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ANDRIJA ŠTAMPAR AS PRESIDENT OF THE INTERIM COMMISSION OF THE WORLD HEALTH ORGANIZATION

ANDRIJA ŠTAMPAR KAO PREDsjedNIK PRIJELAZNE KOMISIJE SVJETSKE ZDRAVSTVENE ORGANIZACIJE

Alen Ružić*, Željko Dugac**

SUMMARY

This paper provides an analysis of Andrija Štampar's activities after World War II on the establishment of effective international health. Analyzed archival materials have confirmed with numerous evidence that Štampar as the president of the Interim Commission of the World Health Organization (WHO) played a crucial role in the establishment of the ideological starting points and organization of the WHO system, which remain relevant to date. Apart from the strategic foundations, it has been shown that his principles regarding the need for practical action based on the best professional knowledge and experience have no alternatives. The above is presented in the paper with the details of Štampar's activities during the cholera epidemic in Egypt and associated with the experiences of the recent global crisis caused by the COVID pandemic.

Keywords: history of medicine, World Health Organization, public health, cholera, epidemic, Egypt, Andrija Štampar, COVID-19

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INTRODUCTION

This paper analyzes the role of Andrija Štampar (1888-1958), one of the fathers of the World Health Organization (WHO), during the demanding and turbulent period after the Second World War, when he worked on the preparation of the WHO Constitution and when held the office of president of the so-called Interim Commission that had the role of the World Health Organization. At that time, Štampar, as the president of that commission, bore great responsibility for organizing international healthcare in the post-war world burdened by the consequences of the Second World War and epidemics that occurred, such as cholera in Egypt in 1947, which will be discussed in more detail later in this paper. It was also the era when the new World Health Organization was created, with a more comprehensive role than previous organizations dealing with international health had, and even more complex than the pre-war Health Organization of the League of Nations (WHO, 1958).

Following the disintegration of the League of Nations Health Organization and other international health offices, a clear international response to the existing health and social problems that arose as a result of the great war was completely lacking. From the position of the first vice-president of the Social and Economic Council of the United Nations and as the president of the Interim Commission of the WHO, and thanks to the years-long experience of work for the League of Nations, Andrija Štampar played a crucial role in the creation of a modern global public health system. He had the main role in establishing the ideological foundations of the Organization, he co-created its organizational principles and effective program frameworks as well as its fundamental goals. Even during the preparations for the International Health Conference held in the spring of 1946, he insisted and included in the preamble of the future WHO Constitution the definition of health as a basic human right regardless of race, which is not only the absence of disease but also complete physical, mental, and social well-being (Cvjetanović, 1990). Andrija Štampar emphasized the necessity of the WHO as the only umbrella global health organization. In practice, he carried out the program of unification and coordination of existing international health organizations and the renewal and establishment of new ones with full respect for the specifics and requirements of each member of the United Nations (UN). Štampar incorporated into modern public health the need to make strategic decisions based on the best available epidemiological experiences and knowledge (Dugac, 2008). In his work, he emphasized the need for a practical orientation of the WHO, and in line with it, he solved numerous current problems of the time, which

will be displayed in this paper on the example of the activities related to the epidemic of cholera in Egypt. Decades later, the unprecedented global health and social crisis caused by the COVID pandemic once again confirmed the correctness and significance of Andrija Štampar's principles and decisions.

In the text that follows, based on archival material stored in the Archives of Yugoslavia in Belgrade in the collection of the Committee for the Protection of Public Health of the Government of the Federal People's Republic of Yugoslavia, 1946-1951, the activities of this important public health expert will be observed. Correspondence with the Committee, i.e., with its then president, doctor Pavlo Gregorić, who served as the Minister of Health, is preserved in the mentioned documents collection. This paper will also use some documents that are kept in the Croatian State Archives in the personal fund of Andrije Štampar and in the minutes of the WHO sessions that are kept in the League of Nations Health Organization in Geneva.

