The article deals with the formation and development of zemstvo medicine in Bakhmut district, Katerinoslav Province. It describes the state of medicine in the pre-reform days, defines the main directions, scope and results of operations of the district zemstvo in the field of health care during the last third of the nineteenth - early twentieth century. It was found that the main zemstvo initiatives that were implemented in the medical field were: the creation of a medical (or feldsher) station in the village that brought health care to farmers; opening of the stationary hospitals and scrupulous quality control of treatments and meals there; epidemic control, smallpox revaccination; educational work among the peasantry to persuade them by actual results of the usefulness of medical or feldsher care.

**Problem statement.** An urgent social need of the present time is to reform domestic medicine. In discussions about such reform the highest prevalence was acquired by ideas about the creation of health insurance and the introduction of "family doctors" who should replace traditional narrow specialists. At the same time proponents of these innovations refer to the experience of European countries. But few people pay attention to the fact that one can find examples of medical affairs in the Ukrainian history which are somewhat similar to the models that are offered today. This implies Zemstvo medicine. Hence it was financed by zemstvo population through taxes, and zemstvo doctors were wide specialists that were invited to assist in case of various diseases. In such a system there were its pros and cons. Therefore, to develop a draft reform of domestic medicine it is useful to
become familiar with the historical experience (both positive and negative) rural medical affairs. This determines actuality of theme of the article.

The view of development of medicine in Bakhmut district is determined by the fact that there were its features that imposed a mark on the Zemstvo medicine. Among these features - beginning of the development of a powerful industry, multinational region (and above all, a large Jewish community), the presence of an influential industrial capital, whose members often provided assistance to building hospitals. In terms of today's military confrontation in the East of Ukraine catastrophic situation with the environment, a high incidence of tuberculosis and infectious diseases, health issues are among the most important for the people of Donbas. Therefore it is interesting to learn how these problems were solved in the past.

**Analysis of actual researches.** The development of Zemstvo medicine in the region has been covered in the works of historians and ethnographers since the late nineteenth century. Among most informative works on the subject should be mentioned the work by G. Roseta, which was written during the Soviet times, as well as modern exploration - in particular, the fundamental monograph by A. Lokhmatova\(^1\) and articles by N. Pisarenko\(^2\), L. Zelenska\(^3\), O. Fyedko\(^4\), etc. A lot of factual material on the subject is contained in the work of Artemivsk scientists S. Tatarinova and N. Tutova\(^5\). In 2011 the work by L. Zavada, S. Tatarinov and V. Blyednov "Features of zemstvo medicine in Bakhmut district" was published, which is currently the most complete investigation of this subject\(^6\). Today the following subjects are quite thoroughly revealed - the establishment of medical

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\(^2\) Pisarenko N.N. Razvitiye zemskogo zdravoohraneniya Donbassa v konce 19 – nachale 20 vv. / N.N. Pisarenko // Novi storinky istorii Donbasu / Ed. Z.G. Likholobova.: Kn. 7. – Donetsk, 1999. - s. 61-64;


\(^6\) Zavada L.V., Tatarinov S.I., Blyednov V.P. Narusy zemskoi medycyny /bakhmutskogo povitu: Uchbovui posibnyk/ L.V. Zavada, S.I. Tatarinov, V.P. Blyednov. – Pyechatniu dvor, 2011, - 84 s.
infrastructure in Donbas, the organization of hospitals, epidemic diseases control. However, Zemstvo medicine of Northern Donbas in the context of local residents’ attitude to medical services has not been particularly covered.

The **aim** of the article is to clarify the main directions, scope and effectiveness of Zemstvo medicine in Bakhmut district in the process of its development during the last third of the nineteenth - early twentieth century.

