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The role of Professor Mikhail G. Kurlov in the Fight Against Tuberculosis in Tomsk Province From the Late 19th to the Early 20th Century

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ABSTRACT

This article examines the work of the prominent physician and healthcare professional Mikhail G. Kurlov in the context of combating tuberculosis in Siberia at the turn of the 20th century. Using archival materials and periodicals, the study highlights his role in establishing a regional network of tuberculosis treatment facilities, introducing advanced methods of diagnosis and therapy, and developing a strategy for public health education in Tomsk province.

Keywords: Mikhail G. Kurlov, tuberculosis, Siberian healthcare, history of medicine

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Роль профессора Михаила Георгиевича Курлова в борьбе с туберкулезом в Томской губернии конца XIX – первой четверти XX в.

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РЕЗЮМЕ

Статья посвящена деятельности выдающегося врача и организатора здравоохранения М.Г. Курлова в контексте борьбы с туберкулезом в Сибири на рубеже XIX–XX вв. На основе архивных материалов и периодической печати показана его роль в зарождении региональной сети противотуберкулезных учреждений, внедрении передовых методов диагностики и терапии, а также в разработке стратегии санитарного просвещения в Томской губернии.

Ключевые слова: М.Г. Курлов, туберкулез, здравоохранение Сибири, история медицины

Конфликт интересов. Авторы декларируют отсутствие явных и потенциальных конфликтов интересов, связанных с публикацией настоящей статьи.

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Mikhail G. Kurlov, Tomsk, 1893

Tuberculosis (TB) known as the white plague posed a serious threat to humanity for centuries, decimating entire settlements and causing the deaths of a large number of people. The most severe situation developed in remote and underdeveloped areas, where low living standards, a lack of basic hygiene norms, and a shortage of medical institutions facilitated the rapid spread of the infection. In particular, within the Russian Empire's Siberian provinces, the disease exhibited an especially aggressive manifestation owing to harsh weather conditions, vast distances between settlements, and a scarcity of skilled professionals. In such a challenging environment, the work of individual physicians who dedicated themselves to combating TB, including renowned scientists, such as Nikolay Pirogov, Ivan Sechenov, and Sergey Botkin, was of immense importance.

Among those who made a significant contribution to addressing this problem was Mikhail G. Kurlov (1859–1932), an ordinary professor of the Department of Medical Diagnostics and the Therapeutic Faculty Clinic at the Medical Faculty of the Imperial

Tomsk University – a talented therapist and active public figure whose professional career was largely connected to Siberia. Having arrived in Tomsk at the end of the 19th century, he immediately recognized the gravity of the TB crisis in the region and focused on research, the development of preventive measures, and the search for effective methods of treating this dangerous disease.

An objective assessment of Kurlov's activities in organizing TB control measures requires a preliminary reconstruction of the epidemiological situation characterizing the spread of TB both globally and within the Tomsk Governorate. Such an analysis is a necessary precondition for understanding the scale of the problem faced by Kurlov and his associates and, consequently, for a balanced evaluation of the significance of their contribution.

A retrospective analysis of medical statistics provides compelling evidence of the dominant role of TB in the profile of infectious mortality during the period under review. For instance, statistical data for the German Empire from 1894 indicate that mortality from TB (123,904 cases) exceeded the aggregate mortality rate from five other common diseases: diphtheria, whooping cough, scarlet fever, measles, and typhus (116,905 cases). This quantitative superiority serves as direct proof of the higher pathogenicity and contagious potential of *Mycobacterium tuberculosis* compared to the pathogens of a number of other epidemiologically significant infections of the late 19th century.

This alarming global trend was directly reflected in the realities of Russia, and particularly in the Tomsk Governorate. The local epidemiological situation regarding TB in the late 19th century was also characterized by an exceptionally high mortality rate. Between 1897 and 1900, mortality from tuberculosis averaged 43% of all deaths, corresponding to approximately 343 fatalities annually. Notably, this rate was comparable to analogous data recorded in the major urban centers: Moscow (42.7%) and Vienna (42.7%). Furthermore, a comparative

analysis reveals that rates in the Tomsk Governorate substantially exceeded the level of TB mortality in Rome (34.2%) and London (17.6%) [1].

