

UNRRA (EUROPEAN REGION).

Re. No.

H 4/18/11 A.

Date of Paper	FROM W. H. 4/18/11	RECORD
Date Registered		
6.11.45.	SUBJECT	HEALTH COUNTRY MISSION REPORTS - CORRESPONDENCE POLAND.

NOTE. This file must always be passed on VIA the REGISTRY.

33528D) Wt P470/22 5m 7/44 HJR & L.Gp 51

Referred to	Date	Referred to	Date	Referred to	Date
Dr. Goodman	6/11	Dr. Goodman	27/2/46	Dr. Goodman	29/6/46
Stationery	19/11	Gen. in Shreeve	1/3/46	Gen. in Shreeve	1.7.46
Stationery	19/11	Dr. Street	1/3/46	Col. Aschmeyer	1.7.46
Dr. Goodman	31/12.	Miss McKee	4/3	Dr. Campbell	
Registry	1/1	Registry	12/3	Dr. Goodman	
		Gen. in Shreeve	13/3	Registry	6.7.46
		Miss Spitzer	13/3	Dr. Goodman	17/7
		Dr. Goodman	25/3	Gen. in Shreeve	17/7
(1) Dr. Aschmeyer	3/1/46	Dr. Street	28/3	Dr. Street	18/7
(2) Dr. Goodman	11/1/46	Miss Spitzer	5/4	for Goodman	18/7
Registry	11/1/46	Registry	5/4		
Gen. in Shreeve	11/1/46	Dr. Goodman	10/4	Registry	22/8
Dr. Street	11/1/46	Mr. LaRoche	11	Dr. Goodman	27/8
Registry	16/1	Dr. Goodman	11	Registry	28/8
Miss Thompson	16/1	Registry	8/5	Dr. Goodman	4/9
Registry	26/1	Dr. Goodman	9/5	Col. Night	5/9
Dr. Goodman	29/1	Registry	9-5	Registry	29/10
Registry	30/1	Dr. Goodman	14/5	Dr. Coligny	29/10
Dr. Goodman	30/1	Gen. in Shreeve	20/6	Registry	30/10
Col. Aschmeyer	1/2	Registry	25/6	McNoore	28/11
Dr. Street	2/2				
Dr. Martin	6/2				

NOTE. - Do not retain this File unnecessarily.

FILE NO.

FILE CONTENTS LIST

[illegible]

H4/18/1.

Health Reps. by
Please File under
Medical Supplies
Hampson

To: Mr. Campbell (Medical Supplies)

From: Mrs. Hampson

Subject: Packages from Kodaks Ltd.

Herewith three (3) packages from Kodaks addressed to Dr. E.J. Trefidlo, one of the medical lecturers of the Unitarian party who recently passed through M.R.O. en route to Warsaw. As he is doubtless in urgent need of the contents of the parcels will you be good enough to send them forward urgently as medical supplies? The numbers of the packages are -

12716 a square parcel about 3 ins. by 1 1/2 ins.

12724 a square parcel about 2 ins by 1 in.

21515 an oblong parcel about 4 ins by 1 1/2 in.

5.8.1946

INDEXED

File. Poland. *Amelia Dine Refate*
Reference

114/18/11

5. 4/7

circ 27/11
CTD

To: Mr. C. Hart Schaaf, Deputy Chief, Supply Division.

From: Major General McSheehy, Deputy Director of Health.

Reference attached cable. We have not seen it before nor have we seen any reply. The Para. at X seems curious as the cable has been sent to Warsaw.

I attach some information from Poland which makes reference to bottle-necks in storage of medical supplies which shows that the Polish Ministry are not unaware of the troubles referred to in the cable. Dr. Holle's letter to Washington is of interest and bears out the complaints.

Kindly return the three enclosures to me for relevant filing.

25th June, 1946.

John F. McSheehy

Please make relevant extracts for our brief for Gen. Cole - who now sets July 4 as deadline for same.

Hart S
27/11

To: 1. Mr. *Hart* in (action)
2. Mr. Gen M. Sheehy (you files. Thank you.)

Hart S
27/11

INDEXED

To: Mr. C. Hart Schaaf, Deputy Chief, Supply Division.

From: Major General McSheehy, Deputy Director of Health.

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25th June, 1946.

(Sgd) O. W. McSHEEHY

INDEXED

Reference H4/18/1

~~Col. Aselmeyer~~

~~Gen. McSheehy~~

~~Dr. Stuart~~

~~Dr. Coigny~~

~~Dr. Meiklejohn~~

~~Miss Udell~~

The attached Monthly Report of the Health Division of the Polish Mission is circulated for your information. Dr. Goodman would appreciate any comments you may care to make for incorporation in his acknowledgment of the Report.

J. Hampton

11.4.46

Dr. Goodman

I would only like to say how expediently the weekly returns of I.D. continue to reach me; they are the most up to date for Europe.

How much appreciated the longer reports—amplifying & complementary to the weekly returns of I.D. are & will be!

11/4

G.

Dr. Goodman

I should be grateful if enquiries could be made regarding preparations in Poland to receive repatriated DPs—especially those suffering from Tuberculosis

15-4-46

St. Bizz

44/18/1. 23 11014.

4th November, 1946.

Dr. F. Fronczak,
c/o Health Division,
UNRRA Headquarters,
1344 Connecticut Avenue,
Washington 25, D.C.

OUT FILE
DESPATCHED BY
REGISTRY

Dear Dr. Fronczak,

I enclose a typed copy of your report for which you asked. Dr. Goodman is still away on the Continent but a copy will be shown to him on his return.

Yours sincerely,

D. Hampson.
Health Division,
E.R.O.



DESPATCHED BY
REGISTRY

D 9 8/9

H 4/18/1 Des No 3533

5th September, 1946.

Dr. H. A. Holle,
Chief Medical Officer,
UNRRA Mission to Poland,
35, Hocha Street,
Warsaw.

Dear Dr. Holle,

This is to acknowledge with thanks the copy of your letter and enclosures to Dr. Sawyer of the 29th August which reached me on 4th September. I will circulate it to all concerned and we will write later on any special points that arise.

The enclosures were most interesting and show admirably energetic work, particularly that of Major Sutherland; you and he will be interested to know that Nevitt has today returned to E.R.O.

Yours sincerely,

N. H. Goodman, M.D.
Director of Health.



RECEIVED

4 SEP 1946

U. N. R. R. A.
MAIL UNIT

29th August 1946

INDEXED

Dear Dr. Sawyer:

Dr. Holle left Warsaw on 28th August for a few days leave. He expects to return about Monday, 2nd September, 1946.

General:

We have been giving preliminary thought to the method of winding up the Health Division activities on the lines of information gained from decisions of the Fifth Council Session at Geneva and the Director General's visit to Poland. We feel that we should start quite soon on our overall report of the Health Programme which can be brought up to date before we leave. It will be necessary also to suspend the major part of field activities a little in advance of departure to allow time to get all our records into final shape. Because of the considerable office work involved in this phase we are taking the view that clerical assistance should not necessarily be cut down step by step with the departure of our consultants between now and the end of the year.

The search for four suitable professional interpreters for our consultants continues. One has already been engaged in a temporary capacity and two others are in prospect. This will solve our consultants' immediate difficulties in contacting the Polish medical profession. The question at which point the Ministry of Health will take over this personnel is still unsettled. Engineer Szniolis' UNRRA Fellowship apparently cannot be deferred until December. If he is successful in obtaining his Polish passport he will probably commence his Fellowship in the near future and we shall try to find an alternative associate for Captain Straub and Mr. Maisel. The major difficulty, of course, is the extreme shortage of trained Sanitary Engineers in Poland.

Medical Supplies:

Dr. Mintek left Warsaw on 26th August, 1946, for a tour of medical warehouses, etc. in Poland. Meantime, we have received from the Ministry of Health a comprehensive picture of their present distribution scheme for medical supplies. This incorporates all the changes which have been introduced in the past few months and there is no doubt that it represents a very marked improvement on methods which resulted in the bottlenecks of the past. We would like to study the new plan now in detail along with our other responsible departments and if necessary, make further representations to the Ministry of Health.

Post Graduate Medical Training Program:

The tours of our lecturers are now coming to an end. The Dental Group is at present in Krakow but are expected back in Warsaw this week where they will remain for a few days before leaving for America. Medical Team No. 2, consisting of Dr. Anigstein, Gregersen and McCune are now in Wroclaw where they have been joined by Dr. Thienes. This team proceeds to Krakow on 1st September for a final week, but Dr. Thienes, who has already been there, will return to Warsaw prior to his departure for America. We continue to receive excellent reports on the reception of these teams from the various centres.

Venereal Diseases:

Col. J. H. Lade's report of activities for the two weeks ending 24th August are as follows:

Due to the annual leaves of Dr. Borkowski, V.D. Officer of the Ministry of Health, and of Dr. Grzybowski, the leading local dermatologist, there was no further progress in arrangements for V.D. control work in Poland. The week was devoted to the preparation of lectures, the interviewing of medical interpreters, and the examination of Mission personnel in consultation with Dr. Bonamis and Lukaszewicz.

A manual of serologic techniques has been supplied to Dr. Walecki of the Institute of Hygiene in preparation for the performance of end-point titrations of the complement-fixation test for syphilis.

A field trip to Krakow is reported in Appendix A.

The first two days of the week ending August 24, were occupied with the Krakow trip. Plans were made with Dr. Borkowski, V.D. control officer of the Ministry of Health, for a survey of the prevalence of venereal disease in three villages of the province of Posnan. It will be possible to secure specimens of blood from 100% of the population, and to examine a sample group for evidence of recent infections. Funds are to be provided by the Ministry.

Agreement to participate in a study of penicillin therapy in early syphilis was secured from Dr. Grzybowski. As a member of the Polish Dermatological Society he has agreed to call a meeting of the seven most prominent dermatologists to discuss similar studies which are to be made in each place where there is a medical college and an active venereal disease department.

A small supply of British Anti-Lewisite (dithiopropional), a detoxifying agent utilized in the treatment of arsenical poisoning, was

brought to Poland by the V.D. consultant. This agent, developed during the war, and until recently a military secret, is being distributed sparingly to the key men in the venereal disease field, to familiarize them with its use, in anticipation of the receipt of the larger quantities which have been requested of the Washington office. An adequate supply of BAL will be a pressing necessity in Poland, where neocarsphenamine still remains the drug of choice in the treatment of syphilis.

Nursing Activities:

The Hospital Nursing Consultant is continuously and fully occupied in steering her nurse teacher program candidates past the very considerable passport and visa difficulties which have already resulted in so much delay. She reports that the following candidates left Warsaw via plane for Paris on 22nd August:

Janina Krajewska
Zofia Krynska
Leokadia Wybranowska
Janina Zelawska

The following left via plane for London on 24th August:

Hanna Chrzanowska
Justyna Poltowicz
Sister Henryka Kokoszko
Sister Julianna Pozdol
Czeslawa Lyszczerz
Olga Trybianska

The remaining ten will be leaving this week if possible.

The Division of Nursing and Midwifery has requested that we send a formal approval of the Fellowship granted to Mrs. Agopsowicz. Although this candidate was approved in the same manner as the others, a letter is being sent to re-affirm the approval of this Fellowship.

Sanitary Engineering:

The sanitation section engaged in the following activities during the period of 19th August - 24th August, 1946.

Water: Capt. Straub departed on 20th August on a field trip to inspect water and sewage plants. With him were Inzrs. Just and Liebfeld, Polish water and sewage experts.

Use of filter aid compound for diatomaceous earth filters was explained to Mr. Starszewski of NNK - Epidemiological Control Dept.

Insect and Rodent Control: Warehouse at Wolska 84 has been authorized by the Ministry of Navigation and Foreign Trade for use in demonstration of 1080 and ANTU.

Food and Milk: Report prepared on the milk situation in Poland.

Director Cesul of the Milk Technicians School at Rzeszow arrived on 19th August. He desired information relative to modernizing the equipment at his school as he has funds for this purpose. Information was given him regarding pasteurization equipment and information regarding laboratory equipment has been requested from the States.

Warsaw abattoir was visited with Dr. Wilder, UNRRA Veterinarian, and Dr. Rowinska, Ministry of Health. All the meat sold on the local market must be processed there, or be inspected if slaughter occurred at another abattoir. Inspections are performed by veterinarians and adequate laboratory examinations are made when they are deemed necessary. General sanitation was poor and Dr. Rowinska stated that she would report this fact to the Ministry of Health.

Nutrition:

During this week Miss Ritchie visited the Districts of Krakow, Zakopane, Katowice, Kielce and Kozienice in order to obtain some knowledge of the present nutritional condition of the people and the standard of diet provided in hospitals and other institutions. Enquiries were made at: three orphanages, one repatriate home for children, one children's hospital for T.B. cases and one preventorium, one T.B. sanatorium for teachers, three large general hospitals, two old people's homes and one miners' canteen. A detailed account of these diets will be submitted but the position may be summarised as follows.

1. The diets in hospitals have improved greatly over the last few months. The caloric level at the beginning of the year is reported to be about 1,000 calories per patient per day. This has risen in some hospitals to about 2,000 calories and higher in others, reaching about 2,500 calories per day. There is still considerable room for improvement, but the food is reasonably good and plentiful and is improving every week.
2. Children's orphanages - These vary with the wealth or poverty of the institution but only one of the four visited showed children who looked distinctly pale and rather underfed. Most of them seemed to be reaching a level of about 2,300 calories average for all age groups.

3. The T.B. sanatorium for children at Zakopane had a calorie level of approximately 2,500+ daily. This is rather low for tuberculosis cases, but many of the children were young. The staff complained about the quality of the local milk which they reported contained only about 1% butter fat. They replied, to the suggestion that they pay for milk on its fat content, that the demand by the boarding houses and hotels was so great and the prices so much better than that paid by hospitals that they would see no fresh milk at all if they paid in that way.

4. The teachers' sanatorium had a diet of about 3,000 calories and it was improving all the time.

5. The old people's homes were fed in rather a dull way because money was very scarce. However, the total quantity seemed to be reasonably adequate for adults expending very little energy and the superintendents considered the position fairly satisfactory now.

In general, it appears that up to March the diet was dangerously bad but that since that date there has been a gradual improvement which is still progressing and that on the whole, institutions in this country are reasonably provided with food from the total quantity point of view although the planning of menus and selection of purchases could be greatly improved by an educational program of some kind. There is a great and misguided belief in the essentialness of sugar for health.

Miss Ritchie also visited the Quaker Relief Team at Kozienice where she found that a very useful supplement of food providing about 250 calories daily and a considerable contribution of protein and mineral salts was being supplied to 6,000 children under 7 years in this battered front line area.

She visited the local doctor in the village of Gzowaczow near Kozienice and found that the nutritional condition of the people in the district has improved considerably except where it was complicated by malaria. Up until harvest however, many families were living on potatoes and a little milk and a few vegetables. Now, however, some bread is available.

The children are underweight but the amount of rickets is not great. No real starvation is reported by this doctor. He estimates the T.B. cases at about 7% but it is likely that he misses many who would be found by x-ray of the population. Dr. Ogonowski does not read English and he is having a very difficult time understanding the directions on UNRRA drugs. Miss Ritchie explained some of these to him and is arranging for translations and instructions in Polish to be sent to him concerning several more.

Dental Health:

Dr. Sutherland returned to Warsaw on 22nd August after completing a survey tour in conjunction with the Dental Teaching Mission of the Unitarian Services Committee. During the tour specific attention was paid to the state of dental education in the universities and to the methods and effectiveness of the scheme for distributing UNRRA dental supplies. A comprehensive report of these matters is attached.

Medical Services to Mission:

Mr. Ben T. McDonald died in St. Joseph's Hospital at 7:50 a.m. on 21st August, 1946. His wife had been expected from Stockholm the previous evening but flying proved impossible and she could not reach Warsaw until the afternoon of his death.

Last minute difficulties in providing a suitable attendant to accompany William MacLanachan to London forced us most reluctantly to designate Dr. Begg for this duty. In view of anticipated difficulties and delay in getting Dr. Begg back to his Mission duties, we are particularly indebted to the R.A.F. for undertaking the provision of a trained attendant from Berlin onwards. A report of this journey is attached (Appendix B)

During the past 14 days Dr. F.E. Fronczak has had discussions with the Ministry of Health and the National Chamber of Medicine on methods for improving the reporting of Communicable Diseases. There is a proposal to increase the number of Public Health and Hygiene Departments in the universities, but in view of financial restrictions and the difficulty in obtaining teaching personnel, it is felt that not more than two additional departments should be considered at the present time. The executive committee of the National Chamber of Medicine will meet soon preparatory to a general meeting of the medical profession which has not been held for some time. In addition to consultations and discussions with the Ministry and the National Chamber of Medicine on these and other subjects, Dr. Fronczak has recently visited more than a score of hospitals, institutions, sanatoria and drug stores in and out of Warsaw. He notes in these places, a decided improvement in the amount of UNRRA medical supplies on hand.