**Main material.** Bakhmut district occupied the Eastern part of Katerinoslav Province and was the second largest district of Russian Empire. The reforms of 60-70's of the nineteenth century and, above all, the abolition of serfdom resulted in considerable industrial and demographic development of the region. Ever since the late XVIII century district was the most significant center of mining rock salt. By 90’s of the nineteenth century due to the railway Bakhmut salt completely supplanted foreign salt even from the Kingdom of Poland market. From the mid-nineteenth century intensive mining of black coal began there. In 1887 in the western part of the Donetsk mining district, which is almost the same as the Bakhmut district, they produced 49.6 million poods of coal in 27 pits and 110 mines. Mercury which was extracted at Auerbach and Co factory satisfy the requirements in mercury in Russian Empire\(^7\). In 1869, Welshman John Hughes begins construction of steel plant with a working village Yuzivka Bakhmut district. In 1889 a machine-building and iron foundry E.T. Bosse and R.G. Gennefeld was built to the south of Yuzivka, it was a workshop of repairing mining equipment. It's not the full results list of industrial modernization in the district. Of course, the aforementioned economic processes affected the demographic development (population growth), the social structure of district, and eventually resulted in the urgent need to meet the social welfare needs of its inhabitants, including the need for health services.

In the pre-reform period, the living conditions of the vast majority of the population of Northern Donbass satisfying their social needs was at very low level. The central element of rather primitive medical infrastructure was public charity departments that had to take care of the health of average citizens. Under public

\(^7\) Bakhmut / Brockhaus and Efron Encyclopedic Dictionary [electronic resource]. – access mode: https://ru.wikisource.org/wiki/%D0%AD%D0%A1%D0%91%D0%95/%D0%91%D0% B0%D1%85%D0%BC%D1%83%D1%82
charity departments hospitals were operating, but the main group of ill people were “official workers” - low-level officials, soldiers, convicts, and also, strangely enough, prostitutes and homeless. Most hospitals were located in the old, abandoned buildings without any facilities. Often patients with different diagnoses, even infectious, stayed in general wards\(^8\). Treatment was paid, and medical supplies and food desperately lacked.

However, medical affair in Bakhmut district was organized a bit better than in the nearest districts of Katerinoslav Province - Starobelsk and Mariupol. So that, there were 2 hospitals in Bakhmut by 1823 – prison and city (in Mariupol, for example, there were no hospitals). Existence of hospitals was due to the fact that there through Bakhmut ran ways to Taganrog, Crimea, Caucasus, and military teams left there many patients. However, City Hospital, which since 1845 occupied private house, was poorly equipped, had medical things for only 10 people, and simultaneously the amount of beds was 40. The death rate in the hospital was 10-12\(^\%\)^9.

Medical staff was not enough, their wages were negligible, arsenal of medical equipment often included only dental forceps and lancets. The rural population while being almost completely ignorant about medicine, received "treatment" from traditional healers and fortunetellers. Also among rural population there was a popular custom of "curing" seriously ill patients through the taking them to the crowded area. There ill patients stayed and every sympathetic person who at least little understood in treatment, provided care to them. For example, in the village Grishin, Bakhmut district, all patients who had consumption were taken to the central square, where the passer-by were able to help them\(^10\).

Such picture of health care faced Bakhmut district zemstvo - an elected local government, established November 10, 1865 in accordance with the Zemstvo reform in 1864\(^11\). The key document of this reform was the "Regulations on

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zemstvo institutions," which defined the functions and competence of Zemstvos. It is interesting that organization of medical care was not included into the "compulsory" assignments of Zemstvos. Zemstva had to determine the scope and nature of work in the healthcare sector at their discretion. Doesn’t it show the indifference of the country as for the health of its own citizens, as medicine was ranked among the "optional" zemstvo affairs?

However, the Zemstvo people understood that without at least a basic healthcare system, there is no hope for a solution of other social problems. The first step in organizing such aid was the creation of medical stations that had to put healthcare at least a little closer to broad (primarily peasant) masses.

Katerynoslav Province, which included Donbas districts, was divided into such medical areas. Nevertheless, there were not enough doctors. Maintenance of the stations was carried out in 1870 by the 19 doctors, 65 feldshers and 4 midwives. So, one doctor was fallen on by 46,636 people, one feldsher - by 13,259. However, zemstvos were quite limited in their financial situation and faced a difficult choice - where to direct existing funds - to schooling or medical care. Thus, in 1868 Bakhmut zemstvo tried to open gymnasium for men by reducing the number of doctors in the district. At the city hospital was planned to leave one doctor and in the district only feldshers, by removing the three rates for doctors. But this decision was not fulfilled.