The reasons for such a catastrophic state of affairs in the Tomsk Governorate, however, were rooted not in a natural-geographical factor (“the unfavorable conditions of the Siberian climate”), but in a completely different aspect – in local sanitary conditions. Unsanitary conditions had become a widespread phenomenon, as clearly demonstrated by the urban environment. For instance, students of the Imperial Tomsk University who lived in the districts of Soldatskaya Slobodka and Verkhnyaya Yelan were in one of the city’s most unfavorable sanitary zones. Despite being relatively far from the center, these streets were characterized by extreme levels of dust and filth combined with high building density. The housing here consisted almost exclusively of wooden houses, plastered with clay or clad with painted clapboard, which did not contribute to the maintenance of hygienic standards [2].

The critical state of the medical infrastructure itself exacerbated the situation. As Mikhail Kurlov noted, even the Public Assistance Board Hospital was an “extremely ununequipped” institution: “It would be truly difficult to find other, more unsuitable premises that so completely fail to meet any hygienic conditions. It is a veritable hotbed of stench, filth, and bedbugs; it is, in short, anything vile one can imagine, but certainly not a medical institution...” [3]. Moreover, as the professor emphasized, it was precisely in these conditions that phthisic patients were housed, since other premises were occupied by patients with acute infectious diseases.

Recognition of the gravity of TB situation and the imperative need for coordinated state intervention served as a powerful impetus for unifying efforts within the medical community. Consequently, based on a submission from the Board of the All-Russian League for the Fight against Tuberculosis and Ruling No. 64 of June 27, 1911 from the Tomsk Provincial Office for Society Affairs, the Tomsk department of the All-Russian League was established. The leadership core of the new organization was formed by prominent representatives of Tomsk scientific and medical elite. The founding members of the department were professors of the Imperial Tomsk University (N. Bereznegovsky, M. Kurlov, and V. Sapozhnikov), Emperor Nicholas II Tomsk

Technological Institute (B. Weinberg), and physician Z. Nesmelova. It was at this first meeting that Mikhail Kurlov was elected chairman, and V. Pirussky, the senior physician of the Administration for the Reconstruction of Mountain Sections of the Siberian Railway, was elected vice-chairman.

Endowed with significant autonomy, the Tomsk department, under the leadership of the formed professional medical community, immediately embarked on an ambitious program that extended far beyond the initially planned activities within the city. Key areas of work included: 1) studying the prevalence of TB; 2) public health education; 3) assisting state and public institutions in anti-TB measures; 4) organizing commissions, research projects, lectures, exhibitions, and congresses; 5) publishing activities; and 6) petitioning the authorities and establishing specialized institutions (therapeutic, charitable, and hygienic) [4].

What necessitated such a comprehensive program? The answer is revealed by the statistics on TB morbidity and mortality in Tomsk. In 1911, 394 people died from tuberculosis there. Given a population of approximately 100,000, this resulted in a mortality rate of 40 per 10,000 people [5]. For comparison, in the capital cities, this rate was almost two times lower (in St. Petersburg – 33 deaths per 10,000 people; in Moscow – 22 deaths per 10,000 people).

Confronted with this catastrophic statistic, Kurlov initiated a series of specific measures aimed at improving the situation. Firstly, he attempted to use the Tomsk City Public Administration to push through the idea of expanding hospital facilities for patients with severe forms of TB. The lack of sufficient beds had created a dire situation where “TB patients spent months knocking on the doors of hospitals before securing a place. Until then, in their own corners and apartments, they freely scattered their sputum, for the disinfection of which no measures were taken anywhere” [6]. Secondly, Kurlov insisted on the necessity of disinfecting the premises where TB patients lived, something that had not been done previously (as the prevailing opinion was that TB was not a contagious disease). Thirdly, monitoring of TB patients arriving in Tomsk (at coaching inns, furnished rooms, and hotels) became an important activity, as these patients were potential sources of an epidemic.



TB Center, 24 Nechayevskaya St., Tomsk, 1920s



Suburban TB sanatorium "Gorodok", Timiryazevskoye Village, 1930s

In addition to organizational and sanitary measures, a serious problem highlighted by medical workers was the issue of diagnosis. They emphasized the gravity of untimely TB detection and its catastrophic consequences for public health. In particular, the difficulty of recognizing the disease in its early stages, when symptoms could be minor or non-specific, was underscored. As noted in a petition from the Tomsk department of the All-Russian League for the Fight against Tuberculosis: “The horror of TB and infection by it lies in the fact that this disease is difficult to recognize at its very beginning. A person has already got TB, the infectious agent has already penetrated the human body, but the person is still strong, still working, does not admit the thought that they could have a terrible disease, interacts with acquaintances, and caresses children and their wife, while the infection is active, and in the end – the family and all those around them are infected with TB” [4]. Thus, the absence of effective methods for early diagnosis and specific treatment not only led to patients seeking medical care late but also uncontrollably exacerbated the problem of the infection’s spread, negating containment efforts.

