

The history of clinical medicine in Russia: who finds their way into the pages of history?

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The article discusses the criteria that should be used by researchers who include individuals among the ranks of historically significant people and dedicate biographical articles to them in encyclopedias, monographs and doctoral research. It is shown that in the history of domestic clinical medicine, prominent physicians with equivalent standing in the second half of the 19th century – E.E. Eichwald (Saint Petersburg), K.M. Pavlinov and M.P. Cherinov (Moscow), N.A. Vinogradov (Kazan) and F.F. Mering (Kiev) – have not received equal coverage in historical medical literature. Six criteria are considered and any of them can be taken as a basis for a discussion on the historic performance of the individual. The author believes that the first criterion is an outstanding scientific contribution (for example, in the case of G.I. Sokolsky and V.A. Basov). The second criterion is the creation of a large scientific school (e.g., A.Y. Kozhevnikov – the creator of the largest school of neurologists – falls into the “Hall of Fame”, regardless of his other merits). The third criterion is exceptional medical fame (as is the case with G.A. Zakharyin or Mering). The fourth criterion is outstanding pedagogical activities (a classic example being Moscow University Professor F.I. Inozemtsev). The fifth criterion is performing especially significant scientific-social activities (e.g., Military Medical Academy Professor V.A. Manassein’s creation of the journal “Vrach” (“Doctor”), to which every third doctor in Russia subscribed by the beginning of the 20th century). The sixth criterion is outstanding manifestations of humanistic principles in medicine (from F.P. Haass to F.G. Yanovsky) or medical heroism (e.g., O.O. Mochutkovsky or I.A. Deminsky) or high civic position (V.P. Serbsky could serve as example). In many cases, several criteria may be applied to one and the same historical person.

Keywords: history of medicine, clinical practice of internal medicine in Russia, six criteria for the selection of biographical articles

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What is the basis for our collective memory to include or exclude a prominent medical doctor from the past in a virtual “Hall of Fame” that honours historically outstanding people to whom biographical articles in encyclopedias, special monographs and doctoral research are dedicated? It has long been known that true stories and legends are mixed in uncertain proportions in the pages of world history. The history of medicine cannot be an exception to this rule.

Countless articles and books have been devoted to Hippocrates, the greatest physician of ancient Greece and the “Father of Medicine,”

but his biography is not based on scientifically reliable sources. There are many blind spots and speculations. In the title of the expensively published book *De usu partium*, edited by Academician V.N. Ternovsky, the famous Soviet anatomist and medical historian, we read: “Claudius Galen” [1]. But Galen, like the other Ancient Greek doctors, had only one name. German historians made a mistake when they added the [first] name, “Claudius,” an error that existed for a long time. However, the same German historians also later corrected this mistake, a fact that for some reason was unknown to the Soviet medical historians that worked on the book. One can read in all the Soviet manuals and textbooks of the history of medicine that the Catholic Church’s persecution led to the great

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anatomist Andreas Vesalius's departure from the Anatomy Department and to his tragic death. But the Catholic Church itself did not persecute Vesalius, as the persecution was carried out by his colleagues, led by Professor Silvius of the Sorbonne.

Miguel Servet, the Spanish doctor and theologian, an associate (and, according to some statements, a student) of Vesalius, was declared one of the heroes of the Natural Sciences of the 16th century for his pioneering work in discovering the small circle of blood circulation and was burned to death by Calvinists. Servetology in modern Spain is similar to *Pushkinistika* (the study of Pushkin's literary works) in Russia: Pushkin is the genius of Russia; Servet, along with Cervantes, is the highest embodiment of Spanish thought and spirit. But Servet was not the pioneer of the small circle of blood circulation, as the Arab doctor, Ibn al-Nafis, who worked in Damascus and Cairo, described the same small circle of blood circulation in the 13th century. Besides, "the small blood circulation circle" was not the main issue: Servet, like all the researchers who were Harvey predecessors, wrote about the pulmonary blood circulation, without relying on an evidence-based idea of the two circles of blood circulation [2]. The frantic and persistent heretic Servet has remained in the history of the European culture, but the scholastic scientist Servet did not make any discoveries that would enable him to take a significant place in the history of Natural Sciences and Medicine: here, he is a completely made-up personality.