In 1882 district was divided into 3 areas: Komyshevaskyy, Hryshynskyy and Halitsinovskiy. There worked 3 doctors and 4 feldshers. Since that time, Bakhmut zemstvo though slowly but steadily was on the way to improve medical affairs. So, in 1885 district already had 4 medical stations, in 1886 – 5: Bakhmut, zemstvo hospital (Doctor O.A. Shklyarevskyy); Komyshevaska hospital reception (Doctor Ya.A. Smolenskyy); Zheleznyanskiy hospital reception (Doctor S.F. Shabelskyy). In 1892 district had more than 6 medical stations, and in 1904-1905 - 8. The seventh Provincial Congress of doctors that took place in 1897, recognized normal  

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13 Otchet Ekaterininskoi gubernskoi zemskoi upravy za 1873. – Ekaterinoslav, 1874. – S. 41-51.
14 Tatarinov S.I., Tutova S.N. Indicated previously – S.149.
medical station to be 700 square versts and a population of 250,000 inhabitants, and the 9th Congress reduced the area to 300-350 sq. versts with a population of 15,000 people. Since 1882, with the construction of the first hospitals (they were called "hospital reception") in the villages Grishin, Holitsinovo and Kamyshivaske usage of hospital care and help of the doctor became available to the masses. An integral part of zemstvo medicine was so called feldsheryzm - the existence of feldsher points in villages and providing independent health care assistance in the absence of a doctor.

Ekaterinoslavskaya district zemstvo council claiming benefits of feldsheryzm concentrated on two circumstances - first, a feldsher can be satisfied with a small salary, which does not suit a doctor, secondly, he is able to provide assistance in simple diseases and at the same time as a person who came from the same environment peasants, he "will likely gain credibility than the doctor, for whom achievement of popularity among farmers will be much more difficult". Because of the relatively small maintenance costs of feldsher points, feldsherstvo found the greatest support in the zemstvos where lack of funds was felt especially acutely, particularly in Bakhmut zemstvo. At meetings of such local governments farmers’ representatives almost always were in favour of development and preservation of feldsher care. For these people a feldsher from common men, even not very professional, were more understandable than highly-educated doctors – comers from upper classes. Especially with the first, usually fellow villagers, they were personally acquainted and often had friendly relations.

So, in 1882 there were 3 doctor and 8 feldsher stations in Bakhmut district. Up to 1912 the number of Bakhmut district feldsher stations was over than twice bigger than doctor stations.

Even completely egregious instances of incompetence of feldshers did not make zemstvo people abandon feldsheryzm. Thus, in 1888 at the meeting of the

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18 Lokhmatova A.I. indicated previously. – S. 89.
Bakhmut zemstvo assembly farmers’ representative Vasilyev reported that feldsher from the 1st medical station drank heavily and did not fulfill his duties. There was a suggestion instead of 11 additional feldshers to hire one doctor, but assembly did not support this idea and advocated for the increase of feldshers\textsuperscript{19}. Focusing on feldshers made farmer be satisfied with the treatment by feldshers and ignore doctors. But feldshers had too basic education and couldn’t treat patients themselves. Often feldshers by their own incompetence shook people’s faith in medical affairs. Back in 1866 Bakhmut council claimed that "having a doctor in the known point will be more useful than moving of three doctors with nine feldshers around their areas, whose advice at the underdevelopment and with failure to provide first aid only ingrain among people that prejudice against doctors, which existed before this time"\textsuperscript{20}.

Meanwhile feldsheryzm had a lot of opponents. They knew that farmers’ opinion about health care doesn’t always reflect its effectiveness. But feldshers had too basic education and couldn’t treat patients themselves. Often feldshers by their own incompetence shook people’s faith in medical affairs.