A direct consequence of this alarming situation was the practical initiatives of Kurlov aimed at creating specialized medical infrastructure. Given the prevailing circumstances, in 1913, he proposed allocating one of the newly constructed barracks with 25 beds for the “communicable disease hospital”, specifically for accommodating TB patients. However, despite the urgency of the problem and the agreement of the City Council representatives, the question of transferring the premises for TB patients was postponed due to the scarlet fever epidemic that broke out in 1913.

Faced with administrative obstacles in organizing an inpatient facility, the Tomsk department of the League adopted a strategy of seeking compromise solutions. Thus, as early as 1912, an attempt was made to open a special outpatient clinic for the reception and treatment of TB patients and providing assistance to their families. However, this initiative also encountered financial constraints. Due to a lack of funds in the city administration for establishing and maintaining a separate medical facility, a temporary compromise was found. A decision was made to organize the admission of TB patients at the city treatment facility. According to this decision,



doctors “during hours free from duties” and “by mutual agreement with the administration of the treatment facility” could provide care to such patients. As a result, the staff of this unit included a specialist doctor, two paramedics, and an attendant. This team conducted sessions 4 times a week, primarily from 5:00 PM until midnight, intended “exclusively for the citizens of Tomsk” [6].

While addressing practical medical tasks, Mikhail Kurlov and his associates launched an active educational campaign, considering public health education to be a key element in combating TB. As part of this strategy, popular science articles were published in the newspaper “Sibirskaya Zhizn” (Siberian Life), among which the work «The Latest Views on the Spread of Consumption» [7] is of particular interest. It contained Kurlov’s analysis of epidemiological processes in the urban environment, methods of infection containment, and the problem of re-infections. The most large-scale project in this area was the publication of a one-day newspaper, “Bely Tsvetok” (White Flower) [8] issued on May 18, 1914 on behalf of the Tomsk department of the All-Russian League for the Fight against Tuberculosis, edited by Professor M. Kurlov. Although the publication was limited to a single issue, its content was comprehensive, combining the functions of a public report and a tool for health education. For instance, to demonstrate concrete results of their work, the newspaper featured financial and organizational reports, including a report on the activities of the Guardianship for the Indigent Tuberculosis Patients

of Tomsk for 1913. According to this document, during that year, the guardianship held 16 meetings and organized three fundraising events: a cinema screening at the “Illusion Globus” electric theater, a public festival, and a theatrical performance. The proceeds were directed to provide material assistance to 40 impoverished patients, primarily in the form of foodstuffs (meat, milk, bread, and eggs), as well as clothing, footwear, and, in critical cases, monetary allowances for child support, burial of the deceased, or repatriation of non-resident patients to their hometowns.

The exceptional scientific quality of these publications was ensured by authors who would go on to become prominent experts in their respective fields, including V. Markuzon, later the author of one of the first monographs on childhood tuberculosis in the USSR and head of the clinic at the Central Institute for the Protection of Children and Adolescents in Moscow; P. Butyagin, a pioneer of experimental and clinical bacteriology in Siberia; N. Bereznegovsky, an outstanding surgeon who founded the East Siberian Prosthetic Institute in Tomsk; and I. Altshuller, the personal physician to Anton Chekhov who later became

head of the “Birkenwerder” TB sanatorium near Berlin.

A unique method employed to heighten the journalistic impact on readers involved placing aphoristic statements between articles, rendered in a distinctive font. For example: “The fight against tuberculosis requires a clear mind, a responsive heart, and a generous hand”, and “Tuberculosis is a social evil, and the fight against it will be productive only with the active participation of society and the masses, and with corresponding efforts from the government”. This rhetorical device allowed for the concise formulation of the movement’s key ideas, emphasizing the social nature of the disease and the necessity of collective efforts.

These declarative appeals found direct practical implementation in the organization of large-scale charity events, the most important of which was the “White Flower” campaign. The collection of donations during this event served as the central source of funding for anti-TB measures. Consequently, the League’s departments actively developed interregional cooperation to increase the reach of their collections, striving to create a unified charitable space and consolidate resources to combat the disease.