ANDRIJA ŠTAMPAR'S WORK FOR THE UNITED NATIONS AND THE WORLD HEALTH ORGANIZATION

The Economic and Social Council, as one of the main councils of the UN, consisted of 18 members - representatives of the member countries. It was founded during the session of the UN General Assembly, which was held from January 10 to February 14, 1946, in London. At the session on January 23, 1946, the first president of that council, the Indian Ramaswami Mudaliar, was elected, and Andrija Štampar was elected the first vice president.¹ Journal of the economic and social council from 1946 gives more details about that event. This is how we learn that Štampar was present at the first meeting of the Social and Economic Council of the UN as a representative of Yugoslavia. Carlos Lleras Restrepo, the representative of Colombia, proposed the aforementioned Ramaswami Mudliar for the president of the council. The Canadian representative supported the nomination of the Indian representative. Since there were no other proposals, Mudaliar was declared president by acclamation. After that, the election of the vice president began. Chinese representative Chang nominated Andrija Štampar, which was supported by the representative of the United States of America. After that, Masaryk, the Czechoslovak representative, as well as the representatives of France and Greece, spoke highly of Štampar, which was accompanied by acclamation.

¹ United Nations documents, Part 5, No. 1, Economic and Social Council, 1946-1947. LNHO Archives, Geneva.

Addressing the delegates, Štampar said on that occasion that everyone knows that Yugoslavia pleaded for the general idea and that it would contribute to the common goals of the council. The representative of Colombia, Carlos Lleras Restrepo, was also nominated for second vice president. At that time, the Economic and Social Council was considered one of the basic organs of the UN, and the work of numerous other councils and commissions was organized under this authority.²

At the meeting of the Economic and Social Council held on February 2, 1946, Štampar made his remarks regarding international health, stating that the report of the Preparatory Commission did not mention human health as the most urgent problem, therefore he believed that human health was a very important international topic. In this regard, Štampar supports the Chinese delegation, which also made a statement in this regard. Moreover, he suggested that during the war, international health organizations significantly reduced or even stopped their activities. According to Štampar, this particularly applied to the International Public Health Office in Paris and the Health Organization of the League of Nations.³ Štampar was very active in the Social and Economic Council. He also presided over the same session on September 6 since President Mudaliar could not be present.⁴

In addition to his activities in the Social and Economic Council of the UN, Štampar, as we mentioned earlier, also held an important position in the bodies that led to the formation of the future World Health Organization (WHO). The international conference in San Francisco, at the suggestion of delegates from Brazil and China, decided to set up a special preparatory committee that will prepare materials for the international health conference. This was accepted by the Economic and Social Council of the UN on February 15, 1946, which established a technical preparatory commission that met in Paris on March 18, 1946. In connection with the aforementioned, the Economic and Social Council passed a special resolution dated February 15, 1946, in which it names the following members of that Committee: Dr Gregorio Bermann (Argentina), Dr Rene Sand (Belgium), Dr Geraldo H. De Paula Souza (Brazil), Major-General G. B. Chisholm (Canada), Dr P. Z.

² Minutes, Journal of the economic and social council, No. 1, first year, HR-HDA-381. sign. 8.1. Croatian State Archives in Zagreb.

³ Minutes, Journal of the economic and social council, No. 3, first year, HR-HDA-381. sign. 8.1. Croatian State Archives in Zagreb.

⁴ Newspaper clipping, unknown newspaper title, HR-HDA-381. sign. 8.1. Croatian State Archives in Zagreb.

King or Dr Szeming Sze (China), Dr Josef Cančík (Czechoslovakia), Dr Aly Tewfik Choucha Pacha (Egypt), Dr Andre Cavailln or Dr Xavier Laclanche (France), Dr Phokion Kopanaris (Greece), Major C. Mani (India), Dr Manuel Martinez Baez (Mexico), Dr Karl Evang (Norway), Dr Martin Kacprzak (Poland), Sir Wilson Jameson or Dr Malville Mackenzie (United Kingdom), surgeon Thomas Parran or Dr James A. Doull (USA), and Dr Andrija Štampar (Yugoslavia).⁵