Gradually deficiencies in feldsher treatment became aware for village population. The phenomenon when outpatients went to the doctor dozens of verts without going to feldshers became more and more frequent. Even not seriously ill patients, who didn’t want to travel the path to outpatient clinic, still preferred not to feldsher, but to a doctor, asking him to come. Bakhmut district doctor V. Stebelskii complained, that “doctors leave hospitals to go to patients on call by village elders and heads, patients themselves or their relatives – most calls are just a waste of time”. As there are a lot of call from patients, who can go to the outpatient clinic themselves\textsuperscript{21}.

In 1894 in Bakhmut district outpatient clinic there were 402 patients who turned there, and in 1895 there were already 668 patients\textsuperscript{22}.


\textsuperscript{20} Zhurnaly Bakhmutskogo Ocherednogo Uyezdnogo Zemskogo Sobraniya vtorogo sozyva 27 of October – 4 of November 1866. – Ekaterinoslav, 1867. – S. 18-19.

\textsuperscript{21} Tatarinov S.I., Tutova S.N. Indicated previously – S.164.

\textsuperscript{22} Otchet Ekaterininskoi gubernskoi zemskoi upravy za 1894. – Ekaterinoslav: Tip. gubernskogo pravleniya, 1895. – S. 143.
However, by the end of the 80's of the nineteenth century in districts of Donbass -
traveling or mixed system remained dominant. It wasn’t real to abandon
feldsheryzm completely, it was necessary to reduce feldsher obligations to doctor’s
assistant, who could only provide their own medical services only in simple cases
and monitor the health of small villages. Thus, in 1913 a feldsher point was built in
Myrno-Dolyyna village, Bakhmut district, as creating outpatient clinic there would
be unreasonable\textsuperscript{23}.

Interesting comments on the priorities of the population in case of your health
has Bakhmut zemstvo council. According to its data Great Russians much more
often turned to the doctor specifically, when Little Russians preferred healers\textsuperscript{24}.
The number of Ukrainian population (Little Russians) in Bakhmut district was
more numerous than the number of Russians\textsuperscript{25}.

Increase in the financing of medical affair, increase in its efficiency and growth
of qualified doctors led to the growth of public trust in medicine. At the end of the
nineteenth century a doctor Ya. Smolensky noted that even ambulatory preventive
medical examinations enjoyed confidence among peasants of Bakhmut district.
Thus, in the village of Pokrovsky (10 ths. inhabitants) about 60 peasants came to
the appointments daily, as they “completely evaluated expression of progressive
care of our zemstvo in case of national aid”\textsuperscript{26}.

Considerable part of the finance zemstvos also allocated for the maintenance
of staff of zemstvo hospitals and implementation of vaccination during epidemics.
For example, Bakhmut district zemstvo council spent about 7900 rubles per year
on keeping doctors, 10 160 rubles - on feldshers, 2400 rubles - midwives, as well
as 2 160 rubles - to rent apartments for feldshers and 585 rubles on smallpox
vaccination. In general, the approximate amount Bakhmut zemstvo council spent
on medical part was about 76,644 rubles per year\textsuperscript{27}.

\textsuperscript{24} ADKM. – F. 9. – Op. 1. – Spr. 10. – Ark. ХІІ.
\textsuperscript{25} Bakhmut / Brockhaus and Efron Encyclopedic Dictionary [electronic resource]. – access mode: https://
ru.wikisource.org/wiki/%D0%AD%D0%A1%D0%91%D0%95/%D0%91%D0%B0% B0%D1%85%D0%BC
%D1%83%D1%82
\textsuperscript{26} Tatarinov S.I., Tutova S.N. Indicated previously – S.164.
\textsuperscript{27} RDIA (Rosiiskyi derzhavnyi istorychnyi arhiv).-F. 573.-Op. 30.- Spr. 1012.- 28 Ark.
Interaction with peasant society, in particular in medical questions was carried out through combined public meetings of zemstvo councils. These meetings were held at least once a week. To these meetings any resident of the district could come. Moreover, residents certainly spoke at the meetings as for local life matters that bothered them most. In the process of communication zemstvos realized all the urgent needs of the district residents. Most often public meetings of zemstvo council were held on Wednesdays at 7 pm in the summer and at 4 pm in the winter. Two hours of the meeting were enough to review put forward petitions, complaints and resorts from the local population\textsuperscript{28}.