All the doctors in the Soviet and post-Soviet regions knew the major clinical symptom in the urgent diagnostics of the so-called "acute abdomen" (also known as "the surgical abdomen," which is famously known as the "Shchyotkin's Symptom." But this symptom was previously described at the beginning of the 20th century by the German Surgeon, Obstetrician and Gynecologist M. Blumberg, a fact that was known to the whole medical world, while Shchyotkin only made a report on this discovery at a meeting of the Medical Society in the city of Penza.

There are other countless other examples. Let's look at this issue, using, as a model the history of the Clinic of Internal Diseases in Russia, mostly at the Imperial Moscow University (IMU), in the last third of the 19th century. It is well-known that

at the time that those two outstanding medical luminaries – Grigory A. Zakharyin (1830–1897) and Alexei A. Ostroumov (1844–1908) – both completely dominated and competed against each other, both at the university and the city private practice levels, and also in the scientific public therapeutic sphere. For both therapists and medical historians, Zakharyin and Ostroumov, along with Sergei Petrovich Botkin (1832–1889) and the Saint Petersburg Military Medical Academy (MMA), represented a narrow circle of the founders of Russia's national scientific clinical medicine.¹

Behind the great personalities of these obvious leaders of Russia's clinical medicine, and acting at a second-tier level, was a group of widely-known and famous clinical physicians, including Vyacheslav A. Manassein and Eduard E. Eichwald (both from Saint Petersburg), Konstantin M. Pavlinov and Mikhail P. Cherinov (both from Moscow), Nikolai A. Vinogradov (from Kazan) and Fyodor F. Mering (from Kiev), each of whom was well-known within the whole of Russian medical society.

Pavlinov, Ostroumov's contemporary and colleague at the university (1845–1933), was an outstanding figure in the medical life of Moscow. He was born in a military family in the city of Nerchinsk in the far-flung Russian region of the Transbaikal and graduated from Moscow University in 1868. He started working in the Faculty of Therapeutic Clinic, beginning as a supernumerary employee (i.e. without salary) as an intern, and rising all the way to the position of an extraordinary professor (in 1885). Throughout all these years, he honestly and successfully carried out a huge amount of medical and academic activities at Zakharyin's Department. Zakharyin was the head of the department, but, like his teacher Alexander Over, was in fact not in charge of the department in the last days of his life, remaining instead mostly in the shadows.

There is a feeling that Zakharyin, who was very influential and powerful at the university, helped advance the careers of Cherinov and Ostroumov as well as that of his closest student P.M. Popov,

¹ The title of D.D. Pletnev's book, one of the leaders of the Soviet clinical medicine, is characteristic: "The Russian therapeutic schools: Zakharyin, Botkin and Ostroumov – the founders of the Russian clinical medicine" [3].

while persistently refusing to advance Pavlinov's promotion.² It was only in 1902 that Pavlinov was appointed the director of the prestigious hospital therapeutic clinic, but starting from 1905, he could not read lectures anymore because of a serious illness and consequently resigned.

However, he received a pension only in 1909 "as monarchical favor" that enabled him to leave the university. There is, however, one remarkable fact: the supernumerary extraordinary professor of the faculty, and later hospital therapeutic clinic, was repeatedly elected by his colleagues as the chairman of both the Section of Internal Diseases of the 4th Pirogov Congress of Russian Doctors (in 1891), the Clinical Section of the 12th International Medical Congress in Moscow (in 1897) and the Moscow Medical Society (in 1893–1894), which was transformed on his initiative to the Moscow Therapeutic Society in 1895. This was reliable evidence of the exclusive authority that Pavlinov had among his colleagues.

One more surprising event: in 1890, 25 university professors, including Ostroumov, Sechenov and Cherinov, signed a petition, requesting the appointment of supernumerary Professor Pavlinov to the university staff. The petition was based on the publication of his textbook on Clinical Pathology and Therapy of Internal Diseases – a major scientific work and the first independent domestic guide on this subject. However, the petition was denied.