Sincerely yours,

Norman D. Begg
Norman D. Begg
Acting Chief Medical Officer

Att.

Dr. W.A. Sawyer
Health Division, UNRRA
Washington, DC

✓ CC to Dr. N. Goodman, ERO

APPENDIX A.

On 16th August, the V.D. consultant visited the clinic of Dr. Walter, Professor of Dermatology at the University of Krakow. Though he was in Zakopane on his annual leave, two of his assistants, Drs. Lebioda and Obtulowicz, were available to discuss plans for future co-operation. It was ascertained that adequate facilities for the follow-up of patients under observation exist to make a series of cases treated for early syphilis profitable. The recurrent complaint of insufficient supplies for anti syphilitic therapy was made by these men also. Many advanced cases of late syphilis with gummata and of congenital syphilis with the classical stigmata were seen.

Dr. Walter was visited in Zakopane. He expressed interest in our plan to secure penicillin, oxophenarsine, and bismuth for treatment of a series of patients with early syphilis in each of the clinics of the medical colleges of Poland. We agreed that it would be necessary to so correlate these series (seven in all) that the results, as eventually reported to the medical profession by Dr. Walter and the other professors of dermatology, would supplement each other and lead to definite conclusions concerning the efficacy of rapid methods of treatment in communicable syphilis. He expressed an eagerness to participate in such demonstrations. His opinion is considered to be of such weight that general acceptance of the project by Polish venereal disease specialists can be assumed.

After Prof. Walter's approval had been secured, Prof. Przesmycki, the Director of the National Institute of Hygiene, was visited, also in Zakopane. He agreed to make arrangements for end-point titrations of the complement fixation reaction for syphilis in the laboratories of the Institute situated in the cities where the series of patients are to be treated. For this purpose a standardized antigen would be essential, in order that serologic tests might be comparable. It was ascertained that a small supply of dehydrated beef heart (Difco) has been shipped to Poland by UNRRA. Efforts are being made to find this material.

A schedule of lectures on venereal disease control in nine cities has been prepared and is being cleared with the Ministry. Two lectures are to be given in each university city, and one in the other places. One is a survey of advances in the field of V.D. control, and the other an analysis of the evidence of the efficacy of penicillin in early syphilis. Dr. Anselm, the regional representative of the Ministry of Health in Krakow arranged a date for the first of these lectures while the V.D. consultant was in that city.

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- 4 SEP 1946

U. N. R. R. A.

MAIL UNIT

Appendix B.

WARSAW, 24th August, 1946

To Dr. H. A. Hohlle, Chief Medical Officer

From: Dr. Norman D. Begg.

Subject: Report on transport of patient William MacLanachan for hospitalisation in London.

We left Warsaw at 13.00 hours on Wednesday 21st August and reached Gatow. Berlin 2 hours later. The patient who is a seasoned airman had an entirely undisturbed flight. On arrival he was hospitalised forthwith in the Sick Quarters, Gatow. That evening the Senior Medical Officer in charge offered full R.A.F. facilities for the second state of the journey including the services of a trained air-ambulance attendant. In view of this my continued absence from the Mission appeared without further justification.

Mr. MacLanachan left Gatow with his attendant at 11.00 hours on Thursday, 22nd August and that evening an R.A.F. signal was received stating that he had been admitted to St. Mary Abbots Hospital, London. He carries with him a history of his illness in Poland including recommendations for surgical treatment as made by Mr. Howard Naffziger.

My return flight to Warsaw was arranged through the R.A.F. on the morning of Friday, 23rd August 1946

Norman D. Begg,
UNRRA Mission to Poland.

RECEIVED

- 4 SEP 1946

U. N. R. R. A.
MAIL UNIT

NDB/lm

28 August, 1946

TO: Chief Medical Officer

FROM: Dr. A.B. Sutherland, Dental Consultant.

SUBJECT: Report Activities and Dental Field Survey - Lodz, Poznan
and Krakow - 4 - 23 August, 1946

In following the itinerary of the visiting Dental Mission of the Unitarian Service Committee it was endeavoured to make a survey of Dental conditions in the above mentioned areas and at the same time to facilitate arrangements for the presentations of the visiting specialists in the cities.

Particular attention was given to the state of dental education in the Universities and to the methods and effectiveness of the distribution of UNRRA dental supplies.

2. Lectures - Demonstrations.

The presentations of the visiting American specialists were well received, the average attendance at evening lectures was 50, while the daily demonstrations Monday through Friday, were attended by the desirable number of from 8 to 10.

It is felt that any future presentations of a similar nature would be of more advantage if arranged to take place at such a time as the schools are in session. It will be noted that these lectures occurred during summer vacation, when many of the teaching staff and most of the students could not be present. The lectures and clinics embraced the subjects of Dental Prosthetics and *periodontia* with one lecture entitled Fluorides in Dentistry.

3. UNRRA Dental Supplies.

The overall amount of dental materials received and distributed by the Ministry is not known, this information has been requested and the Ministry advise it will be made available to this office in a few days.

With a view to learning something of the distribution at the provincial level, such warehouses were visited in Lodz, Poznan and Krakow areas. It was found that distribution down to the lowest county level comes under personal supervision of the head of the Dental Department. It can be readily seen that such close supervision greatly retards distribution and it is proposed to so advise the Ministry.

Nomenclature and the specific uses of items present a difficulty to the officers in charge of the warehouses; in places visited advice was given in an effort to overcome this state. In Lodz and Krakow considerable quantities of materials have remained in the warehouses for several months.

One was able in both the above places to have some badly needed materials removed to the Dental Faculty of Lodz University and to the University clinic in Krakow, with payment and authority for removal to follow.

The present price of UNRRA supplies to public institutions, clinics etc., is 25% of twelve times the pre-war price, seven percent of which goes to the running and staffing of the warehouse, with the balance to the Ministry. Institutions lacking funds can arrange credits. Delivery of some items is delayed due to the Ministry's failure to forward covering price lists. Since credits can be arranged it will be suggested that items so effected be distributed on this basis.

Also it is proposed to recommend to the Ministry that greater authority be granted the officers in charge of the warehouses in the matter of dispensing materials as local conditions demand.

UNRRA supplies are not available to private institutions or individuals, whose source is the open market, and this on examination through several stores and depots was found to offer but remnants of equipment left by or taken from fleeing Germans. The Ministry will be asked to make ^{available} for private purchase a certain amount of dental stores.

It has been the practice of Dental Schools already noted to make direct demands for equipment etc., on the Ministry; those concerned have agreed that in making future bids for assistance, copies of same will be forwarded this office.

Upon instruction from the Ministry all dental gold received is now deposited in the National Banks. Whether this is merely a means of safeguarding the metal or if it precludes the gold to dental use, It is desired to find out and recommend accordingly.

Following a visit arranged for this week to the central warehouse near Warsaw, the matter of disbursement of dental goods will be discussed with the Ministry concerned and a report rendered.

In visiting the Chief of the Dental Department prior to the past field trip, the writer asked if any provision were being made for import or manufacture of dental materials as against the cessation of UNRRA supplies. None has been made.

Apropos of the above one had occasion to examine a box of UNRRA supplies being opened in the Dental School Poznan. The crate contained articles easily recognized as U.S. Army Surplus Property, but among these were two boxes of acrylic resin which according to markings was of Russian manufacture. Enquiries will be made to learn if this might not represent a firm source of supply of this material so badly needed in Poland. Should such be the case, it would be recommended that this item be deleted from the estimates of requirements already made to Washington. Information to hand from Washington gives rise to the fear that shipments of dental materials to Poland will fall far short of estimated needs due to increased prices.

3. Education.

Prior to the war Poland had the low per capita ratio of Dentists of one in 6,000 for a population of 3,500,000. This ratio due to casualties, expatriation and interrupted schooling has fallen still further to one in 12,000 for a population of 24,000,000.

One finds that efforts are being made to adjust this circumstance, but in such two extremes of procedure are noted:

(a) Dental mechanics of a certain number of years experience are being allowed to sit for examinations, the passing of which will allow them to practice Dentistry.

(b) The other extreme is reached in the University Dental Clinic and the Dental Clinic allied with St. Lazarus Hospital, both in Krakow, where courses of approximately two years are available to graduate Doctors of Medicine and which lead to a degree of Doctor of Dental Surgery.

In the first instance the requirements are obviously too low and the allowing of Dental mechanics to practice Dentistry is a retrograde step, while on the other hand the conditions of entrance are too exacting. There is however a middle course being pursued. In Warsaw the Academy of Dentistry though not connected with a University has access to University teachers for pre clinical medical subjects, and is believed to offer a fairly comprehensive course in Dentistry with an even balance of clinical and pre clinical teaching.

It might be noted in passing that all the schools visited have promised to forward syllabae which will be compared with those of accredited North American Dental Schools. From this comparison it is hoped to be able to render useful advice, and it is planned to have some syllabae, time tables etc., translated and distributed.

Additional Dental Schools in Lodz and Poznan were visited; these have been in existence only since the war. It is understood that a fourth dental school is to be opened in Gdynia. The length of the course is $4\frac{1}{2}$ years. During the first three years studies are in common with those of medical students, Warsaw Academy excepted.

Broadly speaking, the policy of operating four dental schools in Poland where before the war one sufficed, is considered too ambitious, the schools are sadly lacking in equipment, and qualified teachers are not available. Far better to concentrate on one or at the most two schools.

From figures of enrollments secured, it is found that this coming year there will be expected to graduate from the four schools 146, and in the three ensuing years 240, 485 and 1030 respectively.

The enrollment is predominately female by 75%. One feels that this in no small way due to the fact that there is something in the nature of professional class distinction between dentists holding M.D. degrees and those with only D.D.S. qualifications even though as is generally stated a dentist earns in Poland a greater income than an M.D. However it would be of benefit to Dentistry if more males could be attracted to the profession. Female dentists represent much lost and broken time and frequently spend but short years in practice.

Without yet being in possession of detailed time tables of hours of study per subject, the idea has been gained that, especially in the schools where 3 years is spent in common study with medical students, too much accent is placed on theory and an insufficient number of hours devoted to the technical phase of Dentistry. Observations of some completed operations and restorations has served to strengthen this view.

Thus if a more evenly balanced and standardized curriculum were adopted, with the studies of medicine and dentistry not quite so closely related, a benefit should accrue which would result in better trained and more suitable in male graduates.

The curriculum adopted in the Academy Warsaw, the pre-war school seems to fit most closely the above mentioned "middle course". At time of writing the Chief of the Dental Department is on leave, however contact will be made at the earliest and the results of discussion of the above mentioned problems will be reported.

4. Public Health.

It is desired to gather more information on this subject.

Regarding supplies for this program, the Ministry is anxious to secure the fifteen mobile clinics which appeared in the last estimate of Dental requirements to Washington. It is known that four mobile clinics, each accomodating three dentists are in operation, one in Poznan district and three in the Krakow area. These vehicles have been equipped partly with UNRRA materials and partly by local purchase. The mobile clinics should have a high priority in shipment of dental supplies to Poland.

TEN The officers in charge of the Dental Health program in the Poznan district advised that he was under instruction from the Ministry to open the clinics in the district, supplies for same to be commandeered from private dentists.

In the city of Lodz an attempt is being made to equip a ten chair clinic for children by local purchase. This effort is almost completely nullified by the lack of available materials.

It has not been possible as yet to gain any definite knowledge on the clinical side of Dental Health, but opportunity will be taken to make some cross-section age group examinations.

5. Treatment Imported Personnel.

As of this date the clinic in 35 Hoza St. is ready for use, and commencing tomorrow, 29 August, treatment will be rendered. Arrangements have been made to secure some amenity dental equipment on loan from the Ministry. Several of the staff are in urgent need of treatment and until these have been disposed of it is intended to spend as much time as possible in the surgery.

6. Presentations.

Tentative arrangements have been made for a return visit to the schools already contacted; this for the purpose of giving lectures and demonstrations. By preference technical demonstrations will be presented as technique seems to represent the weakest part in Polish Dentistry.

W. Stuchlik



OUT FILE

REGISTRY
DESPATCHED BY

H4/18/1 Dec¹⁰-2892



2nd August, 1946.

Colonel H. A. Hille,
Principal Medical Officer,
U.N.R.R.A. Mission to Poland,
35, Ilica Street,
Warsaw,
Poland.

Dear Dr. Hille,

I am acknowledging with many thanks your weekly letter of July 8th, received on July 16th, and that of July 15th, received on July 19th. Now that we are receiving them promptly and regularly, I would like to say again how extremely valuable they are in keeping us informed. Thus, I am going to the Fifth Session of the Council at Geneva tomorrow, and I have made notes of these two letters which will enable me to give the very latest information on the health work in Poland if required.

With regard to some points in your letter of July 8th -

- Not
Copy
10/13
- 1) Thank you for the explanation about Miss Bellows. We know in the Health Division that you had recruited a bio-statistician in the States as we were unable to get one within E.R.O. Presumably our Personnel did not enquire of the Health Division and I will see that they get the information.
 - 2) I am glad that the distribution of supplies has been improved and that the bottleneck no longer exists, at least temporarily.
 - 3) I am also glad that Dr. Arigstein's lecturers are being successful: please give him my kindest regards. By now you will have received the Unitarian lecturers and I hope that all is going well. We had great trouble here in trying to get the dental lecturer translated into Polish, so insistent had Nevitt been that they could not be translated in Poland that the dentists in the party actually wanted to stay behind in London until they could obtain translations. However, by one means or another we straightened the thing out. That brings me to your suggestion that the Unitarian lecturers from Prague should come on to Poland - or some of them. I do not see the slightest objection to selected individuals being called forward by you to Poland if they are agreeable and your Mission would pay the transport from Prague to Warsaw and subsistence in Poland. The procedure would be for you to cable Prague making the request and you can certainly say that E.R.O. agrees.
 - 4) We welcomed Dr. Zakrzewski here and have fixed him up with a good programme. If there are any difficulties about the La Guardia nurses with regard to visas, etc., do not hesitate to cable to La Guardia himself in Geneva, where he will be from the 5th until about the 21st at least, as he has been most ruthless and helpful in removing obstacles to his nurse training scheme which have arisen in other Missions.
 - 5) I agree that fly control is important but I feel that D.D.T. should only be used if there are enough stocks of D.D.T. for all possible contingencies in lice control, and only in special cases which cannot be dealt with by ordinary sanitation methods. We do not want the Poles to feel that D.D.T. is the answer to the fly problem or they will fall into the same error as they did in typhoid, i.e. believing that vaccination is the sole answer to the problem. I remember in Athens seeing a hospital being sprayed by D.D.T.

/for files



for flies with uncovered rotted, organic refuse still just outside the windows. Nevertheless in a place like Warsaw where fly control may be quite impossible on orthodox lines, D.D.T. spraying may be most valuable, particularly in infants and childrens' hospitals, dairies, etc.

- 6) You presumably saw your Chief of Mission's reply of July 19th to Dr. Topping's letter of June 19th on rat control. I am exploring the position but in view of the second para. under "Sanitary Engineering" of your letter of July 15th, I feel that only a really top man would be of value to you, seeing that you already have excellent technical advice available to give the Polish Ministry of Health. I presume that the Chief of Mission's letter gives financial authority to send such a man if we can get him, but of course we would cable full particulars for your acceptance before sending him.

Yours sincerely,

H. M. Goodman, M.D.
Director of Health.

P.S. I have just seen Miss Doherty who leaves tomorrow by sea for Australia.

P.P.S. What about the two Russian lecturers?

H 4/18/1

UNITED NATIONS

RELIEF AND REHABILITATION ADMINISTRATION

MISSION TO POLAND

WARSAW

July 15th, 1946

19 JUL 1946

R. A.

MAIL UNIT

INDEXED

Dear Dr. Sawyer:

While I have received acknowledgment from Dr. Goodman of one of these weekly letters, I have yet to hear from Washington. I hope that you are receiving these communications with a reasonable degree of promptness.

General

No personnel arrived during the past week, but information has reached us that Dr. Lade, our Venereal Disease Control Consultant, has been waiting in London for some time for transportation to Warsaw. We hope that Dr. Lade, our Maternal and Child Welfare Consultant, our Biostatistician, Dietitian, and Dental Consultant will soon be with us to complete our staff for the remainder of the time still available in Poland.

Medical Supplies

Mr. Baradel, the Medical Supplies Officer in the Supply Division, has just returned to Warsaw from Washington and London. He informs me that he brought with him a machine tabulation of the total medical supply program for Poland. He also brought some kind of tabulation on actual shipments, but I have not had an opportunity to examine this material. Mr. Baradel states that the UNRRA budget for medical supplies must be considered exhausted inasmuch as requests for twice as many supplies are under consideration as can be purchased with the remaining funds available. The Ministry of Health is being accordingly notified that future requests should be limited to absolute emergency items, the need for which is prompted by epidemics.