About a certain level of awareness by rural community of the necessity to develop medical affairs says the fact of the petition of rural community of giving scholarships to students in feldsher schools, residents from a respective village. Scholarships were also given for studying in higher education institutions. In 1917 Bakhmut zemstvo provided a student of Petrograd Women’s Medical Institute, E. Ananiva, with 100 rubles scholarships per year\textsuperscript{29}.

Important elements of zemstvo medicine system were stationary hospitals in the provincial city, district centers and some villages. Bakhmut zemstvo hospital was the oldest in Donbas; it was created on the basis of the city hospital, which was passed on by public charity department.

Self-government body of the hospitals was hospital board. They solved housekeeping issues and didn’t interfere into the process of treatment. Boards included representatives of the hospital staff and members of zemstvo council. Thus, members of the hospital board of Lugansk zemstvo hospital were 2 doctors, a feldsher, a housekeeper, a nurse and four members of city council.

Zemstvos took care of not only building hospitals, but their maintenance: provided necessary equipment, carried out the procurement of medicines and food supplies, etc. Thus, in Katerinoslav province surgical instruments for district zemstvo hospitals were purchased by the province council. For this purpose, it

\textsuperscript{28} DADA.-F. 113.- Op. 1.- Spr. 119.- Ark. 6.

annually allocated from the budget 2000 rubles, despite the fact that these expenses were not related to the scope of compulsory zemstvo service obligations\textsuperscript{30}.

From the positions of the present, taking into consideration miserable existence and provision of the majority of Ukrainian public hospitals, it is interesting to consider what the diet of zemstvo hospital patients was. For example, standards of food per patient per day in Bakhmut hospital are: veal – 200 gr. or beef – 400 gr., or $\frac{1}{2}$ of a chicken, fish – 400 gr., potatoes – 200 gr., cabbage – 100 gr., oil or cow fat 50 gr. each, buckwheat or millet – 200 gr. each, wheat bread up to 1 kilo, sugar – 4 pieces\textsuperscript{31}.

At the same time Bakhmut zemstvo took into consideration even the specific wishes of patients. Thus, considering wide spread of syphilis it was planned to open syphilis departments in rural hospitals. But it turned out that the peasants are ashamed to treat this disease in their village and they went for treatment to the city hospitals. It was therefore decided to confine to infectious departments in rural hospitals\textsuperscript{32}.

The process of broad, purposeful construction of new district hospitals in the investigated territory began in the late 80’s - early 90’s of the XIX century and continued until the end of the zemstvos existence. This was explained by several reasons. First, the financial situation of the zemstvos improved due to overall economic rise of industry and agriculture. Second, opportunities for district zemstvos to receive loans and grants on building hospitals from province zemstvos and council. Thirdly, doctors started playing an important role in managing zemstvo medical affair. They were convinced and managed to persuade zemstvo residents that to meet the needs of the population health care quickly it’s better to have a network of small hospitals, more or less evenly distributed around the district, rather than spend money on development of large hospitals in provincial and district centers\textsuperscript{33}.

\textsuperscript{30} RDIA.- F. 1284.- Op. 92. – Spr. 53.- Ark. 262 zv.

\textsuperscript{31} Tatarinov S.I., Tutova S.N. Indicated previously – S.158


In 1888 the hospital was built in the village of Grishin, Bakhmut district. In 1898 a hospital appeared in Lugansk. For recruitment in Lugansk hospital zemstvo gave an ad in the newspaper "Yuzhnyi krai" and "Rossiiskii vedomosti".

It wasn’t like that in rural areas where the medical equipping was completely under the care of zemstvo institutions (without patrons and council participation). For example, Bakhmut zemstvo, not finding the funds refused from the construction of a new building for the hospital in the village Kamyshevaskoye.