Apart from the classical textbook, Pavlinov also wrote a book, titled, *Clinical Lectures* (in 1885–1904), which were translated into German and published in Berlin. Pavlinov's scientific works were mainly devoted to the physiology and pathology of metabolism. He was the owner of valuable observations relating to the pathogenesis and the clinical manifestations of diabetes. In the experimental dissertation study, titled, "The Place of Formation of Uric Acid in the Organism", which was carried out in 1871 in A.I Babukhin's Laboratory, Pavlinov showed that uric acid is not formed in the kidneys, but is only secreted by them. Pavlinov was the author of the work on the protective and adaptive role of fever in acute infectious processes, hysteria as a form of neurosis, the clinical manifestations of

a congenital mitral stenosis (or stenosis of the mitral valve), the aortic aneurism and the role of syphilitic infection (syphilis) in its etiology, pulmonary tuberculosis (and he indicated the use of pneumothorax as a method for treating it) and the picture of the clinical manifestations of actinomycosis. His report on chronic nephritis caused by scarlet fever at a meeting of the Clinical Section of the International Medical Congress in Moscow (in 1897) was met with an ovation. Only a very few therapists among Pavlinov's contemporaries could boast of leaving such a rich and purely scientific clinical heritage. However, he did create a scientific school, despite the fact that there were famous professors among his students, such as N.M. Bogdanov and K.A. Buynevich. The exemplar of Soviet therapy, D.D. Pletnev, once said: "Some scientists work collectively with their students, while others prefer to work alone. This is an inborn trait. Pavlinov belonged to the latter"[5].

What place in the history of the Russian clinic of internal diseases belongs to Pavlinov? By the end of the 1880s, Botkin, Eichwald, Vinogradov and Mering had all gone, while Manassein retired in 1891. Only the Moscow leaders of Russian therapy – Zakharyin and Ostroumov – were left. It is believed that Pavlinov, who came after these great physicians, was seen as one of the leading therapists in Russia at the end of the 19th century. However, his name did not enter the history of the 20th century, as it remained only on the pages of special publications. Pavlinov's role in the scientific and public life of Moscow therapists (leadership in the shadow of the majestic Ostroumov) resembles the roles of L.E. Golubinin at the beginning of the 20th century (the second leader after V.D. Shervinsky) and E.E. Fromgold in the 1920s (after such outstanding leaders as Pletnev and M.P. Konchalovsky). His mostly mysterious biography will be a subject of several research studies.

Cherinov (1838–1905) was Zakharyin's oldest student. He was the head of the university's Department of General Therapy and Medical Diagnostics for more than 30 years (1867–1901), where he organized a propaedeutical clinic. His employee, G.N. Gabrichevsky, set up a bacteriological laboratory (in 1891), which was reorganized and transformed into the Bacteriological Institute in 1895. Cherinov was a

² To know more about the relationships between the IMU professors, please, see [4].

popular lecturer and private medical practitioner. He was also the author of outstanding scientific research that was devoted to the pathogenesis of sugar urination (diabetes) (in 1867), which was well received across Europe, as well as theses on the causes of infectious diseases (in 1881) and an organism's immunity to infectious diseases (in 1894). Of course, his scientific heritage cannot compete with those of Zakharyin, Ostroumov or Pavlinov, but in the medical world, he was both a highly influential and an outstanding personality, both at the Moscow and national levels. Using his position as a member of the City Council, he was able to help the university to secure land plots on the Maiden Grounds (Devichie Polye) for the construction of clinics.

Cherinov was not lucky: the peak of his creative activity was in 1870–1880, when Zakharyin and Ostroumov were at their best and most active, and thus left no chance of competition for anyone else (Pavlinov was younger and he was later elevated to the forefront in the 1890s). It was believed in Saint Petersburg that the only doctor that was capable of competing on equal terms with Botkin, both at the academy and at the court, as well as in city private medical practice, was Eduard Eduardovich (Eduard Georg) Eichwald (1837–1889).

Eikhvald, the assistant and favorite student of N.F. Zdekauer, the famous professor of the Medico-Surgical Academy (renamed as MMA in 1881), who from 1865 was the physician-in-ordinary to Grand Duchess Elena Pavlovna, was a professor at the MMA's Hospital Therapeutic Clinic (in 1873–1883). He improved the educational process, built a new auditorium and expanded and equipped the laboratory with the latest medical instruments.

His lectures were highly popular. Effective from 1885, he was the first director and professor of the Eleninsky Institute (The Grand Duchess Elena Pavlovna Clinical Institute), which was built partially on donations made by the Grand Duchess and partially with Eikhvald's money) for the professional development and improvement of qualifications of doctors that specialized in major disciplines. This led to the beginning of postgraduate education for doctors in Russia.