Post-Graduate Medical Training Program

Dr. Anigstein delivered his first lecture on July 9th at 6:30 p.m. Approximately 150 physicians were present and the lecture was delivered in Polish on the subject of rickettsial diseases. I was very pleasantly surprised at the splendid turnout and I believe that all of the post-graduate lectures will be enthusiastically received by the Polish medical profession. Dr. Anigstein delivered his second lecture on the evening of July 12th and his schedule is to appear twice weekly in Warsaw for a suitable period, after which he will spend approximately one week in each of several medical centres throughout Poland.



Having received no word from Washington concerning the progress of the two groups of medical lecturers who were destined to leave Washington on June 15th and July 1st respectively, an enquiry cable has been dispatched to Washington.

In order to ensure that the lectures and discussions of these men will be adequately interpreted, we are making a local search for competent interpreters from the Polish medical profession who will be utilized if considered necessary. I consider this to be a matter of very great importance because my experience after approximately a year in Poland leads me to believe that the language difficulty is the principal one in the dissemination of medical knowledge and the use of medical supplies.

During Miss Szloch's visit to Czechoslovakia, she came in contact with the Unitarian Medical Teaching Mission to that country including such men as Paul White and Joseph Aub. In view of the fact that the post-graduate medical training program for Poland does not include lectures by a cardiologist or an internist, I would strongly urge that some or all of the members of the Mission now in Czechoslovakia be requested to spend at least a short time in Poland.

When Dr. Joy of the Unitarian Service Committee was in Warsaw, I specifically made enquiry regarding Dr. Paul White. There would be great disappointment among the medical profession in Poland if these men should return to the United States after having been only a few hours from Poland. The relative needs in medical enlightenment of the two countries makes one wonder how it came to pass that these men did not come to Poland in the first place.

The Information Service of the U.S. Embassy has notified us that three films are being shown to the medical profession in various cities in Poland beginning very shortly. The films are "Normal Labor" lasting one hour; "Post Partum Haemorrhage" lasting about 20 minutes; "Clinical Compresses and Rest Treatment after Operations" lasting 20 minutes. Dr. Fronczak will cooperate in spreading the word around that these additional opportunities for post graduate medical education are available in Poland.

Communicable Diseases

T.B. Control I had another conference on July 12th with Mr. Szudy of the National Catholic Welfare Committee (U.S.) in regard to the problem of Tuberculosis control and the need for supplementing the facilities and supplies of sanatoria in Poland. His group, which operates in Poland through Caritas, the corresponding Polish organization, is quite receptive to the idea of assisting certain institutions by providing them with much needed supplementary food and perhaps other facilities which would make it possible for

such institutions to keep their beds filled with T.B. patients of the type most responsive to treatment or most in need of segregation.

The Swedish Relief Agencies in Poland have also expressed interest in such projects and we believe that such assistance on a long term basis will do much good in the field of tuberculosis control, especially in view of the limited time during which UNRRA will function here.

Sanitary Engineering

A copy of the report of the inspection of the Agril Pasteurization Plant in Warsaw on July 3rd by our Sanitary Engineers was submitted to the Agricultural Rehabilitation Division. The inspection revealed that a shortage of equipment is one of the chief problems.

The report on rat control, as recently prepared by Mr. Straub and Mr. Maisel, was submitted to the Chief of Mission for information of the Polish Government. It is felt that the problem of rat control in Poland is an economic one and for the present it is not constituting a gross health hazard.

Medical Services to Mission

With the increase in the size of our Mission, an increasing number of patients are being seen in our dispensary. The table attached shows a general breakdown of treatment furnished during April, May and June.

The general health of the Mission personnel is fairly good. There are relatively few cases of gastro intestinal upsets in spite of the consumption of fresh fruits and vegetables. In this connection the Health Division has prepared material for periodic inclusion in the weekly Mission newsletter regarding precautions to be taken in washing fruits and vegetables.

There are many complaints of insect bites and DDT is freely distributed to counteract these nocturnal visitors.

Dr. Bonamis keeps good clinical records of his patients. However, the necessary forms 100A and 101 in connection with accidents has not been available in the Mission. Regular dispensary hours are observed from 8:30 to 10:30 a.m., and from 2:00 to 3:00 p.m. Calls are made during other hours..

In regard to the treatment of local or Class 2 personnel, these persons are eligible for medical treatment under the Polish National Insurance Plan. However, we are furnishing dispensary service to this group as well as to imported personnel. We have served notice, however, that the Mission is prohibited from furnishing hospital care to this class of personnel except in unusual cases such as accidentally injured in line of duty.

The Mission controls no hospital beds in Poland and consequently physicians on duty with the Mission do not control the treatment of our personnel in hospital. This point was clearly defined when the St. Joseph's Hospital agreed to accept Mission personnel as hospital patients. As a matter of courtesy, however, our Medical Officers are permitted to call on Mission personnel in the hospital and to make suggestions regarding the treatment being rendered.

In general, we feel that St. Joseph's Hospital is staffed with a group of specialists who are well above the average for Poland. Moreover, the hospital is excellently equipped. Both yourself and Dr. Goodman have seen this hospital. It is felt that our personnel are receiving the best care that could be arranged for them locally, although sometimes we hear gossip complaints of gross neglect which usually emanate from well meaning friends in the same way as they do in the wards of the finest hospitals in the United States or in England. The fact is that this is Poland, and at the present time and under present circumstances one should not judge local facilities in the light of Western standards.

Unfortunately, St. Joseph's Hospital is being renovated and will remain closed until August. In the meantime, we have made arrangements to use the Hospital of the Infant Jesus temporarily.

In regard to payment, the Mission pays for hospitalization and special examinations and treatment. We also pay for drugs which are furnished on prescription. We have had a number of motor accidents, one of which, on June 25th, proved quite serious. Mr. McDonald suffered serious injuries, including dislocation of his right hip and a traumatic injury to his kidney. His condition was quite serious and a number of cables have been sent briefly describing. In view of these cables, I was somewhat surprised that Washington should find it necessary to cable London requesting them to obtain from Warsaw details in regard to McDonald's condition. Another cable was dispatched today, summarizing McDonald's present condition.

Sincerely,



H. A. Holle
Chief Medical Officer
UNRRA Mission to Poland

Dr. W. A. Sawyer
Health Division
UNRRA HQ. WASHINGTON

MEDICAL CARE TO UNRRA MISSION PERSONNEL, WARSAW

	<u>April</u>	<u>May</u>	<u>June</u>
Total Visits	269	283	336
Imported Personnel	74	121	153
Polish Employees	195	162	183
<hr/>			
Respiratory Infections	45	19	13
Digestive "	20	18	18
Skin Diseases	19	42	28
Venereal Diseases	6	7	2
Urological Diseases	1	3	3
Neurological "	9	7	4
Eye Infections	12	4	5
E.N.T. Diseases	17	22	23
Gynecological Diseases	4	2	1
Surgical Treatment	25	50	80
Dental "	12	18	8
Other "	30	47	53
Injections - Intravenous	19	16	4
Subcutaneous	36	26	47
Hospitalization	2	2	3
X-rays	10		2
Penicillin treatment			1,700,000 units
Typhus inoculations			21
Typhoid "			22

UNITED NATIONS
RELIEF AND REHABILITATION ADMINISTRATION
MISSION TO POLAND
WARSAW

H4/18/1

Dep. No 1751

PM/L/998

11th July 1946

INDEXED

To: European Regional Office (Health Division)
From: UNRRA Mission to Poland
Subject: Report of Activities of Health Division
for Month of June 1946

There is transmitted herewith for your information copy
of Report of Activities of Health Division, UNRRA Mission
to Poland for the month of June, 1946.

H. A. Holle

H.A. Holle
Chief Medical Officer
UNRRA Mission to Poland

Att.

Copy to UNRRA HQ, Washington

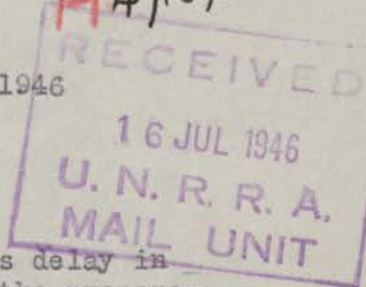


Copy

INDEXED

UNITED NATIONS
RELIEF AND REHABILITATION ADMINISTRATION
MISSION TO POLAND
WARSAW

8th July 1946



Dear Dr. Goodman:

I regret that there has been a few days delay in this week's letter on account of the time consumed in the preparation of our monthly report for June.

General

2 On July 2nd, Dr. Begg was interviewed by Mr. Arthur Gaeth of Mutual Broadcasting System who was referred by Public Relations. A general review of the health situation was discussed, with particular reference to communicable diseases.

3 We have been informed by the Personnel Division that ERO did not seem to know who the Biostatistician, Miss Marjorie T. Bellows, is. I might summarize by saying that on March 16th I received from the Ministry of Health a request for the services of a Biostatistician. On March 21st I transmitted this request to you by memorandum and the matter was discussed with General McSheehy who informed me that no suitable biostatistician was available in ERO. Upon reaching Washington I was told that Miss Bellows might be available for three months from New York City. On May 16th Warsaw received a copy of cable number 5684 from Washington to London asking if Washington should recruit. Upon my arrival in Warsaw I took the necessary steps to obtain a budget line (69A) for a Biostatistician, Grade 11. On June 17th, cable 1133 was sent to ERO asking that Miss Ritchie, Dietitian, and Miss Bellows, Biostatistician, be sent forward. If you can expedite the departure of Miss Bellows to Poland, I would be grateful.

Medical Supplies

Dr. Mintek and I went to the Ports on July 1st to observe the situation in regard to medical supplies. We noted improvement. There is a general warehouse to which ships cargo identified as medical supplies are taken. From here the supplies are shipped to regional warehouses located in Warsaw and Lodz. No supplies so far have been shipped to the regional warehouse in Bytom and there is no separate regional warehouse in Gdynia. We are taking steps to assist the Ministry of Health in getting this additional warehouse.

We are not satisfied with the amount of information which is available to the main warehouse in Gdynia prior to the arrival of a vessel. I am very skeptical regarding future prospects of improvement along these lines and I feel that our knowledge of medical

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supplies for Poland on specific vessels will begin after such supplies are received in the Gdynia warehouse. We have requested a detailed inventory of medical supplies, ship by ship, beginning July 10th, and I shall be pleasantly surprised if we get it. If we do get such inventories we will be able to follow distribution better than we have ever been able to do. Our consultants are constantly looking for certain items which are deemed necessary in the several programs.

Due to a lull in the arrival of medical supplies of late the receiving warehouse in Gdynia is almost empty. The regional warehouse in Warsaw at the end of last week contained approximately 1000 tons which reveals continued progress in distribution.

Post Graduate Medical Training Program

Dr. Anigstein has been notified that his first lecture has been scheduled for Tuesday, July 9th at 6:30 p.m. We are awaiting the turnout with great interest. It has been necessary for Dr. Fronczak to apply pressure to expedite the assignment of specific dates to Anigstein's lectures. There is a tendency on the part of Polish physicians to observe July and August as the months to take a much needed holiday. As many of them as can get away, including most of the University professors, are heading for the beach. One is inclined to be tolerant in view of the fact that this is the first opportunity for a real holiday in some seven years. Most of these men are very tired.

On the other hand, we do not want our post graduate medical training program to suffer for lack of suitable audiences and we are reminding Ministry officials that our prominent medical lecturers are in turn sacrificing their well earned vacations in order to help Poland and that these men could not be made available in the Fall or winter months. It has been decided that Anigstein will lecture twice weekly in Warsaw, namely on Tuesday and Friday evenings. I shall give you further details after the first lecture on July 9th. He has material for eleven lectures covering a total of about 25 hours. His lectures will be given in Polish.

Miss Szloch is still in Prague conferring with Miss Gochinour in regard to the nurses training program.

The present status of the five UNRRA Fellowships allocated to the field of Health is shown in the table below:

<u>Name</u>	<u>Interest</u>	<u>Remarks</u>
Dr. Tubiasz	Public Health Administration	Departed for US in June
Dr. Zakrzewski	Communicable Disease Control	Departed for UK in June

<u>Dr. Morzycki</u>	Maritime Quarantine, Epidemiology and Tropical Diseases	Preparing for departure to UK in September
Mr. Szniolis	Sanitary Engineering	To depart for US in August
Miss Agopsowicz	Public Health Nursing	Awaiting passage to Sweden

It is regretted that additional fellowships were not available for use by other personnel in the Public Health field.

Communicable Diseases

Dr. Begg, in commenting on the typhoid situation reports that the incidence of reported cases was upwards of 1000 weekly in early July of 1945. The curve rose sharply to a peak of 4500 cases weekly in October and then declined to the 1000 level in late February 1946. Since then it has declined more slowly and is still at the level of about 600 cases weekly. As was the case before the war, the Polish health authorities place undue faith in control by immunization.

The locally prepared vaccine is potent and effective, but it has failed to control typhoid in the past and will fail again although the incidence might be favorably affected. The principal problem is to improve the sanitation of water and milk, etc. above 1939 levels. This will take many years to accomplish but our sanitary engineers can help a great deal during the emergency phase, particularly in the large towns.

The second problem is "carrier control" which has been rather hopeless in the past because of the huge numbers involved. Before the war, the typhoid carrier rate in certain areas was as high as 3% of the total population. With modern laboratory methods "dangerous carriers" can be identified and segregated. The technical side of this work is entirely new to Poland but will be communicated by a series of talks and demonstrations to selected groups of laboratory workers by Dr. Anigstein and through technical training of one of the Ministry of Health staff by Dr. A. Felix in London, as part of an UNRRA fellowship study. The first steps on carrier control could therefore be achieved by late 1946.

Dysentery

Dysentery presents similar problems of sanitary control. An anticipated epidemic in the summer of 1945 did not materialize which might be partially explained on the basis of an unusually cool summer with a very short fly season. This year it is

much warmer and one may expect more dysentery. Fly control is important. If enough 100% DDT powder is found to have arrived, and if suitable solvents can be found, the Ministry of Health will be encouraged to put on a program of fly control by spraying, through education and demonstration. We know that there are large stocks of 10% DDT powder in Poland and if sufficient amounts of the 100% powder cannot be found, it would be justifiable at this season of the year to divert some of the 10% powder from louse control to fly control.

Diphtheria

Dr. Begg reports that the diphtheria incidence curve rose fairly sharply from an average of 250 cases weekly in the Spring of 1945 to a peak of just over 1000 cases weekly at the beginning of November. Since then there has been a slow decline over winter and spring to the present level of about 350 cases weekly. Immunization is compulsory in large towns in Poland but is inadequately practiced elsewhere.

In Dr. Begg's judgment, it would be premature to attempt a mass immunization campaign since neither the materials nor the personnel are available to this extent, but the Ministry of Health has such a campaign as their future aim. Production of diphtheria prophylaxis at present is largely limited to formal toxoid and is being gradually stepped up. At a later stage when the technical intricacies have been learned, alum precipitation of formal toxoid will be done. A.P.T. supplied by UNRRA is, of course, already in use.

Nursing Activities

Miss Szloch went to Prague to confer with Miss Gochanour in connection with the nurses training program.

Sanitary Engineering

In connection with malaria and insect control, Mr. Straub is making inquiries relative to the method of disposing of waste crank case oil. Straub is still having difficulty tracing 100% DDT. In an original communication the Ministry of Health informed him that the DDT was turned over to the Commissariat for combatting epidemics. However, we have been unable to locate any of the 100% powder. The Ministry of Health has been advised not to use the concentrated form pending the completion of preliminary work in solvents.

The Warsaw Gas Works has agreed to make DDT solubility studies in their laboratories using local solvents and insofar as possible, local emulsifiers. Mr. Straub reports that some solvents are available on the local market but their suitability with DDT is not yet known.

Due to the potentialities of a serious malaria problem, a cable was prepared requesting the immediate shipment of one ton of Paris green for malaria control.

During the week a memorandum was prepared on rodent control for transmission to the Supply Division. Instructions were also prepared on the use of DDT for combatting lice, fleas, and bed bugs, for publication in the Mission Newsletter. Similar instructions were prepared on the home pasteurization of milk and the preparation of raw fruits and vegetables.

Our Sanitary Engineers have indicated that the Warsaw tap water is of satisfactory sanitary quality although periodic checks will be made.

An inspection was made of the Agril Pasteurization Plant in Warsaw. This plant seems to be operating satisfactorily on a minimum of equipment. Its present capacity is 7000 liters per day, which can be increased to 15000 liters per day. One of the dairies serving this plant was also visited and found to be operating under poor sanitary conditions. In a conference with representatives of the Municipal Institute of Health, our engineers were informed that only 16% of the total milk supply of Warsaw in 1939 met adequate pasteurization standards as determined by the Sharer Phosphatase test.