In certain cases organized ethnic communities demonstrated initiative in building hospitals and even in this they left behind zemstvos possibilities. Thus, in 1901 using Jewish community of Bakhmut funds a public hospital was built, and a new building for zemstvo hospital Bakhmut zemstvo could finish only in 1908.

Providing health care was free for residents of zemstvo area. However, often in zemstvo hospitals there were people who did not belong to this zemstvo. In such cases, payment for services was assumed after recovery. However, usually hospitals never received this payment. Although, according to the procedure, hospital through the court sent the request to the place of living of each “outsider” patient, stating the amount of the treatment and nutrition of the patient, debt collection cases were extremely rare, because the mechanism of exemption from payment was extremely simplified: it was enough for village headman and two witnesses to declare in writing about the poverty and insolvency of the patient, and obligation to pay the debt laid on zemstvo, which supported that very hospital.

Zemstvo council stated the hopelessness of collection of arrears in the amount of 191 rubles 35 kopecks from people of different rank for treatment in Bakhmut zemstvo hospital.

In fact, patients in zemstvo hospitals were in equal terms. But there were exceptions for especially notable patients. Thus, the superintendent of Bakhmut

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34 Tatarinov S.I., Tutova S.N. Indicated previously – S.154
35 DALO (Derzhavnui arhiv Luganskoi oblasti). – F. 61. – Spr. 16. – Ark. 6.
37 Tatarinov S.I., Tutova S.N. Indicated previously – S.158
zemstvo hospital captain Ugnivenko requested from zemstvo council 150 rubles in silver for improved allowance for a gentleman Hilarion Sinegub. Zemstvo gave money, but requested careful report\textsuperscript{40}.

A large number of factories and mines in the district led to the fact that the help to patients was provided in hospitals that belonged to the owners of these enterprises. Thus, 139 beds belonged to hospitals of Petrovskyi, Yuzovskiyi and Druzhkivkyi plants, Gorlovski mines and factories in Kostyantynivka. We can say that at the end of the XIX - early XX centuries there was the formation of mining medicine, since 1900 in all metallurgical plants and most of the mines medical facilities were set up. Yuzovsky main factory hospital was located directly on the territory of Yuzovsky steelworks. Its major drawback was that the building was in the close vicinity of the hot workshops. The rooms in the hospital were not spacious: 2 small rooms for visitors and due to the lack of space patients were often placed in corridors. There was no renovation for a long time. Opened in 1871, as of 1873 it had 13 beds, outpatient care, clinical and surgical department, isolated rooms for infectious patients and also x-ray room. In 1884 there worked: 1 doctor, 1 feldsher and 1 pharmacist. It treated 5494 resident of Yuzovka. By 1914 there worked already 9 doctors, 20 feldshers, 6 midwives, 1 pharmacist and his 2 assistants. In 1914 the hospital treated about 30 000 people, among them 86,542 outpatients and 3125 inpatients. At the hospital there was a pharmacy. For a long time there was a principle that factory workers were treated and acquired medication there for free, and other residents of Yuzovka paid both for treatment and medication. There were also hospitals in the mines: Lidyiivskyi, Rutchenkovskyi, hospital receptions in the mines Voznesenskyi and Alexandrovskyi. In addition, in Yuzovka in 1911 a zemstvo hospital was finally opened with doctors V.P. Radin and S.P. Kobzyev\textsuperscript{41}. This hospital was exemplary at the time, with a side corridor and operating rooms, electric lighting, X-ray facilities, water supply system and a toilet.

\textsuperscript{40} Otchet Ekaterininskoi gubernskoi zemskoi upravы za 1872. – Ekaterinoslav: Tip. gubernskogo pravleniya, 1873. – S. 137-138.

Zemstvos helped chronic patients, sending them to treatment at the sanatorium. Bakhmut district council found money for two months sanatorium treatment for a teacher Mikhailov\(^\text{42}\).