The fifth edition of Eichwald's classic Guide on General Therapy was published in 1892. His scientific works were devoted to the further

development of the methods of percussion and auscultation of the heart, the percussion of the liver and spleen, as well as the pathogenesis and semiotics of the disorders of blood circulation and research into the effects of caffeine on the heart. Just like Botkin, Eichwald set the task of raising the level of Russia's clinical medicine to the European standards of Natural Sciences, based on pathological anatomy, experimental physiology, pathology and pharmacology, as well as a functional approach to the issues and problems of clinical manifestations of diseases.

Professors Manassein and Vinogradov belonged to the senior generation of the representatives of Botkin's Saint Petersburg school. Manassein (1841–1901), a therapist, public figure and publicist, was a professor at the MMA's Department of Clinical Pathology and Therapy of Internal Diseases in (1876–1891). He was brilliant lecturer and doctor, an idol of students, who saw in him not only a professor of medicine, but also a mentor in their lives [6]. His major works were dedicated to the issues of hunger, fever, as well as the etiological and therapeutic roles of psychic influences on various diseases and the epidemiology of tuberculosis. Manassein was the first in Russia to use the gastric tube, also known as the gastro-duodenal tube, for diagnostic purposes in 1872. His numerous students further developed Botkin's clinical and experimental approaches to medical researches. These included prominent professors and physicians N.A. Zasetsky (from Kazan), M.G. Kurlov (from Tomsk), the founder of the Siberian school of therapy, and A.M. Levin (Saint Petersburg, Baku and Leningrad).

Manassein's exclusive influence and popularity in the medical world stemmed equally from his scientific accomplishments, faultless morality and active public and civic positions: he was called "the honor judge of the whole medical world". In 1880, Manassein launched a weekly publication, titled, *Vrach* (The Doctor), which he headed and edited until the end of life. The magazine became a platform for the further advancement of scientific and social thought, promoted the development of medicine in Russian provinces and the activities of the Pirogov Congresses. By the beginning of the 20th century, every third Russian doctor was a subscriber to the publication.

Vinogradov (1831–1886) was, beginning from 1863, a professor of Kazan University, where he founded his own therapeutic school [7]. A.N. Kazem-Bek was his most famous student. Vinogradov's fame, as an outstanding diagnostician, as he was, for example, credited with the first diagnosis of the thrombosis of a pulmonary artery in a living patient (in 1869; and possibly the first description of such a feat in Russia's medical literature), the thrombosis of the coronal arteries, the aneurism of the aorta, the amyloidosis of the liver, the cerebellar tumor, spread far beyond the borders of the province of Kazan. Lots of patients from the Urals, Siberia and Central Asia sought his help.

If the name of Professor Vinogradov held the attention of the medical world in the eastern part of the Russian Empire, a similar fame accompanied the name of a Kiev professor, F.F. Mering, in the southwestern region of the empire. Mering (1822–1887) was the son of a Saxon city doctor. He studied at the Dresden Medical Academy and later in the Medical Faculty of Leipzig University. He started working from 1845 in Russia as a medical doctor in a sugar factory near Kiev. He was also the head of the rural hospital in Poltava province, the anatomist at the First Military Hospital in Saint Petersburg, which was headed by N.I. Pirogov. In 1854, he became a professor at St. Vladimir University in Kiev. The reasons for his appointment were based on his competition essays written in three volumes, which were titled, "The Historical Development of Auscultation and Percussion", and Pirogov's highly complimentary opinion and approval of these works.

In 1855, Mering became the director of the Hospital Clinic, and effective from 1865, headed the University's Medical Faculty's Therapeutic Clinic. At the same time, he was a medical consultant in the Jewish Hospital, the Noble Maidens Institute's Hospital, the Military Cadet Corps and several other institutions. He was constantly invited to almost all consultations on medical cases in Kiev. In terms of diagnostic skills, expertise and scale of private medical practice, Mering was compared even with Zakharyin, but at the same time, and unlike Zakharyin, he always unflinchingly treated poor people for free.