A form was prepared for the inspection of restaurants frequented by UNRRA personnel and clearance will be obtained from municipal authorities for Mr. Maisel to assist them in making the desired inspections.

Medical Services to Mission

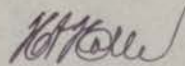
As a result of a recent accident involving an UNRRA vehicle, it has been agreed that all drivers are to be medically examined before employment.

Mr. McDonald, who was recently seriously injured in a motor accident, is slightly improved and his blood urea has receded from 500 to 200. He has been moved from St. Joseph's Hospital to the Hospital of Infant Jesus because the former has been closed for repairs effective July 1st.

The Health Division now has refrigeration facilities for the storage of Mission biologicals and penicillin.

This is the fourth weekly letter, and I would appreciate your comments, together with those of Dr. Sawyer, regarding the value of these weekly reports as far as your respective offices are concerned.

Sincerely,



H. A. Holle
Chief Medical Officer
UNRRA Mission to Poland

Dr. N. Goodman
Health Division, ERO
London

CC to Dr. W. A. Sawyer, UNRRA HQ, Washington

DMG/JHM

44/18/1

Des: No 2 438

RECEIVED BY
REGISTRY

OUT FILE

5th July, 1946.

Colonel H. A. Holle,
Chief Medical Officer,
UNRRA Mission to Poland,
35, Hoza Street,
Warsaw, Poland.

Dear Dr. Holle,

Many thanks for your letter of June 25th, which I read with great interest on my return from the World Health Conference in New York.

Most of it deals with matters which are more Washington's concern than ours, but I would like to reply to a number of points.

1. Your observations about the visit of Drs. Sullivan and Moorhead will be passed to Germany in order to avoid similar happenings in future.
2. I am glad that Dr. Mintek has arrived at last and I am glad that you feel that he will be useful.
3. In answer to your query about your consultants, the Dental Consultant, Major Sutherland is still here wasting his time waiting for a visa. We cannot understand the delay as Miss Ritchie, our dietitian who is visiting you as arranged with Dr. Weiklejohn has just received her visa although she applied long after Major Sutherland. I have no news of the M.C.H. consultant whom Washington is providing but I am glad to say that the V.D. man, Col. J. E. Loh has arrived this morning and seems a very agreeable fellow. We will send him on as quickly as possible but there seems to be considerable delay in travel.



4. I am very glad to hear that the supply bottleneck is really being broken. I know that Washington were much concerned about it.

5. We have no news in London about the lecturers but they are expected at any time.

Yours very sincerely,

N. M. Goodman, M.D.
Director of Health.



Copy for Dr. Goodman, F.R.O. London.

PM/W/451

Dear Dr. Sawyer,

General. There have been no arrivals of personnel during the week. We had expected Miss Gochinour to meet Miss Szloch in Krakow but our latest information from Prague received today was to the effect that she had encountered difficulties with her Polish visa. Miss Szloch is back from her field trip to Krakow Province and in response to a request from Prague by telephone she will leave tomorrow for a conference with Miss Gochinour there. We are still waiting for our consultants in V.D., Maternal and Child Health, Dentistry, Biostatistics and dietetics.

Medical Supplies Apparently there is little likelihood that the budget for medical supplies will be raised from \$30,000,000. All the other budgets except food have been cut in order to allow greater imports of foodstuffs. Since the \$50,000,000 credit to the Polish Government for the purchase of U.S. Army surplus property has been renewed, we have advised the Ministry of Health to make application to the Ministry of Navigation and Foreign Trade for a share of this credit if medical supplies are still available from stocks in Germany or England.

We were interested in Washington's Cable 8863 to London dated June 21 which stated that Baradel's report was to the effect that this Mission does not have an adequate supply record system and that medical supplies are not adequately stored pending distribution. While I have always complained that the out turn record system for medical supplies is inadequate, the situation in regard to storage and distribution has improved greatly since May 15. So far as I know, no medical supplies at the present time are undergoing deterioration, and distribution is taking place at a rapid rate. In fact things look so much better that the distribution office in the Mission complimented the Ministry of Health on the rapid improvement. Dr. Mintek and I will go to the ports tomorrow to look into the situation there.

I have assigned Dr. Mintek to the problem of maximum use of UNRRA medical supplies from the standpoint of the health program. This is a big job, and Mintek is busy obtaining detailed information in regard to the entire system of allocation and distribution now in use. We have suggested that he be placed on the Committee which supervises distribution of medical supplies, and the Ministry of Health has expressed great satisfaction with this arrangement.

Beginning today some drug items will be sold in drug stores throughout Poland. This will increase general distribution of these items. The wholesale prices have been fixed by the Council of Ministers, and the retail prices have been fixed by the Ministry of Health. We expect to be furnished with a list of the prices to be charged. Also we are to receive a bi-monthly report showing distribution of medical supplies down

RECEIVED

5 JUL 1946

U. N. R. R. A.
MAIL UNIT

2nd July, 1946

INDEXED

to the Provinces.

I am hoping that you will exert your influence to obtain for us from the Medical Supply Division the information I requested in my weekly letter of June 25 regarding (a) items in the Medical Supply program which are still to be procured together with their estimated cost and (b) the uncommitted portion of our budget. The breakdown of (a) should be complete by item. We are in the dark as usual in regard to the financial and procurement picture of the medical supply program for Poland.

Copy on 144/1512

Postgraduate Medical Training Program: Since Dr. Anigstein's arrival he has prepared material for eleven lectures covering some twenty five hours. All of these will be presented in Warsaw and he estimates that it will take until July 25 to complete this series here provided he gets started this week. Afterwards he will spend one week each in Krakow, Wroclaw, Poznan, Lodz and Gdansk. Dr. Fronczak is pressing the Ministry of Health to accelerate their preparations for the lectures with specific dates. If the first group of lecturers from the States arrives in time we might include Anigstein in this group for the field itinerary.

We are calling this program the UNRRA Post graduate Medical Training Program, and we are giving proper credit to the contribution of the Unitarian Committee. Anigstein's trip, as I understand it is being sponsored directly by UNRRA as was the case with Martin and yourself. I was glad to hear that Hingson will probably be available in October on loan from the U.S.P.H.S.

Miss Szloch informs me that the twenty Polish nurses have been tentatively selected. We believe that they can be gotten ready for departure in a relatively short time. The plans will be fully discussed with Miss Gochinour in Prague.

Dr. Begg feels that there is a void in the laboratory side of Communicable disease control here, and that nobody yet has been in a position to give sufficiently detailed and factual instruction on recent advances which the laboratory workers so earnestly wish and require. While some of these difficulties may be overcome this summer by the visits of the lecturers, he feels that a supplementary program would pay a high dividend in Poland and that a series of practical laboratory demonstrations, personal lectures and discussions by the right man such as Dr. Robert Cruickshank of London would pay a high dividend in Poland. I am heartily in accord with this idea, and I hope that Dr. Goodman and Dr. Topping can persuade Cruickshank to spend two months in Poland for this purpose. He might also wish to bring a competent technician with him to help on the demonstration side.

If this suggestion is approved, it would be important for us to have plans in advance together with a list of equipment needed.

Communicable diseases: There is no great change in the communicable disease picture as you will note from the reports that we have been forwarding. Typhoid fever rates are appreciably lower than last year. There is some malaria in Poland but reports are very conflicting. During the week ending May 25, 566 cases of Malaria were reported in Poland, 412 of which were in the Warsaw district. One month later for the week ending June 24 only 373 cases were reported but 173 of these were in the province of West Pomorze which suggested that there was a tendency for the reporting of new cases to move westward. We are very much interested to know if any of the new anti malaria drugs could be made available in Poland.

I would not be surprised if there is a material increase in dysentery cases soon. The weather is much warmer this summer than last and many flies are in evidence. There are no screens and foods are displayed without protection in the small stands which line the streets.

Sincerely,

H. A. Holle

H. A. Holle
Chief Medical Officer
UNRRA MISSION TO POLAND.

Dr. Sawyer,
Health Division,
UNRRA,
Washington.

Copy to Dr. Goodman, UNRRA E. R. O., London.

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UNITED NATIONS
RELIEF AND REHABILITATION ADMINISTRATION

MISSION TO POLAND
WARSAW

28 JUN 1946

R. R. A.

MAIL UNIT

A-1506
H 4/18/1
INDEXED
June 25th 1946
Col. Lade.
Crimb.
53.

Answered 5/7
Dear Dr. Goodman:

I have decided to write my weekly letter on Mondays rather than on Saturdays for the reason that the mail plane doesn't leave until Wednesday anyhow. I am alternating these letters between yourself and Dr. Sawyer and this is your turn to be the addressee.

General: The Ministry of Health has been given a top priority by the Polish Council of Ministers in connection with the allocation of UNRRA motor vehicles. We hope that this will help in getting vehicles including jeeps assigned to health personnel throughout the provinces. They are badly needed.

Personnel: Dr. Sullivan returned to Germany last Saturday. He is on duty at Wiesbaden. He arrived here with Dr. Moorhead as extra passengers on a Polish Red Cross train which brought some children from Germany. Two welfare workers also came. None of them were in possession of UNRRA travel authorizations nor Polish visas. Major Sullivan and Lt. Moorhead had cards from P.U.R. (Office of Repatriation) which is a branch of the Polish Government. They came here on instructions from Dr. Elliott to investigate conditions in regard to the repatriation of sick displaced persons to Poland. We gave them as much assistance as was possible. It would have been better if we could have cleared their arrival with the Health Ministry in advance.

Dr. Mintek arrived on Wednesday, June 19. We are sorry there was so much delay. You will recall that the arrangement was for him to come here on Germany's budget for a period not to exceed 90 days during which time a decision would be made regarding his transfer to our budget. We are very glad to have Mintek. He speaks Polish and that is a big help. I have assigned him to our No. 1 job for the present, namely, to help the Ministry make speedy distribution of medical supplies which have been a bottleneck for a number of reasons. If he proves to be effective in this work, he will be worth his weight in gold. Dr. Fronczak will need to spend his time arranging the lecture tours.

Dr. Anigstein arrived on Saturday June 22nd. His itinerary is being worked out by Dr. Fronczak and representatives of the Ministry of Health and will be reported on next week.

19-3

Col. J.H. Lade

N.Y. State

We wonder what has happened to our V.D., Dental and M.C.H. consultants!

Medical Supplies: Real progress is being made in connection with the distribution of medical supplies from the central warehouse here in Warsaw. I went to look at the warehouse again this week. Since I wrote last week, 186 trucks have moved 7,670 boxes weighing 530 tons in addition to 2000 beds and 12 tons of DDT. Approximately 1500 tons remain in the warehouse as compared with 4000 tons at the end of May. I believe that the bottleneck has definitely been broken but Mintek will help them with other bottlenecks which develop in the field.

On Sunday, June 23rd, opening ceremonies were held in a hospital at Adampol in the Province of Lublin on the Soviet border. The hospital was equipped entirely with UNRRA supplies. Dr. Mintek represented the Health Division and reports much gratitude and enthusiasm. The official Mission photographer took pictures and an American correspondent was also present.

I have requested the Ministry of Health to furnish me with a breakdown showing distribution of medical supplies by principal items from the ports down the provinces, every two weeks. We are also requesting that our Division be represented on the Committee in the Ministry of Health which makes allocations to the several provinces. I expect to designate Mintek to sit in on these meetings - at least as an observer so that we might be better informed. We would also like to know what supplies are being sold in drug stores.

Now in regard to the procurement picture. It would be of considerable help to us here if Drs. Johnstone and Tubiasz would sit down with Sollins and figure out (a) what items in the submitted lists remain to be procured together with their estimated cost, and (b) how much money remains uncommitted for the purchase of (a). This information would be of great help because, as I stated in my weekly letter of June 17, new requirements will be sufficiently urgent to displace some of the ones previously submitted and we would like to be in on the suggestions as to what these items should be.

A short time ago we received a request from the Ministry of Health for 1500 passenger vehicles and also for 650 milligrams of radium. In view of the fact that passenger vehicles are not available for purchase by UNRRA so far as we know, except from surplus army stocks, and in view of the further fact that the Ministry of Health has been assigned a top priority by the Government in connection with the allocation of the latter, I have advised Litwin to withdraw this request. I have also suggested reconsideration of the request for the large amount of radium until we could obtain further information regarding availability of funds and what items would have to be displaced. Moreover, I am uninformed regarding the availability of radium in the UNRRA program. The Germans took most of the metal with them when they departed from Poland.

We noted your cable to Washington regarding Daniel's request for X-ray film for his tuberculosis program as well as for serially numbered records. We hope that procurement on these items will not be delayed because the Ministry and the Mission both realize the importance of this program. If the items do not appear on lists previously submitted, we will furnish formal requests.

Post-Graduate Education: Dr. Anigstein brought Miss Johnston's letter regarding the twenty nurses. Miss Szloch had already conveyed the information I brought back. Screening of the candidates has already begun. The Ministry is extremely grateful for this opportunity for so many of the nurses in Poland. We have made arrangements for Miss Gochanour to meet Miss Szloch in Krakow if the former arrives from Prague to discuss this program further.

We have heard nothing
In regard to the other lecturers, we would appreciate getting all available information regarding their progress. Anigstein will assist us in some of the language difficulties. Dr. Fronczak will take them over when they arrive and we will also use Mintek if necessary. We believe this program will be a great success. Consideration is being given to placing Wroclaw back in the itinerary. Lublin will be deleted.

Washington files
We would like very much to have Hingson either in July or in October. It takes him only about 12 days to put on his show in caudal analgesia so he will be valuable even if he can't stay more than six weeks. That is all new stuff here. In planning these itineraries, the Polish Government has requested that the program be cleared with the Ministry of Education to which we are agreeable so long as no interference results in getting our message over to the medical profession.

Next Monday, I will include some remarks on communicable diseases.

Sincerely,

H. A. Holle

H. A. Holle
Chief Medical Officer
UNRRA Mission to Poland

Dr. N. Goodman,
Division of Health, ERO,
London

Copy to Dr. Sawyer, UNRRA Hqs., Washington

103

WASHINGTON

1946 June 21 PM 1 07

58 AIR UNRA 21 JUNE 7 01A

8863 LONDON INFO WARSAW 1678

WE GREATLY DISTURBED BY REPORT FROM BARADEL MEDSUPPLY OFFICER WARSAW MISSION NOW IN WASHINGTON THAT POLISH MISSION DOES NOT REPEAT NOT HAVE ADEQUATE SUPPLY RECORD SYSTEM THAT MEDSUPPLIES ARE NOT REPEAT NOT ADEQUATELY STORED PREPENDING DISTRIBUTION AND THAT THERE IS NOT REPEAT NOT PROMPT DISTRIBUTION MEDSUPPLIES OUR OPINION THAT IMMEDIATE STEPS SHOULD BE TAKEN TO ESTABLISH ADEQUATE FACILITIES AND EMPLOY SUFFICIENT PERSONNEL TO PREPARE ADEQUATE OUTTURN REPORTS ON CARGO RECEIVED AND TO INVENTORY ANY SUPPLIES ALREADY RECEIVED FOR WHICH OUTTURN REPORTS WERE NOT PREPARED. WHILE RECOGNIZING GOVERNMENT'S DIFFICULTIES WITH TRANSPORTATION FACILITIES WE NEVERTHELESS FEEL THAT GOVERNMENT SHOULD FURNISH ADMINISTRATION WITH PROMPT AND COMPLETE ASSURANCES THAT MEDSUPPLIES PRESENTLY ON HAND WILL BE RAPIDLY DISTRIBUTED AND PROPERLY STORED AGAINST DETERIORATION. REPORT INDICATES EXPENDABLE DRUGS AS WELL AS OTHER MEDICAL ITEMS IMPROPERLY STORED OPEN TO WEATHER. EXAMPLE XRAY EQUIPMENT

BELIEVE GOVERNMENT SHOULD BE REQUESTED TO TAKE URGENT MEASURES REFERENCE DISTRIBUTION BEFORE INCREASINGLY GREATER TONNAGES PILE UP AT STORAGE POINTS. ACCUMULATED STOCK PILES MEDSUPPLIES INCONSISTENT WITH REPORTED SHORTAGES SUCH SUPPLIES THROUGHOUT POLAND ALSO OBVIOUSLY INCONSISTENT WITH HEALTH NEEDS. BELIEVE BARADEL SHOULD BE FREE CONDUCT FIELD SURVEYS TO INSURE AND ASSIST PROPER STORAGE AND DISTRIBUTION MEDSUPPLIES UPON HIS RETURN TO POLAND. IN ORDER RELIEVE BARADEL OF OFFICE DUTIES WE PREPARED ASSIGN ASSISTANT MEDSUPPLY OFFICER TO WORK WITH BARADEL. ALSO SUGGEST ASSIGNMENT ADDITIONAL SECRETARIAL AND CLERICAL ASSISTANCE ENABLING ADEQUATE RECORD CONTROLS.