Štampar's exceptional activity in shaping the future conceptual and practical orientation of the WHO can be traced in the minutes of the Preparatory Committee for the International Health Conference, which sat in Paris from March 18 to April 5, 1946. Štampar makes special suggestions related to the establishment of an international health organization. From the documentation, it can be seen that he was a member of as many as four subcommittees in which he worked, which were related to setting the goals and directions of the new organization, defining governing bodies, passing resolutions, and establishing relations between existing health organizations and the future WHO. At that conference, Štampar insisted on defining the word health, what it is, and what it represents. Furthermore, along with other colleagues, he strictly advocated the establishment of a single world health organization that would have full authority, and for existing international health organizations, such as the Pan American Sanitary Bureau, to become regional offices of a single WHO. Štampar also gives written suggestions related to the establishment of a future international health organization, mentioning at the beginning the history of important international health organizations that preceded it, such as the International Office of Public Health in Paris, the Pan American Sanitary Bureau, the Health Organization of the League of Nations, etc. At that conference, the preamble to the constitution of the World Health Organization was formulated, and health was defined as a basic human right, the right of every human being, regardless of race, gender, language, and religion. Health is defined not only as the absence of disease but also as a state of complete physical, mental, and social well-being. According to the minutes, Štampar participated in 19 meetings (there were 22 in total), and then on April

⁵ Invitation to an international health conference. Resolution of the Economic and Social Council of the UN accepted during the first meeting, 23.1.-18. 2. 1946. LNHO Archives, Geneva.

2, 1946, he left the conference. The conference was chaired by Rene Sand, a well-known Belgian public health expert, with his support.⁶

At the international health conference held in New York from June 19 to July 22, 1946, representatives of world governments through the Economic and Social Council agreed that an international organization called the World Health Organization should be established. On that occasion, they agreed on the establishment of the so-called Interim Commission, which was tasked with the adoption of the WHO constitution and its constitution. The temporary commission consisted of representatives of Australia, Brazil, Canada, China, Egypt, France, India, Liberia, Mexico, the Netherlands, Norway, Peru, Ukraine, the United Kingdom, the USA, the USSR, Venezuela, and Yugoslavia.⁷

The first session of the Interim Commission was held in New York from July 19 to 23, 1946. At it, the representative of Peru, Paz Soldan, was given the position of head of the session. Štampar then pointed out that the members of the commission would be appointed personally, but they will also have to be confirmed by the governments of their countries, and some changes may occur in this regard. He also stated that he would represent Yugoslavia at its first session. At the session held on July 23, the phase of the election of the permanent president of the Interim Commission took place. Dr Thomas Parrana, the representative of the USA, was proposed for this position, but he refused the position, and Dr Krotkov, the representative of the USSR, had to return to Moscow and was also unable to take the position. Dr Melville D. Mackenzie, the representative of Great Britain, strongly advocated that Štampar, as a member with a long career in international health and extensive experience, should be nominated chairman of the new organization of the United Nations. The nomination was also supported by Xavier Leclainch, the French representative, who agreed with Dr Mackenzie about Dr Štampar's merits in public health and reminded them that Yugoslavia had done an excellent job in that field before the war. Support was also provided by Dr T. C. Routley, the Canadian representative and Cornelis Van Den Berg, the Dutch representative, as well as Dr Levko Ivanovich Medved, the Ukrainian representative, who stated that, in his belief, Štampar would fill the position extremely well since he has proven his ability in public health both in his own

⁶ Minutes of the Preparatory Commission for the International Health Conference, Paris, March 18-April 5, 1946. LNHO (WHO) Archives, Geneva.

⁷ Minutes from the international health conference, New York, 19.6-22.7.1946. LNHO (WHO) Archives, Geneva.

country and elsewhere during his service for the League of Nations, and he is the vice president of the Economic and Social Council. Support was also provided by Dr Joseph N. Togba of Liberia, Dr Aly Tewfik Choucha Pacha, representative of Egypt, Dr Octavio S. Mondragon, representative of Mexico, and Dr Geraldo H. De Paula Souza of Brazil. Souza recalled that he first met Štampar in 1927 and that Štampar was known in Europe as the Napoleon of public health at that time. The temporary chairman then asked the assembly if they wanted to vote on the election secretly or publicly. After that, Dr. Togba proposed that the election of Štampar be done by acclamation, and this proposal was supported by Dr Mondragon and others. After the declamation, Dr Fedor Grigorievich Krotkov, the representative of the USSR, congratulated Štampar and wished him success in this important work, and Štampar took over as chairman.⁸

