the last it was assigned to MMSM: the guide of evacuation of wounded, the organization of the medical help, the sanitary inspection to anti-epidemic providing army.

In some weeks after the beginning of the war in Ukraine 159 evacuation hospitals on 56000 beds were developed. The chief surgeon of evacuation hospitals of the People’s Commissariat of Health Care of the USSR I.G. Ruffanov directed the activity of medical institutions of the back who in 1942 carried out the specialization of hospitals (distribution on surgical, traumatological, infectious and other profiles) that allowed to treat more competently wounded.

The activity of MMSM provided the realization of accurate planning of a medical support of troops when carrying out strategic operations and control of its performance. It should be noted that such realization was enabled for the first time in the history of domestic military medicine. The efficiency of work of military physicians is decided by the developed system of landmark treatment of wounded and patients on their evacuation to destination. Under the leadership of E.I. Smirnov the group of military physicians developed the uniform field military-medical doctrine which the basic beginnings became: the united understanding of the principles of surgical and therapeutic work in field conditions; the existence of uniform views of methods of the prevention and the treatment of defeats and diseases; the continuity in the performance of medical actions at various stages of evacuation; the maintaining of short, accurate medical documentation providing the continuity and sequence in carrying out medical and evacuation actions.

The positive value of this doctrine both in scientific, and in the organizational relation it is difficult to overestimate it acted as uniting, unifying factor for a military health service in the conditions of destabilization.

In the years of World War I V.A. Opiel put forward the principle of landmark treatment of wounded, combining surgical treatment of wounded and their evacuation in uniform process for the first time in the world. This principle was applied and in days of the Great Patriotic War. The amount of sanitary losses of the operating army in the war always determines the volume of work of a health service. The military health service paid the main attention to the organization of immediate carrying out of seriously wounded from a battlefield and their evacuations to the back during the advance of

the enemy across the territory of Ukraine with a speed of 25–35 km per day. Unfortunately, it always worked well because of a shortcoming of hospital attendants and vehicles. L.M. Mayzhes stated: “... in the first fights it became clear an insufficient security of carrying out of wounded from a battlefield, the main reason for that was the acute shortage of carriers and inability of hospital attendants to work”.

As it wasn’t always possible to provide carrying out and delivery of wounded in medical aid stations in optimum terms, as a result wounded arrived on the following stages of medical evacuation too late that led to the development of various complications and growth of a lethality. The problem of search, collecting and carrying out of wounded from a battlefield faced the army health service throughout the whole war. The command and the management of a health service repeatedly took cardinal measures for its decision. So, on July 23, 1941 the deputy chief of the General Staff gave on the telegraph the order to chiefs of staffs of armies with the requirement “systematic maintenance” in a complete regular set of hospital attendants and hospital attendants-porters in front battalions and regiments, allocations of people for the aid to hospital attendants-porters. In this regard the Front commander ordered:

1) to complete fully to the staff of division of porters in shooting regiments immediately;

2) to commanders of parts beforehand, to allocate in the order of the senior doctors of parts of auxiliary porters in number of not less than 30 people for a shooting regiment and 16 people on a cavalry regiment before the performance of a march and prior to a fight;

3) it is obligatory to include the organization of carrying out and export of wounded from a battlefield in the general plan of ensuring a march and a fight. The direct responsibility was conferred on commanders of parts, for ensuring carrying out and export of wounded from a battlefield.

For the stimulation of dangerous work of a younger link of a health service the People’s Commissariat of Defense issued the order № 281 of August 23, 1941 “About an order of representation to the government award of military hospital attendants for a good fighting work” (I.V. Stalin signed personally). For the first time the activity of the medical personnel was in the battlefield officially equated to a feat of arms which was rewarded by the medals “For services in battle” and “For courage”, awards of “Red banner” and “A red star”.

The expansion of public beginnings, “national patronage” over wounded was the important direction of the legal policy in the field of health protection of fighters of the Red

Army. The resolution of All-Union Communist Party (bolsheviks) of the Central Committee "About the organization of All-Union committee of the help with service of patients and wounded fighters of the Red Army" of October 6, 1941 created the relevant committee" played an important role in the improvement of work of hospitals. The organization of a wide public aid by a member of health care in service of wounded and sick veterans was assigned on it and also on regional republican committees.

Sanitary losses of the Soviet party made more than 18 million people, including more than 15 million wounded contused and burned, 3 million, sick and more than 90 thousand frost-bitten according to reports of fronts, fleet, separate armies and flotillas. During the Great Patriotic War in medical institutions of all names it is considered the hospitalized more than 22 million people. 72,3% of wounded and 90,6% of sick soldiers and officers, i.e. over 17 million people continued to battle against the enemy were returned by efforts of health workers to a line. During World War II any of the being at war countries couldn't achieve such results. Therefore the organizational measures directed on the strengthening and the improvement of a military health service were justified not only and the quality of an element of the scientific doctrine, were called by the life, need of rescue of people, conducting combat operations and, finally, achievements of the Victory in the Great Patriotic War. Even in the most difficult, first year of war, monthly 100–200 thousand wounded and patients came back to a line. Later, when the situation was stabilized and appeared at the front opportunity more accurately to organize the work of medical institutions, this indicator began to increase steadily.

Summing up the results, it is possible to draw a conclusion that the successful solution of the tasks set by the war in the sphere of health protection of the military personnel and the civilian population, was defined not only heroism of physicians and people, but also thought over by the systematic and consistent legal policy providing the flexible reorganiza-

tion of the state health system, its scientific validity, and also consolidation of efforts of the population on the help to sick and wounded fighters and commanders of the Red Army.

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