PLEASE COMMUNICATE THIS MESSAGE IN STRONG TERMS TO POLISH MISSION AND ADVISE US IMMEDIATELY WHETHER ASSISTANT MEDSUPPLY OFFICER APPROVED FROM US. IF SO WILL SEND HIM SOONEST.

(END)

Have you seen
an answer on
this yet?

Has S

24/61

6000 MAR (OR DEPUTY)

INDEXED

June 17th, 1946.

Dear Dr. Sawyer:

Well, I am back in Warsaw with my nose on the grindstone. Perhaps I can modestly add that occasionally a few sparks can be seen. In two weeks we will begin the last six months of our activities here. I believe that they will be more productive than the first six, largely because our conditions of work are far superior than they were at first, and because the Health Division is finally blessed with an excellent staff and better office accommodation.

For a long time I have felt that it would be an excellent plan to write a periodical communication designed to keep you and Dr. Goodman better informed regarding our activities and progress here. However, the tempo of our work has been such that I have not been able to carry out this plan in a regular manner. Beginning now, I plan to start over and to write a letter each Saturday giving you the highlights of what has happened during the week. It might save some correspondence during the week, provided the latter is not too urgent. My good intentions may be thwarted occasionally so don't be surprised if there are some blanks. Some of these communications will be addressed to you, and some to Dr. Goodman but each of you will receive copies of all of them. They will not be too detailed and will be designed to give a bird's eye view.

General:

In general, we find ourselves suitably housed for the moment. We have a suite of five rooms on the third floor of our building on Hosa Street only a few blocks from the Polonia, and in the same street that St. Joseph's Hospital is located. I finally have a room to myself although I am seldom alone during office hours. As soon as the remainder of our staff arrives we will be a little crowded but everybody in Warsaw is crowded so we don't complain. In addition to our five rooms we have a small dispensary which renders out-patient service to the entire Mission staff.

Transport continues to be somewhat of a problem but when you were here we were walking, so it is better. Now we have a jeep assigned to the Division. Since there are eight field personnel in our group who are required to get around, we are handicapped considerably within the City of Warsaw because within the city the motor pool is somewhat uncertain. I am requesting that additional vehicles be assigned to the Health Division. For field trips we depend upon the motor pool and with reasonable notice our staff has been able to obtain transport.

Our relationships with the Ministry of Health continue to be excellent. At times it would be easy for me to become impatient over the ap-

Q3

parent lethargy and the slow rate of progress which has been achieved. However, my years in dealing with State Health Departments has taught me that patience and gentle pressure are virtues which keep one acceptable to those we would like to influence in much greater measure than a display of irritability and a series of "running fits" and ultimatums. Moreover, in view of dinosaur-like flies which hover about some of our own administrative machinery, I am extremely reluctant to cast the first stone.

In this connection, I have reminded our staff that they are advisors to the Ministry of Health and are not responsible for the technical direction of the respective programs; that they are consultants but don't actually "treat the patient". Through the observance of these safeguards no one within our Division has ever become persona non grata to the Ministry and each is able in his or her field to have free entry and to exert a constructive influence which we hope will grow in time. I am not unmindful that Litwin is working under almost insuperable difficulties. The influences which interfere with his having a free hand are colossally restrictive and the fact that he never complains about them increases my willingness to overlook some of the shortcomings within the Ministry and its program. You, who have been here, know what some of the difficulties are and Tubiasz can tell you of others.

Jagielski, whom you know, has been arrested and I have not seen him since March. I have not been able to find out what he is charged with except for the fact that Litwin told me that what he did "was not for his own personal gain". Ropczinski, who was in charge of the pharmaceutical department has also been arrested along with another whose name I don't recall. I don't know what the "irregularities" were which eliminated them from the picture and I have ceased to inquire. They have been replaced by others and the ship sails on - against the wind.

Personnel:

Our consultant staff is excellent in every respect and I could not ask for a more effective or conscientious group. Dr. Begg is our Communicable Disease Control man who also acted as Chief during my absence. I am very fond of him. He directed the Division during these two months with a competence which could certainly not be improved upon by me and he shares with me a great deal of the administrative work which must be done. Dr. Fronczak has been extremely active since his arrival and enjoys the advantage of being known throughout Poland and of having a thorough command of the language. He is rendering excellent service through his contacts with the Ministry in every field and is making plans for the itinerary of the lecturers. I feel that with Dr. Fronczak as master of ceremonies for this distinguished group, the success of the undertaking is assured. Dr. Fronczak is writing you a separate communication which I have had the pleasure of reading and which describes his activities in more detail.

Miss Doherty, our Public Health Nursing Consultant, left last week to return to her native Australia where she feels that her services are urgently needed in connection with Public Health Nursing activities. During her stay here she travelled in company with Miss Szloch, hospital nursing consultant, because the latter speaks Polish. Misses Doherty and Szloch made surveys of quite a number of hospitals and

nursing institutions and submitted recommendations for improvement. Miss Doherty feels, and Miss Szloch and I agree with her, that it will not be necessary to replace Miss Doherty and that Miss Szloch will be able to carry on effectively for the remainder of the year.

Capt. Straub is doing excellent work. He is as busy as a cranberry merchant as you can well imagine with sanitation problems like they are. During the past week he has been even busier taking his promotion examinations in the regular corps of the Public Health Service. Straub has the advantage of knowing Polish which helps tremendously and I am thankful that you were able to fish him out of China for us in Poland. Incidentally, I believe Straub should be promoted to the rank of Major. He has now caught up with his present grade on a permanent basis and an additional stripe won't hurt him any in his work. I understand that the recommendation has been made. If not, I'll gladly initiate it from here. Our other Sanitary Engineer, Mr. Maisel, will coordinate his work with Straub. He arrived here a few days after my return.

Our clinical medical officer, Dr. Bonamis, has gotten his dispensary in shape to operate and is giving satisfactory medical service to the Mission staff. Dr. Lukaszewicz takes care of the Polish speaking personnel of the Mission and accompanies members of the staff on field trips on occasion. As you know, he is an American citizen and is desirous of returning to the United States as soon as we can release him here. On the other hand we would like to have him stay until the end of the third quarter if possible.

Medical Supplies: In spite of everything that has been said or written about medical supplies, the fact remains that such supplies in quantity have been distributed to all the provinces in Poland. It is no longer difficult to find them in hospitals. Unfortunately, it isn't difficult to find them at the central warehouse in Warsaw either - in fact, one can see them from a distance as one approaches the establishment. The story is relatively simple - a bottleneck in distribution.

Through stimulation by UNRRA to keep the ports clear, it became the practice to load supplies directly from ship to train. In the case of medical supplies, shipment was made principally to Warsaw but also to warehouses in Lodz and Cracow. They were shipped so promptly that no close check was made at the ports regarding content. For example, on January 28th, the SS Morska Wola arrived containing one 1000 bed hospital. The SS Levant and the SS Katowice arrived on February 1st with three more 1000 bed units and the SS Vilno brought an additional unit on February 4th. None of these units were identified as such until they had been shipped to several points as general hospital supplies.

This state of affairs was not due entirely to negligence on the part of personnel of the Health Ministry at the ports. The units were not complete, were poorly packed, in bad condition, and were not accompanied by lists which could be used for checking. I have since been informed that the hospital units were never represented by the U.S. Army as being complete and were sold "as is" to UNRRA on the spot.

On February 28 we called a conference with officials of the Ministry of Health and urged them to request warehouse facilities at Gdynia so that medical supplies could be identified, checked and shipped more intelligently. It was promised at that time that all medical supplies then warehoused at Gdynia, Warsaw and Lodz would be fully distributed by April 1. However, as it turned out, the volume of supplies coming into the ports almost tripled during this time and under the regulations governing distribution then being followed, the Ministry of Health could not cope with the problem. The method of distribution required that the Ministry of Health approve all allocations to hospitals from Warsaw and when supplies were received in Cracow or in Lodz directly from the ports, such supplies had to be inventoried and the list sent to Warsaw for directions regarding distribution. This procedure, in addition to the vastly increased rate of flow and the lack of transport or fuel (alternatively it seemed) resulted in a tremendous bottleneck. In Warsaw, medical and hospital supplies, including valuable equipment, were piled high in the yard of the central warehouse.

During the time I was in the States, a virtual ultimatum was given to the Ministry by the Mission to the effect that future shipments of medical supplies were contingent on the prompt distribution of those now so obviously on hand. Under this pressure the Ministry took more drastic action. Authority for the distribution of all medical supplies on hand within the provinces was delegated to the Provincial Health Officers. More than any one thing, this decision broke the bottleneck. Dr. Fronczak in company with representatives of the Supply Department, went into the field and inspected local stores of medical supplies. They are being watched from week to week and are being rapidly distributed under the direction of the Provincial Health Officers.

During this week I made an inspection of the central warehouse in Warsaw with Dr. Litwin. Medical supplies are still in evidence out in the open but they are rapidly disappearing. Thirty-four three-ton trucks were loaded for three of the provinces on Tuesday. Litwin assured me that by June 30 the supplies would all be gone and this time I believe he is right.

The new system provides for segregation of medical supplies at the port and shipment to four regional warehouses located at Gdynia, Warsaw, Lodz, and Bytom. From here they are shipped to the several provinces as follows:

<u>Gdynia</u>	<u>Warsaw</u>	<u>Lodz</u>	<u>Bytom</u>
Gdansk	Warsaw Province	Lodz	Krakow
Pomorze Zachodnie	Warsaw City	Lodz City	Rzeszow
Pomorze	Poznan	Dolny Slask	Kielce
Mazury	Bialystok	Opol Slask	
	Lublin		

Once they arrive in the provinces they are distributed to individual institutions on the authority of the Provincial Health Officer.

I was informed in Washington that approximately fifteen million dollars worth of medical supplies will have been received in Poland by June 30. Inasmuch as our budget was cut to thirty million, this means that we should receive approximately half of our program during the last six months of this year as far as dollar values are concerned. However, only about five million dollars worth remain unspent or uncommitted.

As you know, Dr. Tubiasz and two pharmacists have gone to Washington as representatives of the Ministry of Health to confer with UNRRA on the procurement of the remainder of the medical supplies. As I understand it, they have the authority to make changes in the official requests if necessary and they are in possession of the latest requirements. The chances are they will not be able to procure everything on their lists on account of an insufficiency of funds. In the meantime, new requirements are being discovered here which are urgent. These will be transmitted with recommendations and comments from time to time. It will require mature judgment to decide what to eliminate in order to make room for these last minute requirements.

I feel sure that Tubiasz and Co. will consult fully with Dr. Johnstone and the Health Division. At long last it might be possible to integrate the local needs with procurement in Washington, for the remnants of the available budget. It was a long struggle! As we pass on future requests with our recommendations, it will be for Johnstone, Tubiasz, etc. to decide what should be displaced. For this reason, I feel that all of the funds should not be tied up at once so that there will be a cushion. We might be in for a malaria problem yet.

This letter is getting somewhat long so I'll call it a day until next Saturday at which time new topics will be added.

Regards,

H. A. Holle

H.A. Holle
Chief Medical Officer
UNRRA Mission to Poland

Dr. W. A. Sawyer, Chief
Division of Health
UNRRA
Washington, DC

CC to Dr. N. Goodman, ERO

*P.S. Don't be surprised if this good intention breaks down or
has gaps - It will be on account of the press of business.*

UNITED NATIONS
RELIEF AND REHABILITATION ADMINISTRATION
MISSION TO POLAND

WARSAW

Desp. N° 1345

PM/L/838

15th June, 1946.

To: Dr. Goodman,
UNRRA, European Regional Office, London.

From: B. M. Wellington,
Office of Liaison with Voluntary Societies.

You may be interested to have the attached
copies of: -

1. Radio speech delivered by Dr. Litwin,
Minister of Health for Poland.
2. Broadcast by Dr. Fronczak, UNRRA
Medical Adviser, UNRRA Polish Mission.
3. Memorandum issued by the Municipal
Office of Cracow concerning their social welfare
needs.

Jean B. Hadley
for B. M. Wellington.

3 Enc.

RADIO SPEECH delivered by Dr. LITWIN,
Health Minister of Poland, June 6th, 1946 at 7,30 p.m.

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U.N.R.R.A. Supplies for the Polish Health Service.

Devastated Poland has found help and aid in international organisations, whose chief aim is the rehabilitation of the war return countries.

In Poland the Health Service was one of the most completely stricken and therefore was given aid from abroad, e.g. from the Soviet Union, Sweden, other countries, the Poles from the United States, especially from the UNRRA.

From September 1945, to January 1946 our ports have handled 3.000 tons of medical equipment and medicines supplied by UNRRA. These have been processed through the Central Sanitary Warehouse and six warehouses in the field in different parts of Poland.

From January 1946 to March 1946 we received medicines which were distributed throughout the country.

From March 1946 to April 15, 1946, we received 9.000 tons of medical equipments and medicines. In all thus far, we have received 14.000 tons of sanitary supplies. UNRRA transports are still coming in. Of the above mentioned amounts we have allocated the following into the field:

32,000 metal and field beds,
29,000 mattresses, 863 tons disinfectants, 48 tons disinfecting
apparatus,
2,582 tons medicines and sanitary supplies, 894 tons of cod
liver oil, and
11,807 cruets of penicillin of 1000,000 units.

With the above mentioned supplies we were able to improve the equipment of hospitals, sanatoriums and 560 health centres through allocation of 85,000 hospital beds and 8.000 sanatorium beds.

Approximately 2,000.000 children received cod liver oil.

Owing to transportation difficulties the Central Warehouse has on hand about 2,000 tons of non-allocated stores. In

addition to transportation difficulties this storage was caused by the impossibility of immediate use of these supplies in field. I should like to mention at this time that the Polish American Council is rendering us very definite assistance. The Ministry of Health has decided to empty the warehouses in their entirety in order to make room for new supplies.

We must understand that supplies sent thus far and those planned for the future will not sufficiently cover the entire needs of the Health Service of the country. The first supplies we received and those we are still receiving were planned without consulting us, therefore they are not those that we most urgently need, that does not mean however that they are not useful. UNRRA could only cover in 25% of our requirements for medicines for the 12 month period and furthermore we have no assurance that we will receive the drugs most urgently needed.

Our chief task is to supply the country and this task must be accomplished.

All the districts have been already informed that the Health Divisions have sent, between the 11th and 17th inst. their lorries 10-12 into each district in order to take the medicines and equipment allocated to them.

The Ministry of Health will render assistance in the transportation of these supplies to those District Divisions which may have special transportation difficulties.

In order to speed up the distribution of medicines, the Ministry of Health has charged the District Offices with this function. It has ordered them to do this energetically, efficiently and speedily. To accomplish this the District Divisions must have suitable storehouses at their disposal.

The District Health Divisions are now distributing UNRRA gifts to all medical facilities in the country, viz. to hospitals, health centres Social Insurance Association, the Ministry of Communications and welfare institutions.

All managers of hospitals, officers of health centers, of organized medical institutions and welfare medical institutions, are obliged to get into touch with the District Health Division, as soon as possible in order to receive these allotments of medicines and equipment.

The Governors of the Districts, the directors of the District Health Divisions, the pharmaceutical inspectors, the officers of the district storehouses and the district doctors should do their utmost to distribute the medicines and equipment as soon as possible.

The UNRRA medicines must reach every citizen in the shortest time. The Ministry of Health has appealed to the Economic Committee of the Council of Ministers to distribute medicines through private and social pharmacies. These medicines are to be sold at fixed prices, in strict conformity with the instructions of the Ministry of Health. The Pharmacutists Association and the Inspecting Pharmaceutical Department are responsible for enforcing these prices.

The strict control of these instructions will be charged to social control commissions appointed by the Ministry in every Wojewodztwo. This, undoubtedly, will cause a price reduction of all drugs.

Thus, every Polish citizen, every inhabitant of the most distant and smallest village will be able to purchase the most necessary and very often rare medicines - owing to the aid from abroad: Soviet Union, Sweden and other countries and especially UNRRA, whose basic policy is to help everyone.

I most sincerely wish that gifts sent from abroad and those from UNRRA will not be wasted and I am certain that everything will be utilized to the utmost.

International Broadcast by Dr. FRANCIS R. FRONCZAK,

UNRRA Medical Advisor, from the Polish

Radio Station, Warsaw, June 6, 1946

7.30 p.m.-

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For the past 26 days I have been in Poland. I have travelled through quite an extensive part of the country, of my forefathers, - from the river San on the East to beyond the western banks of the river Odra, from the shores of the Baltic to the Tatra mountains. In my travels I have had the opportunity to learn of the difficulties and tribulations of the people in the cities and in the rural districts. I have visited and studied the hospitals and the health centres. I think that I can restrict my remarks to few sentences:

The welfare of a country depends on the welfare and wellbeing of every individual citizen, - from the infant to the eldest of the inhabitants, it depends on giving him all material and healthy conditions.