Professor Mering's medical fame spread to both capitals, and his personality, according to

his contemporaries' evidence, became legendary in Russian medical society. Kiev Professor V.P. Obratsov, in his report to the First Congress of the Russian Therapists in 1909, noted that Mering was able to (clarification: was one of the first in Russia) diagnose thrombosis of the coronal arteries of the heart as far back as in 1883. Then, he arrived for consultations when the patient was almost dead. He arrived at the correct diagnosis [of thrombosis of the coronal arteries of the heart], a very brave medical conclusion (clinical diagnosis) at the time, using only the information gained from the medical examination of the patient and the scanty anamnesis data given to him by Obratsov. Moscow Professor Shervinsky, another leader of Russia's clinic of internal diseases in the first decades of the 20th century, noted. Zakharyin always spoke about Mering "as if with some element of admiration and envy" when he said: you know he [Mering] is the richest doctor in Russia!" [8].

S.Yu. Witte, an outstanding Russian statesman, wrote in his memoirs: "Mering... was held in very high esteem not only in Kiev, but also across the whole of the southwestern region of the Russian Empire. In Kiev, one could say, "Mering was known by every dog." ...When a chariot, decked out in a form of a baldachin and tied by two ropes, appeared in a distance, everybody knew that Mering was on the way" [9].

The Zakharyin-Mering comparisons were not limited only to the scope of private medical practice and the enrichment springs that were hidden from a superficial glance (apparently from their financial operations), but also extended to their understanding of their own roles in further advancement of medicine in a natural scientific way. Mering's main works were presented in the form of lectures and were devoted to private issues of the clinic of internal diseases, problems of the history and methodology of medicine, as well as public hygiene [10, 11]. It is evident from these works that Mering viewed clinical activity on the basis of European natural sciences, as well as the progress made in pathological anatomy, physiology and experimental pathology. But, unlike Botkin and his school, Mering did not develop clinical and experimental medicine. This was directly evident from his works and indirectly by the absence of his own scientific school. Mering

was, of course, an outstanding representative of the new direction in the clinic of internal diseases that could be provisionally referred to as “the scientific and empirical approach”, which, in our view, was associated, first and foremost, with Zakharyin’s name.

The funeral of Kiev’s beloved medical doctor became a legendary event. The press reported that the “whole of Kiev” (about 100,000 people, a figure that was obviously exaggerated) was present at the funeral to escort Mering, the honoured and distinguished professor of St. Vladimir University and privy councillor, on his last journey. It was not only obituaries that were published, as there were also lots of reports from the memorial service and the funeral process. Several newspapers wrote: “The burial service was marvelous: Kiev, for the first time in its history, witnessed a burial service that was conducted with the participation of the orthodox priests, a Lutheran pastor and a rabbi; it was the best and clear proof of the boundless love of all Kiev’s residents for Mering.” A street in Kiev was named after him, while the university set up a special scholarship in his honor.³

It is difficult to understand why Soviet medical historians lost interest in Mering, Pavlinov and Cherinov, but one needs to remember that their names were almost forgotten during the Soviet period. It is therefore not surprising that these people’s names were not listed in a special chapter, entitled, “The most outstanding personalities of medicine,” in the monograph of A.G. Lushnikov, the leading Soviet historian of Russian school of therapy, *The Clinic of Internal Diseases in Russia* (published in 1962). This was despite the fact that there were articles dedicated to Vinogradov and Eichwald, along with their portraits, as well as the portrait of P.M. Popov, the student of Zakharyin [12].

Thus, when reconstructing the of the scientific and public life at a certain stage of the development of clinical discipline, medical historians have to review “the list” of the most prominent medical personalities at the time under review, reassess their scientific works and pedagogical activities and other forms of their contributions to the overall development of medicine. There are at

least six obvious criteria that have to be taken into consideration when selecting people that deserve to be included in the history of [Russian] medicine.

Of course, the first criterion is an outstanding scientific contribution to the overall development of medicine. Prominent examples of scientists that made such exceptional contributions to the development of medicine in the first half of the 19th century included Surgeon and Anatomist Ilya Vasilyevich Buyalsky, who proposed the method of ice sculpture and laid the foundation for topographical anatomy, Therapist Grigory Ivanovich Sokolsky, the author of the first comparative research of diagnostic methods of percussion and auscultation as well as classical lectures about chest diseases (1838), along with the description of rheumatism as a general systemic disease.

