

ASPECT ON HEALTH SOCIOLOGY AND SOCIAL MEDICINE REFLECTED IN THE STUDIES OF CONSTANTIN STANCA (1889-1969)

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Abstract

Constantin Stanca (1889-1969) was the first director of the Institute for the Study and Prevention of Cancer from Cluj between 1929 and 1940 and the founder of the Gynecologic Oncology Surgery Department of this Institute. During his important career in gynecology and surgical oncology, which took place in Cluj and in Bucharest, he was also interested in medical sociology and in social medicine. Our paper presents some of Stanca's objectives in these domains: to increase the health status of women, to prevent gynecological diseases and to improve women's working conditions, especially in factories.

Keywords: Constantin Stanca, sociology of health, social medicine, women's health, gynecological pathology.

Constantin Stanca (1889-1969) was an important Romanian gynecologist and oncologic surgeon. He was director of the Institute for the Study and Prevention of Cancer from Cluj between 1929 and 1940. He initiated the organization of three departments in this Institute: Gynecologic Oncologic Surgery, Radiotherapy and Experimental Cancer. Between 1929 and 1940 he was the director of the Gynecologic Oncologic Surgery Section. Between 1932 and 1938 he directed the review "Cancer" of the Institute, which was the first Romanian publication in the field of oncology. He also realized the first Romanian film about oncology. Stanca's organizational qualities, his achievements, as well as his reputation as an oncologic surgeon and gynecologist were appreciated during his lifetime and are mentioned in the Romanian history of medicine.

In this article we present an overlooked aspect of his career: his preoccupations in health sociology and in social medicine. His conceptions in these domains were elaborated mainly during the interwar period. Many of Stanca's sociological conceptions carried the influences of Prof. Iuliu Moldovan (1882-1966), who created the

Institute for the Study and Prevention of Cancer in Cluj and founded a powerful school of hygiene and social hygiene within the Faculty of Medicine of the same town.

This article has the purpose to mark 125 years since C. Stanca was born.

For a better understanding of the historical context in which Stanca outlined these sociological concepts, it is important to emphasize that in response to the severe problems created by the First World War, many European states adopted, as mentioned by Keir Waddington, "measures to promote the health of the nation, as civilian health became militarily important. Governments impinged more directly on their populations: controls were introduced over daily and working life, and public health services were extended [...]. Measures were established to improve health conditions (and hence efficiency) at work. Rather than representing a watershed, the War accelerated existing trends" [1].

One of the most interesting papers in the field of sociology of health – written by C. Stanca – is entitled "Study of the woman" ("Studiu asupra femeii"). It was published in 1932. At the beginning of the study the author showed that physicians – in particular gynecologists – must fulfill three tasks. First of all they should be concentrated to increase the health status of women. The second role of

physicians – according to Stanca’s opinion – is to prevent gynecological diseases. And last, but not at least, physicians must be involved in activities for improving women’s working conditions in factories and the women’s quality of life. In the same study, he mentioned that in order to have a good status of health, the woman “must lead a peaceful life, without psychological trauma, because the woman is the one that must be an example in her entourage” [2]. It is significant that more than half a century after Stanca expressed his conception, “«feminine» attitudes, such as a willingness to consider oneself vulnerable and «at risk», and to seek help have been validated as desirable characteristics for both men and women” (as mentioned E. Lee and E. Frany) [3].

About the employment of women in factories, Stanca stressed upon the immediate result observed on most working women: “withered cheeks, sunken eyes and, in a word, a physically decaying body” [4]. He showed that if in Europe, before the First World War, women working in industries represented a percentage of 21%, today [in 1932] this percentage is much higher, approximately 50% to 60%.

The fact that the percentage of women working in the industry was higher was a signal for the implementation of sociology focused on human health. In various European countries, as Christopher Lawrence mentioned “medical measures, education and welfare legislation remained the basis of intervention, although national approaches varied greatly. [...] Before the war many of these measures affecting women had been initially directed at working males, but now women had been more often specifically targeted, although they were still affected by policies shaped to deal with other areas, for instance declining population, wage levels and poverty in general [5].

The remedy for this situation suggested by C. Stanca was to “remove the woman from the environment which destroys her beauty and her moral thinking”. He quickly added that this desire was “already an utopia” [6]. Why he was so sure that this idea was impossible to be put into practice? Because he observed that life during the interwar period was more difficult than it was before this conflagration and very stressful. It is interesting that in the early decades of the twentieth-century the concept of stress had been used in the social context to describe the relationship between a tiresome work and tension, or between an adverse event and a concern [7]. However, Stanca did not use the term “stress”. Perhaps, because the meaning of this term was not sufficiently elucidated yet.

It should be noted that at the middle of the interwar period many women wanted to work in factories, to be able to earn their living or for supplementing their family income. He suggested that physicians must give an opinion for women wanting to choose their workplace : “we, doctors, must lead a woman’s steps to work in new domains of activity [...], which do not alter her existence and do not allow her to be removed from her true mission, requested

by nature” [8].