Probably the most difficult task for medicine in the analyzed period was epidemic diseases control. Reasons for high sickness rate were: settlement conditions, poor living and working conditions, poor water supply, long distance from the nearest medical center, low culture and hygiene. Huge industrial, factory and trading settlements, where negative conditions of villages and cities were combined (such as cramped conditions, filth, lack of water supply, etc.) became centers of epidemics.

Unlike hospitals and medical stations, epidemiological affair was mostly run by the provincial zemstvos. Activity of Katerynoslav province zemstvo to combat the epidemics began in 1870, but first it was of a passive manner and it was expressed mainly in the appropriation of funds of the district, sending doctors, feldshers and nurses to the trips to areas affected by epidemics. Quite often provincial zemstvo did not know what its money goes for, where and what epidemic exists, how spread it is, because district zemstvos didn’t always report before province council, considering the money they were provided with as irrevocable assistance. Thus, in 1885 and 1887 provincial zemstvo district complained that Bakhmut and Slovianoserbsk zemstvos did not send data on the progress of epidemics in their districts\(^\text{43}\). Lack of proper coordination between different services in combating epidemics in the early stages of zemstvos activities is illustrated in the following case. In Slovianoserbsk district there was an outbreak of cholera. The situation became disastrous, especially as there was no doctor in the district. Bakhmut doctor Levytskyi was going to go to Slavyanoserbsk district, but Bakhmut district council prohibited to give the doctor horses, because it was necessary to take the permission of the State property then\(^\text{44}\).


\(^{43}\) Otchet Ekaterininskoi gubernskoi zemskoi upravy za 1885. – Ekaterinoslav: Tip. gubernskogo pravleniya, 1886. – S. 28.

\(^{44}\) Otchet Ekaterininskoi gubernskoi zemskoi upravy za 1889. – Ekaterinoslav: Tip. gubernskogo pravleniya, 1890. – S. 58.
Even clergy meddled in this case. In 1888 Bakhmut zemstvo assembly petitioned the Diocesan leaders for them to make the clergy report the zemstvo council about the emergence of epidemics\textsuperscript{45}.

Exactly Bakhmut district was the only one in the whole Katerynoslav province where in all the hospitals there were infectious department in total number of 55 beds. In other districts infectious departments were more of exceptions to the rules\textsuperscript{46}.

Even those infectious diseases which did not spread as much to become epidemic, nonetheless also inflicted a heavy blow on the masses of the village population. The constant companion of village life was syphilis and other venereal diseases. In 1875 in Bakhmut zemstvo hospital 99 out of 649 patients had venereal diseases. A large number of syphilitic diseases were inborn. The peasants of the district often had neglected forms of syphilis, several people from the families were ill; the transmission was made via objects. Poor Jewish families with many children were infected with syphilis. Employed workers from Bakhmut district had primary forms of syphilis\textsuperscript{47}.

The form of sanatorium treatment of tuberculosis patients in zemstvo medical system appeared only in the early twentieth century. Since 1905 Bakhmut zemstvo started to annually subsidize the treatment in sanatoriums for certain number of patients (20-40 people). They were the first in Katerynoslav district to organize resort treatment. In 1913 the first of the province sanatorium with 60 places for tuberculosis patients of the district was opened. Only people who paid taxes and zemstvo officials could be treated in the sanatorium, daily payment for 1 patient was 60 kop.\textsuperscript{48}.

**Conclusions.** Thus, exactly with the creation of Bakhmut zemstvo wide audience of ordinary people of the region, especially the peasants received initially at least basic access to medicine. In the early twentieth century health care

\textsuperscript{45} Zhurnal Ekaterininskoi gubernskoi zemskoi upravy za 1868. – Ekaterinoslav: Tip. gubernskogo pravleniya, 1869. – S. 123.


perfected, new medical stations were introduced, hospitals were built, posts for sanitary doctors, who controlled epidemics, were adopted. However, activity in these directions was limited by a constant lack of funds. Nevertheless, zemstvo medicine was maintained by zemstvo taxpayers, and it generally was poor rural population. So, from the position of the present, we can make a conclusion that in terms of insolvency of the biggest part of the population, carrying over the burden of maintenance medicine on residents’ shoulders was inappropriate.

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