The second meeting of the Interim Commission was held in Geneva from November 4 to 13, 1946. Štampar, as president, opened the meeting and led the sessions.⁹ The third session of the Interim Commission was held in Geneva from March 31 to April 12, 1947, also under the leadership of Štampar. According to the minutes of the first WHO plenary session, held on June 24, 1948, also in Geneva, it can be seen that the president of that session was Andrija Štampar, who opened the meeting and welcomed the participants and observers. In his welcoming speech, Štampar stated that for the past two years, he had chaired the Interim Commission, which, until the declaration of the WHO, promoted international health and the aspiration to raise higher health standards for people around the world. It further recalls the tradition in the field of international health that extends from the Health Organization of the League of Nations through the Interim Commission at the WHO. Štampar's speech was followed by the speeches of the Ministers of internal affairs of the Swiss Confederation and the European Office of the United Nations. Štampar then invited those present to accept the agenda and to start adopting the necessary commissions and documents. He also provided a report on the two-year work of the Interim Commission and the basic ideas that shaped the conceptual direction of the future WHO. On that occasion, he claims that disease is not caused only by physical and biological factors

⁸ Minutes of the first session of the Provisional Commission, New York, 19-23 July 1946. LNHO (WHO) Archives, Geneva.

⁹ Minutes of the second session of the Provisional Commission, Geneva, November 4-13, 1946. LNHO (WHO) Archives, Geneva.

but that economic and social factors play an increasingly important role, so a certain sanitary problem must also be looked at sociologically.¹⁰

In the Personal Fund of Andrija Štampar, there is an invitation in which he, as president of the First World Health Assembly, invites guests to a formal dinner on July 29, 1948, at 7 p.m. at the Restaurant du Parc des Eaux-Vives.¹¹ In 1949, Štampar reported to the Ministry of Foreign Affairs that the Second World Health Assembly had been convened in Rome on June 13, 1949, and that he, as president of the First Assembly, had opened the Second one and led it until the election of a new president.¹²

CHALLENGES OF ORGANIZING AND LEADING THE WORLD HEALTH ORGANIZATION

During his tenure as President of the Interim Commission of the World Health Organization, Andrija Štampar performed numerous tasks dictated by the international public health situation at the time, and he also participated in the decision-making and operation of numerous new programs (Grmek, 1966). During his presidency, a significant public health problem arose that could have had wider international implications, it was cholera in Egypt. Also, at the time of the creation of the new international order, numerous institutions of international health had to be formed, some of which already had their traditions, while others were just emerging, which was certainly an extremely demanding task, since it was necessary to consider numerous professional parameters and jurisdiction, but also the requirements of individual members of the United Nations and their national policies. For example, at the first WHO assembly Štampar advocated that the International Children's Fund and WHO tried to establish cooperation and coordinate their activities. His proposals were accepted, and finally, both organizations agreed on

¹⁰ Minutes of the first WHO plenary session, June 24, 1948. LNHO (WHO) Archives, Geneva.

¹¹ Documentation on the chairmanship of the first WHO assembly. HR-HDA-831, sing. 8.3. Croatian State Archives in Zagreb.

¹² Letter, Štampar for the Ministry of Foreign Affairs, to the Department for International Organizations, January 8, 1949. Committee for the Protection of Public Health of the FNRJ government, 1946-1951, Fund 31, folder 7. Archives of Yugoslavia in Belgrade.

the action, which was particularly significant for the health care of children.¹³ Issues of financing new health institutions and their programs were extremely important, therefore Štampar tried to approach their solution rationally. While working for the WHO, Štampar tried to organize tasks and expenses in the most financially rational way. This is especially evident in the letter in which Štampar, in August 1948, reports to the Yugoslav Ministry of Foreign Affairs stating that, at the Health Assembly, the delegation of the USSR proposed to establish a temporary office within the WHO administration that would study the needs of European countries that were destroyed during the war and that this office would look for ways to help them in the rehabilitation of health care. The proposal was adopted, and then the delegation of Czechoslovakia, with the support of the USSR, Ukraine, Belarus, Poland, Romania, Hungary, and Albania, requested that such an office be established in Prague or Karlovy Vary. Yugoslavia was not invited to join that request. Štampar warned that this proposal required higher financial expenditures and the appointment of new staff. The WHO Executive Board discussed the matter and then decided to leave the decision for the session in October of the same year. In connection with the above, Štampar expresses the opinion that it is not a good idea to break down the organization and establish many new offices, but rather to concentrate on the office in Geneva. He noted: In my opinion, at the beginning of work, WHO should be carried out as much as possible with as much savings as possible, and not get involved in an overly branched administration, which would require greater material sacrifices. In general, it was noticed at the WHO assembly that the delegations were looking for the most extensive activities. However, they were not ready to make material sacrifices for it, but they asked that someone else pay for the programs that they stood for. Štampar, therefore, requested a statement from the Yugoslav committee that would allow him to take a position that corresponds to the interpretation of his national authorities.¹⁴