Examples from the middle of the 19th century included Therapist and Surgeon Over, who published the atlas of clinical and anatomic comparisons, which won several awards in different European countries, and Surgeon Vasily A. Basov, who was the first to insert a fistula in a dog’s stomach in 1842. Similar outstanding examples in the second half of the 19th century came from psychiatry, including Victor K. Kandinsky, who was the first time to describe mental automatism in 1885, and Sergei S. Korsakov, who in 1887 was the first to identify a form of alcoholic encephalopathy with polyneuritis, which was later named after him (the so-called Korsakov psychosis, also spelt as Korsakoff psychosis). It needs to be noted here that that the assessment of a scientific contribution does not have to be limited exclusively to the valuation of the scientists’ works and their scientific and biographic publications. One needs to know fully all the works on the history of the development of the scientific discipline under review.

The second criterion for enshrining the name of a medical doctor in the medical history is the creation of a large scientific school. So, Botkin’s largest therapeutic school and A.Ya. Kozhevnikov’s neurological school, serve to underscore the outstanding roles of their founders, irrespective of their own scientific researches or other merits. It is, however, necessary to treat with extreme care the data obtained not only from the

³ Kievlyanin (Kiev Resident). 1887. October 20. No. 226. P. 2; Kievlyanin (Kiev Resident). 1887. October 22. No. 229. P. 2.

Internet, but also from the so-called “anniversary” articles and statements of prominent doctors’ students: Most often, these are traditionally not very reliable sources. Botkin and Zakharyin’s comparative and extremely subjective judgments in the widely famous works of N.F. Golubov, the student of Zakharyin [13], or the inaccurate biographic information on M.I. Pevzner in the articles of Professor A.M. Nogaller [14], his prominent student, could be described as typical examples of such trends.

The third criterion is exceptional medical fame. This relates to the period under review, for example, to Zakharyin and Ostroumov, at IMU. In some cases, it is the medical and diagnostic skill that becomes the decisive argument or basis for preserving a doctor’s name in history. An example of this is Mering, who did not leave classical scientific works or create a scientific school. The valuable data for determination of this criterion could be taken from the periodicals and memoirs written about the time under consideration.

The fourth criterion is outstanding pedagogical activity. So, in the middle of the 19th century, Fyodor I. Inozemtsev, the professor of Practical Surgery (from 1835), and later of the Moscow University’s Faculty of Surgical Clinic that was created by him (from 1846), as the scientist, was, according to Pirogov, “a fanatic of different hypotheses,” but, as a surgeon, was not known for a virtuosic operational technique. He was, however, considered the star of the Medical Faculty and an idol for the youth [15]. All of Inozemtsev’s contemporaries were of the opinion that he was a brilliant teacher, mentor and reformer of education. His numerous students, among whom were Botkin, were united by love for their teacher and idolisation (respect) for his moral and civic positions, but not by his unity of scientific ideas and methodical approaches. It was, therefore, impossible in this case to talk about a scientific school. Professor Inozemtsev won over his listeners with his erudition, his passionate and constant aspiration to nurture and train not only just doctors with highly developed clinical thinking, but also a moral personality, a doctor and a citizen. Inozemtsev also positively influenced the young medical students with personal examples of selfless (altruistic) works (his numerous assistants in Moscow were called “Inozemtsov’s fellows”), such as the provision of

free medical care and distribution of drugs to the poor and needy.

Inozemtsev’s role, as one of the initiators and active participants of the reform of clinical teaching in from 1840 to the 1860s, which raised the training of doctors in Russia to the European level, was extremely important. In 1858, he founded and edited a publication, called, “The Moscow Medical Newspaper” and set up the Society of Russian Doctors in Moscow in 1861. The typical examples of this trend in the second half of the 19th century included Zakharyin’s role in the emergence of a number of new scientific subjects at IMU and Eichwald’s creation of the Eleninsky Institute (The Grand Duchess Elena Pavlovna Clinical Institute) in Saint Petersburg. So when talking about a scientist’s contribution to the development of higher medical education, the most important historical sources are not only texts, but also the schedules of lectures, university reports and, of course, the guides used in the educational process.

The fifth criterion is exceptionally significant scientific and public work. In the analysis of the materials characterizing the activities of prominent clinical physicians, the most important sources of information are the programmes, protocols and works of scientific congresses, the protocols of meetings of medical societies, as well as their citations in scientific and medical periodicals and memoirs. A classic example was the life and activities of V.A. Manassein who created the journal *Vrach* (“Doctor”).