All methods of preventing communicable diseases are already undertaken and being carried out. The biological preventive products against the various communicable diseases are now being given in all at least (20) million of people are now or shall be immunised within 2 months to stop the existing or threatened epidemics. Plans have been made for continuity of health activities in the future.

The Ministry of Health and the UNRRA do not want hundreds of thousands of ill citizens. We shall distribute all the drugs and medical supplies we now have and in the future shall receive, so that they may reach everyone in need of same. We shall allocate the drugs as quickly as possible, without unnecessary delay, we shall not permit the future arising of bottlenecks in the warehouses and stores, we shall do everything to feed the hungry and give proper medication to the sick. We must and shall have action.

Besides being an American citizen and official representative of UNRRA, and member of the Polish Health Service - I am one of the many whose forefathers have emigrated from this country, and, who in his heart and thought unites with you most intimately. Your joys are our joys, and your sorrows are our sorrows. I have absolute faith and hope in the joint cooperation of all from the highest dignitary to the lowest functionary, we shall eliminate all diseases which are tormenting us.

We know that the rapid distribution of stores is desirable from every view point but these themselves, will not supply all the needs of the country. Equally the amount of food as well as the supplies and medicaments granted to us by UNRRA will not fully take care of the needs of the country. I shall endeavour that the American public, especially the American citizens of Polish extraction, beyond the gifts of UNRRA, will come with aid to the Polish people. In these citizens courses the same blood that flows in yours.

I am certain that the healthy enthusiasm and the healthy social and natural ideals that lighten our way, shall rebuilt anew a powerful nation - a new strong and prosperous Polish country.-

MUNICIPAL OFFICE
OF CRACOW

To
UNRRA Mission to Poland
WARSAW.

Social Relief is one of the most important problems in Poland, a country devastated by the 6 years' German occupation. Welfare requirements in Cracow are much greater than in other towns of Poland, because many homeless people settle there, Cracow being one of the few large Polish towns which had not suffered from hostilities. Among them we find people who were evacuated by the Germans from Warsaw, repatriates from the East, people returning from concentration and labour camps in Germany, demobilized soldiers, invalids, etc.

All these people are assisted by the municipal authorities in Cracow, and Social Welfare Institutions such as The Municipal Committee of Social Welfare, The Polish Red Cross, The State Repatriation Office, etc. This work is very hard, and it requires considerable funds, and, though Cracow had happily escaped destruction during the hostilities none the less its Welfare Institutions had endured great losses, all their buildings being occupied by the Germans for other purposes. They had also suffered during several displacements during the German occupation and partly from hostilities (the blowing up of the bridges).

The Municipal authorities run at present the following Welfare Institutions:

1/	Homes for small children	2
2/	Educational institutions for boys	9
3/	" " " girls	11
4/	Homes for the aged	9
5/	Sanatoriums for the weak and the convalescents	2
6/	Hostels	5
7/	Child Homes	40
8/	Soup kitchens	21

In the above institutions 1190 children and young people, and 1.220 adults are housed.

Moreover about 9.000 people are benefiting from monthly allowances of money or food.

In view of the considerable devastation during the German occupation of the equipment both in Welfare Institutions for Children and Young people, Old People's Homes - there is a necessity for supplementing the equipment, especially:

I. a/ of Children's and Young People's Homes;

800 bedsteads and mattresses (out of which 100 infants' bedsteads and 150 for children under-school age),
1000 blankets
1000 pillows
1600 sheets

3000 metres of bedding
2000 " " linen for underclothes
Outfits and diapers for infants
Footwear for girls and boys
Underwear
Requisites for games, playthings and sport articles,
Kitchen utensils (saucepans, boilers, etc.).

b) Of Old People's Homes:

900 bedsteads and mattresses,
750 blankets
750 pillows
1000 sheets
500 under-blankets
2500 metres of material for bedlinen
1500 " " " " underwear
shoes and morning gowns
kitchen utensils.

II. It is also necessary to have some nutritious foods, such as condensed milk, Quaker oats, sugar, vitamins, chocolate, etc. both for people covered by full care and for those benefiting from partial care, for instance pregnant mothers, babies, etc.

III. Moreover the Social Welfare Department of the Municipality of Cracow runs in Cracow a Clinic giving medical aid to 70-100 poor people daily, among whom are inhabitants of Cracow, repatriates, ex-prisoners returning from camps, etc. The Clinic has a surgical, gynaecological, internal, paediatric, neurological, ophtalmic and T.B. Department. The work in this Clinic encounters great difficulties owing to lack of medicines, and partly of suitable equipment and instruments. The following equipment is necessary:

3 Quartz lamps
3 Babies' scales
Gynaecological table
2 sofas for the examination of patients
1 cupboard for surgical instruments
straight and curved scissors, ophtalmoscopes
pincets, middle size and small sterilizers, syringes,
needles and all kinds of medicines and injections.

Submitting to you the list of welfare requirements of the Municipality of Cracow I request your kind assistance in helping our Municipal authorities to solve the problem of bringing aid to the poorest population living in pitiful conditions brought about by the long years of German occupation.

Cracow, 28th May 1946

President of the Town
Stefan Dziwlik
Vicepresident of Cracow

Deop. No. 1129

UNITED NATIONS
RELIEF AND REHABILITATION ADMINISTRATION
MISSION TO POLAND
WARSAW

PM/L/759

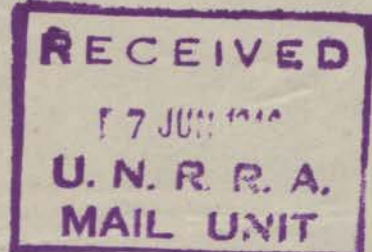
3rd June, 1946

INDEXED

To: European Regional Office (Health Division)
From: UNRRA Mission to Poland.
Subject: Report of Activities of Health Division,
UNRRA Mission to Poland, for month of
May 1946.



There is transmitted herewith a copy of the monthly report of activities of the Health Division, UNRRA Mission to Poland, for May, 1946.



Norman D. Begg
Norman D. Begg
A/Chief Medical Officer
UNRRA Mission to Poland.

NDE/lm

516
Col. Aschmeyer 11-6-46
Gen. N° Shady 12-6-46
D. Stewart
Flair White Hall
Mr Campbell
Mr Hampton

7/6

OUT FILE

XXXXXXXXXXXX
MUSEUM 6398

H 4/18/1
Des No: 1579

Dr. N. D. Begg,
Acting Chief Medical Officer,
U.N.R.R.A. Headquarters,
Polonia Hotel,
WARSAW.

28th May, 1946.

Dear Dr. Begg,

Dr. Goodman, who has left on a short visit to Austria, has referred to me your monthly report for April and which I have much pleasure in acknowledging. I was very interested to read it and it is at present circulating in the division.

As you know, we were very busy all last week due to the Relief Services Conference which was highly satisfactory and will, I am sure, prove of great assistance to all concerned. As soon as the report is prepared a copy will be sent to you. Unfortunately, Colonel Holle arrived only on the last day of the Conference.

Mr. Sutherlands arrived in London and will probably reach Warsaw early in June to replace Colonel Nevitt.

Your problem regarding the health of the Mission staff has now no doubt been eased by the arrival of Dr. Bonami who carried out similar work very successfully at our Administrative base at Haren.

In my own work with displaced persons my chief concern at the moment is the repatriation of Polish D.Ps to Poland, especially the sick. Twice in Germany I have met representatives of the Warsaw Polish Red Cross who declared that the Polish Red Cross would put at our disposal hospital trains for the repatriation of sick D.Ps. We are mostly concerned with cases of tuberculosis and I should be very grateful if Dr. Daniels would send us a report on what accommodation will be available for this category of D.Ps on their return to Poland. The approximate number of tuberculosis cases to be repatriated will run to about three or four thousand, and I should be glad to receive the aforementioned report as soon as possible. In order to encourage this repatriation it might also be advisable to send along a few Polish doctors who are at the moment working in the sanatoria in Germany to see for themselves what accommodation is available. Should you feel that a better method of dealing with this question would be to send somebody from the Health Division, E.R.O., to Warsaw in order to discuss the matter with Dr. Daniels and the Polish authorities concerned, this would be possible.

As repatriation of the sick must take place in July or August at the latest I should be very grateful of your early reply.

Yours sincerely,



R. L. COIGNY, M.D.
Head of Medical Branch for D.P. Operations.

UNITED NATIONS

RELIEF AND REHABILITATION ADMINISTRATION
MISSION TO POLAND
WARSAW

14th May 1946

Dear Dr. Goodman:

Thank you for your letter of 8th May, 1946, and your remarks about epidemic returns from Poland. These, and others in similar terms from Washington, have been passed on to the responsible department of the Ministry of Health where they were naturally received with intense pleasure.

Dr. Fronczak arrived safely on 10th May carrying your personal letter to me. I appreciate, of course, that these shock tactics have nothing to do with E.R.O. Actually, his presence in Poland at this time is very opportune because there are several immediate problems he may help to solve. In the first place, Dr. Tubiasz will leave very shortly for the U.S.A. on his UNRRA fellowship and there will be his liaison work with the Ministry of Health to cover. Secondly, I have been rather disturbed by some of our regional delegates' reports on health conditions generally and distribution of UNRRA medical supplies, in particular in the Western provinces. It might be that, with the Ministry of Health's approval, Dr. Fronczak could carry out a specific and useful survey of some of these provinces. He has already met Dr. Litwin and I am certain that a mutually agreed plan can be evolved between the Ministry of Health and ourselves.

We are having some delay in getting final clearance for Dr. Mintek to come to Poland. I have no reason to think there is anything in it, except reluctance for any one government department to accept responsibility. They have promised a decision as quickly as possible. Captain Straub is now in full activity and finding a great deal to be done in the sanitary engineering field. Dr. Daniels should complete his tuberculosis survey within the next ten days. I have ~~agreed~~ agreed to his leaving for Prague on 27th May for a short survey before returning to London. This, I understand, has already been cleared with you. Miss Doherty leaves Poland on 1st June. She has done most excellent work and the Polish Nursing Division will be as reluctant as we are to have her go. She has discussed her replacement both with Dr. Holle and myself, and I share your opinion that, for the time being, Miss Szloch could well carry the full responsibility of Nursing Consultant. Dr. Bonamis is settling down to re-organize the out-

12 May -
The list of medical
supplies have been
approved for purchase
& 2 copies given to Mr. Cantwell
JGA

(1) Col. Armstrong JGA
Can you get on with
the plan? H.
(2) G. A. S. S.
(3) Dr. K. H. Hill.
(4) Dr. R. H. Hill. A.P.H.
copy made?
21.5.46

patient department in our new offices in Hoza Street and the medical care generally of the Mission staff.

UNRRA Fruit Juices

There is a reference to this situation in the monthly report for April. A Polish commission set up to investigate alleged toxic symptoms of diarrhea and vomiting in children following consumption of fruit juices, is faced with this situation:

- (i) The clinical reports generally are vague.
- (ii) Widespread sampling, analysis and animal tests in the State Institute laboratories have revealed one abnormality only (and that only in some orange and grapefruit samples in Warsaw and Lodz) namely, quantities of tin in the juices up to 80 mgs. per 100 ccs.
- (iii) Guinea pig and rabbit tests with tin in much greater quantities have given negative results and adult volunteers have drunk similar juices without symptoms.

The commission is divided at present on one question - the toxic properties of tin to humans. I have undertaken to get authoritative opinions on this from the U.K. and America and would much appreciate the views of say the public analyst in London. Samples of a suspect batch are being forwarded to Washington at their request.

Repatriation arrangements

The medical organization of P.U.R. requisition for all their medical supplies from the Ministry of Health. They are not satisfied with their allocations and we had a number of representations to make following a visit I made to repatriation centres near Katowice just before Dr. Holle left. From these and other relevant requests and discussions pending, I hope to be able to complete a picture of the medical arrangements of P.U.R. which I shall forward to you. Dr. Aselmeyer has already requested this. There is little doubt that in the early stages of repatriation, conditions were very bad. My impressions from the visit in late March were that they had improved greatly.

Medical Supplies

*MM
informed* I append (in triplicate) a list of equipment and drugs for the treatment of Mission staff. They include items which we are having the greatest difficulty in obtaining in Poland. I propose to send Miss W. Wilson, Dr. Holle's secretary, to the London conference. It would be much appreciated if any of these supplies could be ready for her to take back to Warsaw. *X*

London Conference

We have not yet received the agenda but hope to do so in time for Miss Wilson to take with her any relevant information from our files. I am acting on the assumption that Dr. Holle will be in London by the 21st but there has been no recent confirmation of this.

Dental Report

Col. Nevitt's report has just been received. Will you please acknowledge from me with thanks.

Sincerely yours,

Norman D. Begg

Norman D. Begg
Acting Chief Medical Officer
UNRRA Mission to Poland

Att.

Dr. Neville Goodman
Director of Health
European Regional Office, UNRRA
London, W.1

UNRRA MISSION TO POLAND

Equipment and Drugs required for treatment of Mission Staff

Instruments

- One blood pressure apparatus (baumanometer if possible)
- One diagnostic set consisting of ophthalmoscope, auriscope and three aural speculae together with two spare bulbs and one spare battery

Biologicals

- Schick test toxin..... 10 x 5 cc. bottles
- " " control..... 10 x 5 cc. "
- Alum precipitated diphtheria toxoid..... 100 x 0.5 cc. ampoules
- Diphtheria Antitoxin (refined).. 20 x 10,000 units
- Tetanus Antitoxin (refined)..... 20 x 10,000 units

Drugs

- Penicillin..... 10 million units (preferably in tablet form)
- " Ophthalmic Canellae.. 10 tubes
- " Mouth lozenges..... 10 bottles (each of 50 lozenges)
- " Cream base, i.e. sterilized and buffered cream in small bottles to which penicillin can be added (made up, I believe, by B.W.&Co.)... 100 bottles
- 25% Benzyl-Benzate emulsion.... 100 x 2 oz. bottles
- Benzedrine tablets..... 250 x 0.5 gm.
- Benzedrine inhaler..... 24
- Ephedrine (soluble salt)..... 10 gms.
- Calamine Powder..... 2 lbs.

UNITED NATIONS
RELIEF AND REHABILITATION ADMINISTRATION
MISSION TO POLAND
WARSAW

Desp. No. 848.

INDEXED
H 4811

PM/L/627

13th May 1946

TO: European Regional Office (Health Division) /
UNRRA Headquarters (Health Division)

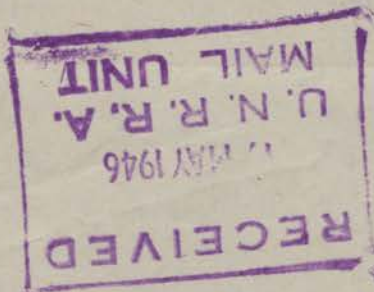
FROM: UNRRA Mission to Poland

SUBJECT: Report of Activities of Health Division,
UNRRA Mission to Poland, for month of
April, 1946

There is transmitted herewith a copy of the monthly report of activities of the Health Division, UNRRA Mission to Poland, for April, 1946.

Norman D. Begg
Norman D. Begg
A/Chief Medical Officer
UNRRA Mission to Poland

✓ Att.



XXXXXXXXXXXX
Museum 6898

NRAG/DES

H4/18/9 Des No 1587

OUT FILE

DESPATCHED BY
REGISTRY

8th May, 1946.

Dr. N. D. Begg,
Acting Chief Medical Officer,
UNRRA Headquarters,
Polonia Hotel,
WARSAW.

Dear Dr. Begg,

Absence at conferences in Paris has delayed my acknowledgment of your most excellent report of the Health Division in Poland for March. Your report was circulated to the heads of branches here and read with great interest.

Dr. Stuart asks me to congratulate you on the extreme speed with which the epidemic returns are rendered - we receive them before the returns from any other European country and I think the Ministry of Health and yourself are to be greatly congratulated on this. We shall receive the longer additional and complementary reports promised with great interest.

I note that your report does not deal with displaced persons and I would be glad of any information you can give us in future reports or in special reports on the health and medical care for returning displaced persons, in so far as it is available to you.

I understand that Miss Doherty will be leaving to take up another appointment and no doubt you will inform us whether a replacement is required. My own view would be that possibly you could get along without such a replacement.

Yours sincerely,

N. M. Goodman, MD.,
Director of Health.

OUT FILE
DESPATCHED BY
REGISTRY

44/18/1
Des. No. 1323

23 April, 1946

Chief of Mission
UNKRA
Polonia Hotel, Warsaw

Attention: Dr. N. D. Begg, Acting Chief Medical Officer

Dear Dr. Begg:

Dr. Goodman has asked me to acknowledge and thank you for the March report of the activities of the Health Division.