Celebration of the Camomile Day, the second day of the White Flower campaign, Tomsk, May 20, 1911. Students of Tomsk Imperial University sold camomiles in public places and collected donations for anti-TB initiatives

A vivid example of such cooperation was the collaboration between the Tomsk department of the League and the Irkutsk department regarding the organization of a collection drive involving the sale of daisies at stations of the Trans-Siberian Railway [9].

The funds accumulated through this activity and the acute awareness of the problem's severity prompted the Tomsk department of the League to transition from isolated campaigns to the implementation of a large-scale infrastructure project. To counter the spread of early forms of TB in the Tomsk Governorate during 1913–1914, plans were initiated to build a “sanatorium for the treatment of initial forms of tubercular diseases”. A land plot of 2,153.56 square fathoms (which is currently equivalent to 9,803.5 m²) was chosen for this purpose, located on the bank of the Ushaika River near Petrovskaya Street (now Yakovleva Street), where an institution for 15–17 patients was intended to be built. It is important to emphasize that the sanatorium was planned to admit patients with the early stages of TB, while severe cases were to be directed to the hospital, demonstrating an aspiration to create a differentiated care system.

However, significant difficulties arose immediately during the implementation of this project, indicating a clash between progressive medical initiatives and the city's environmental and social realities. A key deterrent was concern over the potential negative impact of the construction on the riverine ecosystems of the Tom and Ushaika Rivers. In particular, serious objections were raised regarding the possible pollution of the water bodies, given their active use by the local population for domestic needs, including drinking water supply. An additional argument used by the project's opponents was the recreational use of the Ushaika River, where children swam and laundry was rinsed: “the impoverished population near the river uses it not only for domestic needs and for drinking, but also, the Ushaika River is used for children's bathing and for rinsing laundry” [10].

Despite the identified environmental risks and subsequent public discussions, the Tomsk City Duma decided to allocate the land plot for the sanatorium's construction. However, the project's implementation was blocked by the outbreak of the First World War (1914–1918) and, subsequently, the Civil War (1918–1922). The worsening epidemiological

situation coupled with the impossibility of completing the original plan prompted Kurlov to initiate the development of an alternative solution, which was realized in October 1924 with the establishment of a comprehensive anti-TB infrastructure in Tomsk.

This infrastructure included a city dispensary with a 40-bed inpatient facility, night and day preventative clinics, a laboratory, a department for active forms of TB at the Provincial Hospital, and the “Gorodok” suburban sanatorium in the village of Timiryazevskoye. The scale of the problem is illustrated by data from the dispensary's first year of operation: 14,664 visits were recorded by patients with various forms of TB (pulmonary, bone, glandular, etc.) and non-specific respiratory diseases. The institution's preventive activities included conducting sanitary inspections of 12 city establishments and organizing 8 TB units at key enterprises (Kozhzavod, Vodosvet, Mashinstroy, etc.). These efforts were coordinated by the Council of Social Assistance attached to the dispensary, which developed plans for mass screenings and measures to improve working conditions at industrial sites [11].

As the conducted research demonstrates, professor Mikhail Kurlov played a pivotal role in organizing the fight against TB in the Tomsk Governorate from the late 19th to the first quarter of the 20th century. Under his leadership, a comprehensive healthcare system was established, uniting outpatient services, inpatient treatment, and social support for patients. He actively introduced progressive methods of diagnosis and therapy, while simultaneously developing a systemic strategy for public health education. As part of this activity, he gave popular science lectures, published articles in the newspaper “Sibirskaya Zhizn”, and edited the specialized publication “Belyi Tsvetok” (White Flower).

An important focus of the work was the organization of charitable events and interregional cooperation, including the coordination between the Tomsk and Irkutsk departments of the All-Russian League for the Fight against Tuberculosis to conduct collection drives at stations of the Trans-Siberian Railway. A significant achievement was the formation of a regional network of specialized institutions, which included the sanatorium project for treating early forms of TB initiated in 1913–1914, as well as the anti-TB dispensary infrastructure established in 1924–1925, complete with preventative clinics,

a laboratory, and the “Gorodok” sanatorium in the village of Timiryazevskoye in the Tomsk district of the Tomsk province.

The work of Kurlov contributed not only to the creation of specialized anti-TB institutions but also to the formation of a comprehensive model for controlling socially sensitive diseases. The organizational solutions he developed, based on the principles of the emerging phthisiology, laid the institutional foundation for the development of the Siberian healthcare system in the subsequent Soviet period.

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