¹³ Letter, Štampar for the Ministry of Foreign Affairs, to the Department for International Organizations, 18 April 1949. Committee for the Protection of Public Health of the FNRJ government, 1946-1951, Fund 31, folder 7. Archives of Yugoslavia in Belgrade.

¹⁴ Letter, Printer for the Ministry of Foreign Affairs, 31 August 1948. Committee for the Protection of Public Health of the FNRJ government, 1946-1951, Fund 31, folder 7. Archives of Yugoslavia in Belgrade.

CHOLERA IN EGYPT - EXAMPLE OF ŠTAMPAR'S STRATEGIC PRINCIPLES IN ACTION DURING THE PRESIDENCY OF THE INTERM COMMISSION OF THE WORLD HEALTH ORGANISATION

One of the important public health problems - which arose during Štampar's presidency of the Interim Commission - was, as mentioned, the cholera epidemic in Egypt. In a letter sent to the Committee for the Protection of Public Health of Yugoslavia on November 6, 1947, Štampar states that the WHO office telephoned him, saying that two experts had returned from Egypt the day before and reported that cholera was on the decline. According to Štampar, the Egyptian government had sent a protest to the WHO due to the measures implemented by certain countries in violation of international conventions. Some countries had, indeed, banned the import of cotton from Egypt. France, for example, did not allow a single passenger from Egypt to disembark in their country. It was stated that the Egyptian ports of Alexandria and Port Said had not even been declared infected by international conventions, so such restrictions should not have even been implemented. Štampar also pointed out that the Yugoslav Maritime Administration also prohibited Yugoslav ships from entering Egyptian ports, and this could only be done if the port was declared infected according to international regulations. "I am afraid that such restrictions will adversely affect our relations with Egypt, especially concerning the exchange of goods", Štampar added. Moreover, he noted that it is of primary importance that each country strictly adhered to international conventions since they were drawn up and adopted based on the experience and knowledge of the best experts in the international epidemiological service, concluded Štampar.¹⁵

The above letter was not the only one dealing with the cholera problem in Egypt, which had significant public health and economic implications. From a letter sent on November 5, 1947, we see Štampar reporting to the Committee for the Protection of Public Health that cholera in that country is on the decline and that 80% of the population has been vaccinated against the disease, which he says, is a very great success and effort. In the laboratories of the Egyptian Ministry of Health, 300,000 doses of cholera vaccine are prepared daily from strains isolated during the epidemic itself. Moreover, the WHO procured and made available a sufficient number of vaccine doses. Accord-

¹⁵ Letter, Andrija Štampar for the Committee for the Protection of Public Health in Belgrade, November 6, 1947. Committee for the Protection of Public Health of the FNRJ government, 1946-1951, Fund 31, folder 7. Archives of Yugoslavia in Belgrade.