We want you to know that the weekly reports of Infectious Diseases are reaching this office promptly and are at present the most up to date for Europe.

The longer reports amplifying and complimentary to the weekly returns of Infectious Diseases are read with much interest and are greatly appreciated.

We should be very happy to receive any information available to the Mission with regard to what preparations are being made in Poland to receive displaced persons who are being repatriated, especially those suffering from tuberculosis.

Thank you for your splendid cooperation.

Sincerely yours,

A. J. Aselmeyer, M. D.
Col. USPHS
Deputy Director of Health

PM/L/478

PN/W/245

4th April 1946

H 4/18/1

INDEXED

535

TO: European Regional Office (Health Division) ✓
UNRRA Headquarters (Health Division)

FROM: UNRRA Mission to Poland

SUBJECT: Monthly Report of Health Division

There is transmitted herewith a copy of the monthly report of activities of the Health Division, UNRRA Mission to Poland, for March 1946.

N.D. Begg

N.D. Begg
A/Chief Medical Officer
UNRRA Mission to Poland

Att.

Cumulate to Heads of
Branches for info and any
comments in my acknowledgment.
Return to me pl.

N.D. 10/4

8 Goodman.

1. How expeditious the returns are rendered - more up to date than any I receive.
2. Value of the longer reports - the sent - additional & complementary to the weekly returns.

11/4

G.L.





H4/18/1

(1) Dr. Craig To me

(2) Registry

Health. Poland.

21st March 1946

Dear David:

I wish to acknowledge with thanks your letter of March 5th, transmitting your report to Dr. Litwin on the Prevention and Control of Typhus Fever. Dr. Begg and I agree that we have nothing to add to the report and it is being transmitted to the Ministry of Health as you sent it.

I wish to take this opportunity of thanking you for your valuable service to Poland, and to UNRRA during your stay in Poland. It was very pleasant having you and I can assure you that your lectures and demonstrations were well received and are still being discussed. I am pleased to inform you that the typhus rate has not shown any tendency to rise.

I received a communication from General Stayer expressing his desire to visit Warsaw and I have made the necessary arrangements with the Polish Government and with the American Embassy.

There is no earthly reason to doubt the success of your mission to London, and I am willing to stake my next month's salary against 100 Zlotych that the announcement in the January 29th issue of the London Times will be consummated without serious delay or difficulty.

With kindest personal regards and best wishes,

Sincerely,

H. A. Holle
Chief Medical Officer
UNRRA Mission to Poland

Lt. Col. David M. Greeley, MC
U.S.A. Typhus Commission
Hqs. USFET (Main)
APO 757 (Hochst)
U. S. Army

hah:w

Bibliographie

Ouvrage de base

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Strong - ~~State~~ Stitt's Tropical Diseases. 1943 (Royal Soc.)
Bercowitz - Tropical Diseases - 1944 -
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Bulletin Societe des Nations ¹⁹²¹ (Stuart)

mensuelle

.. 1943. Yves Bizard (vacines) 10pt-64

++ Tropical Diseases Bulletin 1940 - 1946 -

++ Bulletin of Hygiene

Bibliographie sur Typhus 44 x 45 x 46

- B. M. J.
- Lancet
- Tropical American Medical Association
- Annals of Internal Medicine
- Archives of Medicine

Français (London School of Hygiene - Gower St.)

- Bulletin de pathologie exotique.
- Annales de Parasitologie
- Bulletin de la Societe Medicale des Hopitaux
- l'Academie de Medicine

Contact = Melville MacKenzie

raj. Sarah Bowditch U.S. Embassy (Raulats Cox)

London School of Hygiene =

Prof. Buxton & Dr. Buxine (Louis) - Stuart

Lister Institute = Felix (Stuart) -

Topping - British Council Calcutta
Dwyer - Deutschmann Hillbank Foundation
Levell - Rockefeller

Epidemic Typhus Prevention

Introduction -

1/ Historique :

2/ Epidemiology = Since 1914 - War disease -

1914-1918

1919-1939

1940-1946

Effet de 20 ans pulvérisés par l'aveuglement de guerre
Différence capitale : diminution gravité -
restent années -

1946 - Typhus foyers -

Tendance maladie de foyers

Allemagne →
Grèce, Pologne →

Pronostic pour l'avenir -

3/ Clinique

a) Durée de la période d'incubation
Modifiée de cette guerre
spontanément ou par vaccination?
par rapport à 1914-18

b) Forme clinique classique

c) Différence symptomatologique (1944-45) de cette guerre -

d) Différence de l'incidence des complications
durée totale maladie | chiffres
mortalité

4/ Types de A classiques

- Weill-Felix -

Signification & pronostic (Intensité de réaction en
rapport avec gravité maladie)

Nouveaux moyens

A. d'agglutination du rickettsia

- Castagnola

- Durand et Giroux -

- Allemands -

Health Reporting

INDEXED

UNITED NATIONS
RELIEF AND REHABILITATION ADMINISTRATION

H 4/18/1

~~CONFIDENTIAL~~
~~CONFIDENTIAL~~

Res. No. 423

PM/L/413

PM/W/214

Hotel Bristol,
Warsaw.

RES/BMT

21st March 1946

To: UNRRA Headquarters,
Washington, D.C. (3 copies)
From: ~~European Regional Headquarters, UNRRA.~~ (5 copies)
London.
From: Chief,
UNRRA Mission to Poland.

RECEIVED
25 MARCH
U. N. R. R. A.
MAIL UNIT

Subject: Health Department's Report for February

Attached, hereto, is the Health Department's Report (Dr. Holle)
for February, as mentioned in paragraph 12 of the Monthly Report
despatched to you on 8th March, 1946.

M. M.

Attachments:

L. Goodman

*Copies have been sent to
Col. Aselmeier
Gen. M. P. Kelly + Mrs. Trickett
to Stuart
to Boggy
Mrs. Adell
Extract to Red Cross
L. M. 2/3*

INDEXED

UNITED NATIONS
RELIEF AND REHABILITATION ADMINISTRATION
MISSION TO POLAND
WARSAW

H 4/8/1

RECEIVED
22 MAR 1946
U. N. R. R. A.
MAIN UNIT

Res. no. 399

19th March 1946

PM/W/201
PM/L/402

TO: European Regional Office (Health Division)

FROM: UNRRA Mission to Poland

SUBJECT: Report of Activities of Health Division,
UNRRA Mission to Poland, for month of
February, 1946

There is transmitted a detailed report of activities of this Division for the month of February, 1946. It is regretted that this report was considerably delayed on account of the lack of clerical assistance and it is hoped that in future, monthly reports will be transmitted more promptly.

The report of nursing activities is unduly long and is more in the nature of a detailed trip report than a condensed monthly report.

H. A. Holle

✓
Att.

H.A. Holle
Chief Medical Officer

103

EXTRACT FROM HEALTH DIVISION

MONTHLY BULLETIN FOR DECEMBER

Letter dated 15th March, 1946, from Dr. A. Hughes Bryan, M.D., Acting Director of Health, WASHINGTON, to Dr. N. M. Goodman, Health Division, UNRRA, E.R.O.

Ref. A.2463, Filed on H.9

Extract for H.4/18/1

Poland

Miss Stephanie Zloch, Hospital Nursing Consultant, arrived early in the month. Miss Muriel Doherty who has been serving as matron of the hospital at Belsen is expected early next month to be Public Health Nursing Consultant.

Dr. Holle, in his report of his field visit to the provinces of Lublin and Cracow in company with Dr. Sawyer and Dr. Tubiasz from November 27 to December 2, states that typhoid fever is prevalent in the province of Lublin and that about 500,000 persons have been inoculated against it. The highest incidence of typhus is in the districts of Bilgoroj in the south east where Poles arrive from Russia on their way to the new territory in the west. At present they are being kept here for three weeks and are routinely dusted with DDT. Routine inspections and dustings are also being carried out in the schools: 15% of the children have been found to have body lice and many more have headlice. A vaccine plant which produces both the Weigl vaccine from lice and the mouse lung vaccine is located in Lublin. It is reported that in 1938 two communes consisting of 21,000 persons in the district of Sarny were inoculated against typhus and although 1,000 cases of typhus developed in other parts of the district none developed in the inoculated communes.

There are 21 district health centers, each with one medical officer and one nurse, in the Lublin province which has a population of approximately 2½ millions. There are also two communicable diseases hospitals and 34 general hospitals with 4,000 patients, of which 354 are for T.B. patients. Health personnel in the province number 280 physicians (compared with 520 before the war), 180 nurses (less than before the war), 320 midwives (about the same as before the war), 120 Sanitary Inspectors and one Sanitary Engineer.

EXTRACT FROM HEALTH DIVISION

MONTHLY BULLETIN FOR DECEMBER

Letter dated 15th March, 1946 from Dr. A. Hughes Bryan M.D., Acting Director of Health, WASHINGTON, to Dr. N.M. Goodman, Health Division, UNRRA, E.R.O.

Ref. A.2463, Filed on H.9

Extract for H.4/18/1

Poland - continued

In the province of Cracow, while still a problem, typhoid fever is somewhat lower in incidence than was the case this summer. The improvement is attributed to the activities of an anti-epidemic column in each of the sixteen districts. Each column consists of one physician, several inspectors (usually 4 to 6 but sometimes as many as 12) and one nurse, equipped with a portable disinfecter, a portable shower, and handpumps for dusting clothes with DDT.

Typhoid fever cases are said to occur mostly in DP's coming from the West or East who have been infected outside the province. A broad program of inoculations is being carried out using a very concentrated vaccine made in Poland.

The diptheria rate is quite high but at present no immunization measures are being carried out. Approximately 70 new cases of tuberculosis are being reported weekly, most of them found among persons returning from Germany: prior to the war only 7 - 10 new cases were reported weekly.

The population of the province is 2,300,000 and Cracow, the capital and largest city, has a population of 300,000. Before the war there were 1,200 physicians in the province, now there are only 900: at present 500 nurses have been registered as compared with 784 before the war but registration is not yet complete: the number of midwives, 783 is about the same as existed before the war. There has also been a reduction in the number of hospitals from 53 to 47 since the war, most of which have suffered war damage. At present there are 7,700 hospital beds in the province as compared with 8,300 before the war but many of these beds are in hospitals which are extensively damaged and which lack heat, mattresses, linens, etc.

EXTRACT FROM HEALTH DIVISION

MONTHLY BULLETIN FOR DECEMBER

Letter dated 15th March, 1946, from Dr. A. Hughes Bryan M.D.,
Acting Director of Health, WASHINGTON, to Dr. N. M. Goodman,
Health Division, UNRRA, E.R.O.

Ref. A.2463, Filed on H.9

Extract for H.4/18/1

Poland - continued

Tuberculosis hospitalisation facilities are 1,139 beds in sanatoria in the mountains of the southern part of the province near the Czechoslovakian border and in one municipal tuberculosis sanatorium in the city of Cracow: there are also 54 tuberculosis dispensaries in the province.

At present there are no mental hospitals but a 350 bed unit is about to open at Kobierzyn on the outskirts of Cracow. Health centers number 38 as compared with 51 before the war but twenty more are in process of organisation. Most of the out patient services are conducted in these centers. Fifty-four VD clinics are being operated, 7 directed by specialists and 47 by general physicians.

Dr. Sawyer and Dr. Holle visited Dr. Weigl's typhus vaccine laboratory and observed lice being individually injected with virus and later dissected for the production of typhus vaccine. Usually the lice die within five days, after which they are soaked in phenol solution and dissected to recover the anti genic material. Approximately 100 lice are necessary to produce enough vaccine for one inoculation against typhus, consisting of three doses. One laboratory worker can inject approximately 2,000 lice per day.

A visit was made to the office of the National Social Insurance Facility which administers the scheme for the city of Cracow and two other districts within the province. Every employee is insured against unemployment, old age and sickness. The employers now pay the whole contribution: before the war part was paid by the employee. The scheme also covers the bread-winner's wife and family to the age of 16 for medical benefit, and maternity cases are entitled to hospitalization, in the Association's own hospitals or by arrangement with other hospitals. The several physicians in the scheme are required to spend five hours per day in treating patients. Less than 1% of the proceeds of the scheme is used for preventive work. The scheme is

(continued from over-leaf - "The scheme is")

self-supporting but is controlled by the Government. The number of insured persons is now 75,000 as compared with 175,000 during the German occupation.

Continued -

EXTRACT FROM HEALTH REPORT

MONTHLY BULLETIN FOR NOVEMBER

Letter dated 4th January, 1946, from Dr. W. A. Sawyer, M.D.,
Director of Health, WASHINGTON, to Mr. George S. Mooney,
Executive Secretary, UNRRA, E.R.O.

Ref. A.6, Filed on H.9

Extract for H.4/18/1

Medical supplies are arriving satisfactorily and hospital equipment, beds, mattresses, linens, blankets, etc. are now in use in some Polish hospitals. These hospitals form a sharp contrast to those which have not yet received UNRRA supplies and where the patients are lying on straw filled bags and are covered by the clothing in which they arrived at the hospital.

UNITED NATIONS

H4/18/1 Warsaw.

Des. No 399.

PM/W/201

19th March.

PM/W/402.

Letter to Dr Goodman
from Dr Holte enclosing
report of Health activities
for month of Feb 46.

Now being re-typed for
extracts - in Mr Reading's
office.

19th February, 1946

To: Mr. C. M. Drury
From: Dr. H. A. Holle
Subject: Report on Field Trip to Krakow from February
15th - 19th.

A field visit was made to Krakow for the purpose of accompanying Lt. Colonel David M. Greeley, Consultant on Typhus Control activities, on one of his field visits. Dr. C. M. Begg, Communicable Disease Control Officer, who recently arrived from England for duty in the Health Division, also accompanied us for the purpose of gaining first-hand knowledge of field conditions in Poland. Dr. S. Tubiasz of the Health Division and Dr. Zakrzewski of the Polish Ministry of Health were members of the field party, acting as interpreters and making the necessary arrangements for future lectures and demonstrations of Dr. Greeley during the remainder of his stay in Poland.

On Saturday morning in the absence of Dr. Anselm, Provincial Health Officer, a conference was held with Dr. Westrych, Communicable Disease Officer, and arrangements were completed for Dr. Greeley to address a large group, including disinfectors, epidemiologists, physicians, nurses and other Public Health workers, on Tuesday afternoon at six o'clock on the subject of the effective use of D.D.T. louse powder in the control of typhus fever. At the same time, a program was laid out of our activities during the remainder of our stay in Krakow. On Saturday afternoon Doctors Greeley and Begg visited the St. Lazarus Hospital to inspect the communicable disease wards of this 2,500-bed institution. Inasmuch as the Professor of Infectious Diseases reported an unusually high incidence of blood stream infection with Shiga's Bacillus in his cases of dysentery, cultures of organisms recovered from the blood of patients were brought back to Warsaw for check at the State Institute of Hygiene and with the laboratories of the United States Army in Europe.

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On Saturday evening all of us were invited for tea to the home of Dr. Eugene Brzezicki, President of the local Medical Society and Professor of Neuro-psychiatry at the University Medical School. Doctors Brzezicki and Supniewski had the unique experience of being incarcerated within the same cell block in a German concentration camp for several months near Berlin.

In order to become acquainted with the personnel of the Krakow Branch of the State Institute of Hygiene, Dr. Begg visited that institution in company with Dr. Zakrzewski, and made valuable contacts for his future work in the field of communicable disease control in Poland.

Dr. Supniewski, Dean of the Krakow Medical School, Dr. Anselm, Provincial Health Officer, and Dr. Zakrzewski were our guests at luncheon on Monday. At this time, Dr. Supniewski again stressed the great need of the hospitals connected with this teaching institution which has not been met from UNRRA sources, and the Chief Medical Officer once more re-assured him that a 1,000-bed hospital purchased from United States Army surplus property stocks was actually destined for Krakow University. Inasmuch as this episode has been repeated a number of times, it is hoped that it will not be necessary for us to return to Krakow again empty handed.

Arrangements were made for Dr. Greeley and Dr. Begg to visit Dr. Weigl's laboratory where typhus vaccine is being produced in small quantities by direct inoculation of individual lice. This visit was made on Tuesday morning.

Miss Ann Rozeck joined us in Krakow on Saturday, and her services were of extreme value in making current field notes and in the preparation of prompt field reports for the members of our party.

An interesting incident occurred during the return of Dr. Tubiasz, Miss Rozeck and the Chief Medical Officer on Tuesday evening. At about 6:45 p.m. between Rawa Mcz. and Mszczonow about seventy-five kilometres from Warsaw, we were stopped by three Russian soldiers, including one

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officer, who stood in the middle of the highway and pointed submachine guns at our vehicle until we stopped. They explained to Dr. Tubiasz in Russian that we were expected to transport one of their number for a distance of some twenty kilometres toward Warsaw. However, two of them got into the car instead of one. As we continued on our way, the Russians became conversational and told Dr. Tubiasz that they were in possession of written authority from the Polish Government to stop and utilize any and all vehicles for their purposes when necessary. Moreover, they added that even if they had wanted to go in the opposite direction, we would still have been obliged under their authority to accommodate them. They did not volunteer to show us the written authority of which they spoke, and in view of the fact that we respected only the authority of their submachine guns, we did not question them any further; nor did we demand any additional credentials.