Reading after more that eighty years this study by Stanca, it is obvious that his point of view was not a matter of an anti-feminism outlook. Indeed, he was not the supporter for too fast an emancipation for women. This opinion was adequate for the traditional Romanian mentality of that period. Some historians consider that during the First World War, in order to replace men who have participated in this conflagration, women received many jobs that traditionally were not fit for them. This was the beginning of the women’s emancipation, which became evident much later, after the development of oral contraception – in 1960 (as mentioned Claude Chastel and Armand Cénac) [9].

Stanca’s allegation was that there were occupations in which men have, by tradition, a well-established place. He advised that women should be excluded from employment in industries which require a powerful muscular force. Does he suppose that woman is fragile? Not at all! He appreciated that a woman’s activity is far more difficult and hard than that of man. He stated that: “we must remember that the woman, after she has finished her activity at the factory, at home she continues to work until late into the night, in order to make the family life neat and pleasant, for her husband and children. Also, she is the first to wake up in the morning in order to prepare all that is necessary for her household” [10].

Another article in which Stanca investigated some sociological aspects concerning the health of working women was entitled “Social security and the support for working women” (“Asigurările sociale și asistența femeii în câmpul muncii”) (1933). He considered that clinicians “must ensure, as much as possible, hygienic conditions for women, both during the period of their professional work, as well as outside this work” [11]. This conception was based on the importance of preventing illnesses. But he did not want a simple prevention. His reason was the progress of medicine. As Roy Porter pointed out “disease became conceptualized after 1900 as a social no less than a biological phenomenon, to be understood statistically, sociologically, psychologically – even politically. Medicine had to incorporate wider questions of income, lifestyle, diet, habit, employment, education and family structure – in short, the entire psycho-social economy. Only thus could medicine meet the challenges of mass society, supplanting model clinical practice and transcending the shortsightedness of a laboratory medicine preoccupied with minute investigations of lesions but indifferent as to how they got there” [12].

Regarding working pregnant women, Stanca insisted on the necessity of establishing pre-natal examinations, to oversee the development of the pregnancy from conception until birth. He indicated that gynecological consultations must trace the pathological status of the pregnancy and of the fetus, in order to evidence signs of chronic infectious

diseases, such as: tuberculosis, malaria, syphilis or hereditary disease.

He explained that a woman should take employment only after a correct medical examination. He advised that factories and industries should not employ women under the age of 18 years. In his opinion, in factories only widows should be employed, as far as possible. He considered that women should not perform night shifts. In the intent to protect the health of working women and to prevent the risk of working accidents, Stanca claimed that the duration of working time must be shorter for women than for men. A special interest C. Stanca manifested was women's health insurance. It is interesting to know that in different European countries – e.g. in France – working conditions were not more strictly controlled until the end of the 19th century (approximately two decades before the First World War) [13].

C. Stanca gave arguments for the necessity of improving working conditions for pregnant women, which constituted a priority. He pointed out that for pregnant women physicians should prescribe the following possibilities: to change their workplace, to obtain sick leave, and to obtain an aid during the period when they were ill.

He also recommended that every factory should provide for nursing mothers, every working day: 1/4 kg bread and 1/2 liter of milk. Also, he indicated that factories with more than 300 workers should invest in hiring a nurse to take care of the workers' children [14]. These measures can be considered rather limited, but they were useful for the mid interwar period in Romania. At the same time, in contrast to this conception about the woman's roles in society, in many Western countries "partly as a result of the war and partly as a result of successful campaigns for extension of [the right to] vote, women came to play a larger role in politics. Women's political grouping, of both left and center, campaigned for more maternity hospitals, better midwifery and better antenatal care" (as underlined James Pickstone) [15].

Stanca was certainly interested in offering remedies for women's diseases. In the article "The action of carbonated baths of Lipova on women's diseases" („Acțiunea băilor carbogazoase din Lipova asupra bolilor de femei”) (1934) he showed that the water cure at Lipova spa in the summer season had a positive effect on the treatment of various women's diseases, such as: amenorrhea, endometritis, anemia and asthenia. He insisted that climatic treatment was not part of the luxury therapy and was not a sport, but a necessity in treating different gynecological illnesses [16].

At the end of our paper, it's useful to mention that C. Stanca addressed related sociological problems in other articles as well, such as: "The biological role of the

woman" ("Rostul biologic al femeii") (1940), "Marriage and social diseases" ("Căsătoria și bolile sociale") (1927), "Gynecology and the fight against cancer" ("Ginecologia și lupta anticanceroasă") (1933) etc. It is possible to argue that his sociological ideas had some socialist influences. But during the interwar period, such ideas had innovative features in Romania.

All the conceptions of C. Stanca regarding medical sociology issues are based on his words: "life is limited, therefore it must be well used, not only for one's own sake, but especially for the benefit of community" [17].

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