ing to Štampar, they were from European and American laboratories, but the USSR also provided a significant amount. The vaccines were transported from the United States by a special plane, so - as Štampar concludes - from an international point of view, everything possible has been done. At the same time, he warns the Committee that alarming news about the further spread of cholera in the Mediterranean countries does not correspond to the truth. "So far, it has not appeared anywhere in the ports, and the alleged two cases from Livorno are not cholera but abdominal typhus, as bacteriologically determined." This information was particularly significant since in Yugoslavia a fear persisted that the disease would be transmitted through one of the Adriatic ports. Štampar further stated that the cholera strain isolated in Egypt was transferred to the Institute of Hygiene in Utrecht and given to Dr Zimmermann, the president of the Committee for Biological Standardization of the WHO in Geneva. For the needs of Yugoslavia, he took measures and obtained fresh cholera strains and serum for agglutination, which, he says, will be delivered to our representative office in Switzerland by courier. Štampar also reports on the fact that there is enough vaccine in Egypt and it should not be sent from Yugoslavia, especially not the one that is not certain since the laboratories in the country did not have fresh strains of cholera at that time.¹⁶ Štampar's next letter from the 13th of the same month additionally confirms that cholera in Egypt is on a significant decline. It states that the day before, on November 12, 1947, only 140 cases and not a single death was reported, and equally, not a single new area was infected. In the following, Štampar concludes that Yugoslavia should not implement any traffic restriction measures and should not believe various alarming newspaper reports. In the same letter, he presents the characteristics of the functioning and purposefulness of the organization he manages and states that it has shown the level of its commitment since it sent Egypt tons of vaccines, blood plasma, sulphaguanidine, syringes, and needles for injections by a special plane. The implemented measures managed to localize cholera and protect neighboring countries. The Egyptian government, Štampar continues, expressed its gratitude to the WHO and paid the expenses that the organization advanced for

¹⁶ Letter, Andrija Štampar for the Committee for the Protection of Public Health in Belgrade, November 5, 1947. Committee for the Protection of Public Health of the FNRJ government, 1946-1951, Fund 31, folder 7. Archives of Yugoslavia in Belgrade.

it.¹⁷ Finally, in a letter from December 1947, Štampar informs the Committee for the Protection of Public Health that cholera has practically come to a halt in Egypt. Since all Mediterranean ports are free from cholera, he believes that vaccine production should not be started on a larger scale¹⁸.

DISCUSSION

The WHO, as a unique and global health organization, was created in its current form and functional structure in large part thanks to the activities of Andrija Štampar during the period after World War II. The devastated post-war health care and the non-existent and inactive local health organizations without coordination were transformed into a modern system of global public health thanks in large part to the activities carried out by Andrija Štampar, who held the position of president of the WHO Interim Commission and first vice-president of the United Nations Social and Economic Council (Dugac, 2020). Being an ideologue and practitioner, he is responsible for the creation of a unique world health system under the auspices of the WHO, guided by knowledge and experience, his rational organization, and clear goals that are at the same time strategically coordinated but also practical and effective. Andrija Štampar's definition of health is the foundation of medicine to date. It emphasizes equality and everyone's right to health, but besides the biological-medical component, it also promotes the social element, thus accomplishing one of the greatest and unquestionable achievements of civilization (Brown & Free, 2020).

Through the example of action during the cholera epidemic in Egypt, as president of the WHO Interim Commission, Andrija Štampar affirmed his knowledge and experience against prejudices and unfounded decisions. He publicly opposed countries that, in defiance of international conventions, introduced unnecessary restrictions on movement and, without a valid epidemiological reason, provoked an unnecessary social crisis and economic damage in several countries, most notably in Egypt, which was just recovering from the epidemic. The cholera epidemic in Egypt is an example in which

¹⁷ Letter, Andrija Štampar for the Committee for the Protection of Public Health in Belgrade, November 13, 1947. Committee for the Protection of Public Health of the FNRJ government, 1946-1951, Fund 31, folder 7. Archives of Yugoslavia in Belgrade.

¹⁸ Letter, Štampar for the Committee for the Protection of Public Health, 12/12/1947. Committee for the Protection of Public Health of the FNRJ government, 1946-1951, Fund 31, folder 7. Archives of Yugoslavia in Belgrade.

Andrija Štampar expressed the extremely current topic of optimal supply of the area affected by the epidemic and showed the importance and practical function of the WHO in crisis management. With critical judgments about the necessary quantities of the most appropriate vaccines and the management of production related to the mentioned criteria, he additionally highlighted the global importance, function, and expediency of the WHO. This example best illustrates WHO as an umbrella body in the strategic management of global health driven by knowledge and experience (Borovečki, Šogović & Kujundžić, 2020).