And finally, an outstanding manifestation of the qualities of humanity, is, of course, naturally the sixth criterion, especially in relation to those times, when the medical oath was not perceived as a formal bureaucratic act, but as a basis for all the activities of a medical doctor. (The most striking examples of such service was the life of F.P. Haass and his followers: L.L. Girshman for whom an eye hospital with an out-patient clinic was built in 1908 with the funds raised by residents of Kharkov, V.A. Frankovsky, as well as F.G. Yanovsky and other prominent doctors), or the highest civic position (for example, of V.P. Serbsky), or the heroism displayed for the sake of advancement of sciences (for example, the experience of self-infection by O.O. Mochutkovsky in 1876, which proved the infectiousness (or contagiousness) of the blood of patients with a typhus fever, or the

diary of the introspection of I.A. Deminsky, who in 1912 identified the culture of a plague microbe, got infected with plague doing an autopsy on a gopher (ground squirrel), and finally, while fatally ill, recorded all the dynamics of the clinical manifestations of the disease and, at the price of his life, proved the full close similarity of the plague in gophers and humans). It is natural that in most cases the achievements of medical personalities are not based on, or determined by, a single, but on several criteria. However, we believe that a positive outcome from the assessment of the achievements of a medical personality that meets

at least one of these six criteria will legally instigate a scientific discussion on the issue of the necessity of preserving the name of such a medical doctor in the annals of Russian medical history.

The author of this article fully understands that he has not solved, but only highlighted the problem [of the preservation of the names of Russia's outstanding medical personalities for posterity] and hopes for constructive suggestions and proposals from his colleagues that could lead to amendments and additions to the content of this publication, as well as objections, if necessary, to the issues raised in the article.

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The clinical medicine developed in Roman times. The name of Galen is widely known. Galen worked first as a surgeon at a school for gladiators. historian must fit into his mosaic of medical history, each detail as it falls into place revealing a steady and natural sequence. Others to whom sincere thanks must be accorded for their expert assistance are the librarians and staffs of the National Library of Scotland, Edinburgh University Library, Hunterian Library of Glasgow University, Signet Library of Edinburgh, and the libraries of the Royal Colleges of Physicians and of Surgeons of Edinburgh. Clinical Medicine in England ; The Return to Hippocrates ; Thomas Sydenham ; The History of Cinchona ; The Great Plague of London ; The King's Evil and the Royal Touch ; Religio Medici. XII XVIII-CENTURY MEDICINE 215. "The History of Medicine: The Middle Ages: 500-1450 " Facts on File | English | | ISBN: 081607206X | 177 pages. During the Middle Ages (ca. The Imperial Laboratory: Experimental Physiology and Clinical Medicine in Post-Crimean Russia Rodopi; 1 edition | October 16, 2009 | ISBN-10: 9042026588 | 382 pages. Following a humiliating defeat in the Crimean War, the Russian Empire found herself exposed due to major deficiencies in her infrastructure. In each individual volume an expert historian of medicine tells the story of a particular disease or condition throughout history - not only in terms of growing medical understanding of its nature and cure, but also shifting social and cultural attitudes, and changes in the meaning of the name of the disease itself. An important event in the history of Russia was the adoption of Christianity as the state religion in 988. Lry Prince Vladimir (978-1015). This serious political act was not an accidental event: the emergence of social inequality and the formation of classes were objective historical prerequisites for replacing pagan polytheism with monotheism. Found their place in the folk healing and healing agents of mineral origin. For abdominal pains, chrysolite stone rubbed into powder was ingested. To facilitate childbirth, women wore jewelery from a wagon. Healers have widely used the experience of traditional medicine in their practice. Some old Russian mona-styr hospitals were also centers of enlightenment: they taught medicine, collected Greek and Byzantine manuscripts. He introduced into the teaching of medicine the principles of the natural history method and indicated the course to be followed to secure further progress in clinical medicine. Many of his pupils came to be famous physicians: all the Russian Universities have had a number of eminent professors who were Botkin's former students. Loving his people and trusting their abilities Botkin ardently struggled for the promotion of Russian physicians to leading scientific and teaching posts, many of which were then occupied by Germans. Botkin should duly be regarded as one of the founders of military the... In the field of medicine and health protection S. P. Botkin was an outstanding public figure.