The COVID pandemic, which we witnessed during 2020 and 2021 in the scope of global health and general social disaster, in many aspects, reminded health workers of the eternal relevance of Andrija Štampar's principles. At the beginning of the pandemic, the world lacked answers to many questions. Optimal treatment of infection, the required level of personal protection, the need for quarantine of asymptomatic patients, diagnosis and risk of spread during the incubation period, treatment of infected mothers, immunocompromised and other particularly sensitive groups, performing autopsies, etc. were just some of the open questions (Blumenthal, 2020). Although modern clinical medicine is based on scientific evidence, it was the COVID pandemic that reminded us that this doctrine is not the only and absolute one and that it cannot be appropriate for new and insufficiently known mass infections in which action must be taken without delay. We were once again objectively, concretely, and very argumentatively reminded of Andrija Štampar's principle, according to which health care should be based on the best knowledge but also on experiences (Greenhalgh, 2020). The famous statement of Winston Churchill - "one should never let a crisis go to waste" is in line with Andrija Štampar's principles, and we have learned a lot from the COVID pandemic¹⁹. Just as the post-war situation was the impetus for the creation of the modern WHO system, this recent pandemic has once again highlighted the need for a healthy community of European countries (European Health Union). Since the Treaty of Lisbon in 2010, the unity of Europe as a geographic area in health care was practically forgotten until the COVID pandemic, and now the necessity to unify health practices and develop a unique health strategy for our continent has become a primary public issue and political interest (McKee, 2020). However, we are witnessing how slowly concrete actions take shape, and new world crises seem to once again throw the harmonization of European health systems into the background. It seems that, even at this moment, we need a visionary and a practitioner like Andrija Štampar.

CONCLUSION

Andrija Štampar, through his work on shaping the WHO constitution as well as during his presidency of the Interim Commission of the WHO from 1946 to 1948, significantly contributed to laying the foundations of modern international healthcare. With his work, he managed to unify the scattered competences of various international health organizations within one umbrella institution, such as the WHO, and in this way, more effectively and uniquely influence the possibilities of active impact in different parts of the world in the face of numerous and different medical problems.

He had the main role in establishing the ideological foundations of the WHO, and he co-created its organizational principles and effective program frameworks as well as its fundamental goals. Even during the preparations for the International Health Conference held in the spring of 1946, he insisted and included in the preamble of the future WHO Constitution the definition of health as a basic human right regardless of race, gender, language, and religion, which is not only the absence of disease but also complete physical, mental, and social well-being. This was certainly one of the basic changes in the understanding of health and its definition in society, and we could freely say an important civilizational reach.

Actively participating in the organization of actions related to the prevention of the spread and control of cholera in Egypt in 1947, Štampar demonstrated the strength of joint international activities related to the emergence of a dangerous epidemiological problem and the ability to actively participate in its resolution. The current COVID pandemic has shown that the basic principle of modern medical practice known as *evidence based medicine* has an unquestionable value in most clinical areas but that this doctrine is not applicable to situations of new, unexpected epidemics. Situations like the COVID crisis highlighted the value, relevance, and irreplaceability of Štampar's public health principles. During the gathering of scientific evidence on a massive new infection, which requires a significant amount of time, it is precisely these principles that enable the best action without delay and promote the value of existing knowledge and experience.

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SAŽETAK

Rad donosi pregled aktivnosti Andrije Štampara nakon Drugoga svjetskog rata i opisuje zatečeno stanje neaktivnih nacionalnih zdravstvenih organizacija. Obradenom arhivskom građom brojnim je dokazima utvrđeno kako je upravo Andrija Štampar, kao predsjednik tzv. Prijelazne komisije Svjetske zdravstvene organizacije (SZO), tadašnjim intenzivnim djelovanjem presudno djelovao na uspostavu ideoloških polazišta i organizacije sustava SZO, koji ostaju aktualni do danas. Osim strateških osnova, pokazalo se da njegova načela potrebe praktičnog djelovanja utemeljenog na najboljim znanjima i iskustvima struke nemaju alternative. To je u radu ilustrirano detaljima Štamparova globalnog djelovanja tijekom epidemije kolere u Egiptu i povezano s iskustvima nedavne globalne krize uzrokovane COVID pandemijom.

Ključne riječi: *povijest medicine, Svjetska zdravstvena organizacija, javno zdravstvo, kolera, epidemija, Andrija Štampar, COVID-19*