This matter is brought to your attention because it brings up an interesting situation which should probably be further investigated for the benefit of future travellers in UNRRA vehicles on the public highways of Poland. If the state of affairs, as described by the Russian lieutenant, is accurate, it is considered most regrettable, and it is felt that consideration should be given to the taking of steps ^{which} would eliminate the requisitioning of UNRRA vehicles through the use of military force. Our passengers were courteous in other respects and took their leave when we arrived at Mszczonow.

It should probably be mentioned that before we left Krakow on Tuesday morning, a brief visit was paid to the salt mine at Wieliczka. This mine is more than seven hundred years old and is still operated in quite primitive fashion. The Ministry of Health is making arrangements for the resumption of the manufacture of iodized salt in an attempt to reduce the incidence of goiter in Krakow Province. The manufacture of iodized salt was interrupted during the German occupation. A casual observation failed to reveal any widespread prevalence of occupational disease, but the miners claim that an increase in rheumatic conditions was present among them. The conditions of work, including salary and food allowances, were obviously unsatisfactory.

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UNITED NATIONS
RELIEF AND REHABILITATION ADMINISTRATION

Des. No. 234

PM/L/307

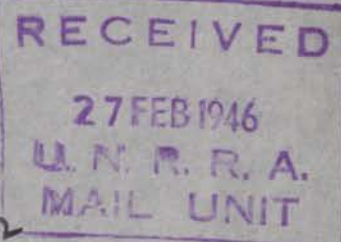
Warsaw, 20th February 1946

H
4/18/1

VIA AIR MAIL

To: Health Division
UNRRA, European Regional Office.

Attention: Dr. N. N. Goodman,
Director of Health.



From: Dr. H. A. Holle,
Chief Medical Officer,
UNRRA Mission to Poland.

Subject: Field Report Covering Visit to Krakow.

LB

There is transmitted, herewith, for your information a copy of the above-mentioned field report.

Enclosure 1 ✓
cc: Washington

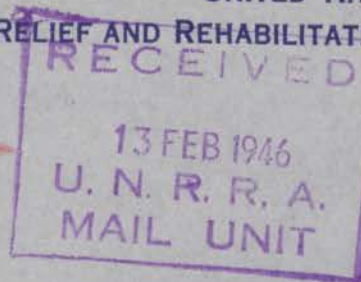
97

UNITED NATIONS
RELIEF AND REHABILITATION ADMINISTRATION

Des. No. 149

PM/L/259

VIA AIR MAIL



6th February, 1946

H.A./18/1
INDEXED

TO: Dr. N. Goodman,
Director, Health Division,
E. R. O.

FROM: Dr. H. A. Holle,
Chief Medical Officer,
UNRRA Mission to Poland

D. Street. To notify G.
" Martin ✓ " (3) / May
Miss Harris ✓ " (2) / May

Return to me H.

14/2

Dear Doctor Goodman,

Request

There is transmitted herewith, for your
information, a copy of the monthly report of
activities of this division for the month of
January 1946.

Sincerely yours,

H. A. Holle

H. A. Holle,
Chief Medical Officer,
UNRRA Mission to Poland

Copy sent to Washington.

EXTRACT FROM HEALTH REPORT

MONTHLY BULLETIN FOR NOVEMBER

Letter dated 4th January, 1946, from Dr. W. A. Sawyer, M.D.,
Director of Health, WASHINGTON, to Mr. George S. Mooney,
Executive Secretary, UNRRA, E.R.O.

Ref. A.6, Filed on H.9

Extract for H.4/18/1

Medical supplies are arriving satisfactorily and hospital equipment, beds, mattresses, linens, blankets, etc. are now in use in some Polish hospitals. These hospitals form a sharp contrast to those which have not yet received UNRRA supplies and where the patients are lying on straw filled bags and are covered by the clothing in which they arrived at the hospital.

14th December 1945

TO: Brigadier C. M. Drury
FROM: Dr. Henry A. Holle
SUBJECT: Report of Field Visit to Lublin and
Cracow from November 27th to December
2nd, 1945.

In company with Dr. Sawyer and Dr. Tubiasz, a field visit was made to Lublin on the 27th of November for the purpose of making a rapid survey of health conditions in that province.

In our preliminary conversation with Dr. Wladyslaw Kwit, the Provincial health officer, the following information was obtained.

The population of Lublin Province is approximately two and a half million. The Province is divided into fifteen counties or Powiaty. Dr. Kwit has served as the Provincial health officer for two years. There are twenty-one district health centers, each of which have on duty one medical officer and one nurse. There are two communicable disease hospitals in the Province - one at Tarnograd and one at Siedlce. Thirty-four hospitals are located in the Province and comprise 4,000 hospital beds. In regard to beds for tuberculosis patients, the distribution is as follows:

Siedlce	-	40
Chelm	-	30
Zamasc	-	40
Biala	-	40
Pulawy	-	100
Lublin	-	104

These beds are not sanatoria but wards in general hospitals. The hospital at Pulawy is not functioning

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in its former building because of the extensive looting by Russian soldiers.

Dr. Kwit confirms our former observation that the Germans systematically liquidated the inmates of mental hospitals. In the Province, 700 were shot at Chelm, including forty Polish officers who were hiding in the Institution. A new mental hospital has been completed near Lublin with a capacity for one hundred patients. Patients with mental disease are still in evidence, according to Dr. Kwit.

There are only 280 physicians in the Province, as compared with 520 before the war. In Lublin, there are 130 physicians, as compared with 100 before the war, but this is explained by reason of the fact that the new medical school is in operation there.

In regard to nurses, there are 180 in the Province, which is less than before the war. There are also 320 midwives, which is about the same number as before the war. There are 120 sanitary inspectors and one sanitary engineer.

Typhus Fever.

Typhus fever is worse in the District of Bilgoraj which is to the southeast. Poles arrive from Russia at this point on their way to the new territory in the west. At the present time, they are kept here for three weeks, and are routinely dusted with D.D.T. powder. According to Dr. Kwit, D.D.T. powder is now being used in schools where routine inspection is done for lice. Since no hand pumps are available, the D.D.T. powder is being applied by hand. When head lice are found, the whole child is dusted. About fifteen percent of the children have body lice, but many more have head lice. A vaccine plant is located in Lublin, which produces both

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the Weigl vaccine from lice and the mouse lung vaccines. In 1938 in the District of Sarny, two communes, consisting of 21,000 persons, were all vaccinated against typhus. In spite of the fact that 1,000 cases of typhus developed in other parts of the District, no cases developed in the vaccinated district of these two communes.

Typhoid Fever.

Typhoid fever is prevalent within the Province, but occurs mostly in persons moving from the West to the East. About 500,000 persons have been immunized against typhoid in this Province.

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H23/H/18

Medical Supplies.

Medical supplies from UNRRA have reached the Province. Among them were aspirin, sulfadiazine, 200 beds, D.D.T. powder, blankets and diphtheria anti toxin. The greatest needs are sheets, pillows, D.D.T. pumps, diphtheria toxoids for immunization, Arsenicals and Penicillin.

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Majdanek.

During our visit in Lublin, Dr. Sawyer and I were shown the large murder camp at Majdanek which is located a few kilometres from the City, and where it is estimated that two and a half million people were killed by the Germans by various methods during the war.

Lublin Medical School.

The Lublin Medical School is a new institution. Dr. Felix Shubiszewski is the Dean, and Dr. Konstanty Starwinski is Director and Professor of Entomology. The School is not yet fully under way. The building which has been allocated was formerly a famous Jewish Academy, and a number of the basic subjects will be taught here. A special building is used for anatomy. This building is located at the intersection of several

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streets like a county court house. The clinical subjects are taught at one of the hospitals, and the lecture rooms have benches without back rests. For the facilities available, the school is obviously overcrowded with students. Apparently, the school authorities do not have absolute control over admissions because the Polish Army sent fifty additional candidates, whom they were obliged to take over and above the already overcrowded class. All the facilities of the school are grossly inadequate.

Lecture of Dr. Sawyer:

Dr. Sawyer delivered a lecture on "The Control of Malaria" before the medical students and faculty, together with members of the local medical profession. The lecture was very well received.

Visit to the District Hospital at Pulawy.

At Pulawy, after we had paid our respects to the Governor of the Province, we proceeded toward Cracow, but stopped en route to visit the District hospital at Pulawy. The hospital is located in a hotel building because the former building was badly damaged by Russian troops who occupied it. Dr. J. Sowiakowski is the Director of the 120 bed institution. One hundred beds have so far been provided by UNRRA, together with mattresses. However no sheets or pillows have been received, and only sixty blankets. There is no microscope in the hospital and no operating room light. Upon questioning, it developed that attempts to prevent the introduction of vermin through incoming patients are feeble. Patients are given a tub bath on admission, and garments are stored in a special room, but there is no use of D.D.T. powder.

VISIT TO CRACOW PROVINCE

Cracow University - School of Nursing.

The total number of nursing students at this institution is 140, as compared with 120 before the war. The Director is Miss Anna Rydel, and the

Associate Director is Miss Theresa Kulczynska. The course of instruction covers a period of two and a half years, but it is planned to add a six months' course in midwifery making a total of three years. The institution is handicapped on account of the lack of space and overcrowding of students. There is also difficulty in obtaining food and clothing for the nursing students.

Cracow Medical School - Department of Infectious Diseases.

A short visit was made to the Department of Infectious Diseases, including the hospital through which we were shown by Professor Joseph Kostrzowski, the Director. A typical case of typhus fever was shown to us on the wards. As was the case in many other Departments, there was a great need for bed linen and other hospital equipment.

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Cracow University - Medical School, Department of Dermatology and Veneriology.

The Director of this Department was Dr. Franciszek Walter who showed us through his Department, and demonstrated the difficulties under which he was teaching with too many students and too little equipment of all kinds.

Dr. Sawyer and I had as our guests for lunch Dr. Supniewski, Dean of the Medical Faculty, and the priest who was our guide in our visit to the Cracow Castle.

In the evening, I was briefly interviewed by Katarzyna Kowalska of Pap, in regard to the UNRRA Health Programme, and in connection with Dr. Sawyer's visit to Poland and to Cracow.

Visit to Provincial Health Department.

Dr. Anslem, Provincial Health Officer, was out of the City, but Dr. Wojcikiewicz, the Deputy

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Health Officer, was present together with Miss Wilcozynska, the Chief Nurse. In response to our questions, it was stated that no beds or mattresses have, as yet, been received in Cracow, and that distribution of medical supplies within the Province has been limited to hospitals and health centers. No distribution has been made to pharmacies.

Commissariat of Epidemics.

Originally, the Commissariat of Epidemics was organized within the Ministry of Health in Warsaw, and established Branch offices throughout the Provinces. These offices were operated more or less separately from the Provincial Health Offices until recently when a tendency was begun to include them in a general way under the administrative supervision of such Provincial Health Departments. As it stands, therefore, the Director, Dr. Westrych, has a separate office, but his functions are being integrated with those of the Provincial Health Department under Dr. Anslem.

Typhus Fever.

While still a problem, typhus fever is somewhat lower in existence than was the case this summer. This reduction in the typhus problem is attributed by Dr. Westrych to the activities of an anti epidemic column in each of sixteen districts. Each column consists of one physician and several inspectors, usually four to six, but sometimes as many as twelve, together with one nurse. The equipment assigned to each group consists of a portable disinfector, a portable shower and hand pumps for dusting clothes with D.D.T. powder. The method of attack, as described, consisted of the isolation of patients and the dusting of clothes of contacts after the latter had been bathed and their rooms disinfected with sulfur. If only one case was involved, only the persons of adjoining houses were treated, but if there were several

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cases, the whole village or neighborhood was processed. In a village near Nowy T6rg, vaccination with Weigl's vaccine has been done on a fairly large scale. There is an additional endemic focus in this Province from which have been reported a thousand cases of typhus.

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H 23/1/18

While this method might have yielded some favourable results, it is difficult to imagine that the reduction in typhus can be attributed to these measures. It is believed that the stimulation achieved by our visit to Cracow and by Dr. Sawyer's lecture on "The Control of Typhus" will yield more productive results in the future.

Typhoid Fever.

It is the contention of Dr. Westrych that most of the typhoid fever cases occur in displaced persons who have come from the West or from the East, and whose infection occurred outside of the Province. Considerable immunization against typhoid is being done with a very concentrated vaccination made in Poland.

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H 23/1/18

Diphtheria.

The diphtheria rate is quite high, but up to the present time, no immunization measures are being carried out against this disease.

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H 23/5

Visit to Weigl's Vaccine Laboratory. (Typhus).

We were kindly shown through this laboratory by Dr. Weigl, and we observed lice being individually inoculated with virus, and later being dissected for the production of typhus vaccine. Usually, the lice die within five days after which they are soaked in phenol solution and dissected to recover the antigenic material. Approximately one hundred lice are necessary for one immunization against typhus, consisting of three doses. One laboratory worker can inoculate approximately

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2,000 lice per day. Dr. Weigl doesn't feel that Cox's egg yolk vaccine is effective against the European typhus.

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National Social Insurance Offices.

A visit was made to the offices of the National Social Insurance facility. Dr. Botho, the Deputy Chief Medical Officer, conducted us through the building. The insurance scheme is organized on a territorial basis. This particular office administers the City of Cracow and two other districts within Cracow Province. Every employee is insured. Before the war, a part of this insurance was paid by the employee, but now the employer pays all of the insurance. The insurance is against unemployment, old age and sickness. The system is self-supporting, but is controlled by the Government. The bread winner is covered together with his family up to the age of sixteen years. Maternity cases may come to the hospital. The Association has its own hospital, but it is not large enough to accommodate all patients, and, therefore, other hospitals are paid to accept them. The number of insured persons during the German occupation was 175,000, as compared with 75,000 at the present time.

Less than one percent of the proceeds of the insurance scheme is used for preventive work. In regard to medicines, two pharmacies or "apteka" are located in the City. The several physicians in the program are required to spend five hours per day in treating patients. The City is divided into districts, and patients go to physicians' offices, and go to the pharmacy for drugs.

Lecture by Dr. Sawyer to the Cracow Medical Society.

Dr. Sawyer delivered a lecture on "Malaria, Typhus, and Influenza", which was very well received and was attended largely by professional members of the local medical society. After the lecture, we attended a dinner in Dr. Sawyer's honour, given by Dr. and Mrs. Supniewski.

Warsaw
14 December 1945.
haholle/amr

U.N.R.R.A.
EUROPEAN REGIONAL OFFICE
ROUTING SLIP

26 JAN 1946

11 Min Radio 939
21 Special
TO: Registry
FROM: W. A. Miller

The attached is sent to you for the following action as indicated by check mark:

- ☐ 1. Comments and return to _____
- ☐ 2. Read and forward.
- ☐ 3. Prepare reply for _____
signature.
- ☒ 4. For your information.
- ☐ 5. Take necessary action
- ☐ 6. For filing.
- ☐ 7. Other action _____

1 placed extracts of this on: WE 81/1; WE
86; WE 71/1

UNITED NATIONS
RELIEF AND REHABILITATION ADMINISTRATION

Des. No. 110

PM/L/ 95

WARSAW, 11 December 1945

H 4/18/1
INDEXED

TO: Health Division
UNRRA,
European Regional Office.

Attention: Dr. N.N. Goodman,
Director of Health.

FROM: Dr. H.A. Holle
Chief Medical Officer,
UNRRA Mission to Poland.

SUBJECT: Field Report Covering Visit to the
Provinces of Cracow and Katowice.

RECEIVED
17 DEC 1945
U. N. R. R. A.
MAIL UNIT

There is transmitted herewith a field report which was written upon my return from a field visit to the Provinces of Cracow and Katowice.

It is hoped that copies of these field reports may be transmitted with more promptness in the future, if and when a permanent secretary has been obtained for the Health Division.

H. Holle

Enclosure ✓

cc: Washington

Reports and Statistics Branch: 20.12.45

Copy to: Dr. Goodman

Dr. Stuart

Mr. Nelson.

Copy

15th November, 1945.

To: Brigadier C. M. Drury,
From: Dr. Henry Holle
Subject: Field Visit to Provinces of Cracow and
Katowice, October 29 to November 3, 1945.

Dr. Tubiasz and the writer paid visits to the Provinces of Cracow and Katowice for the purpose of obtaining first hand information in regard to the health conditions there, and in regard to the distribution of UNRRA medical supplies within these areas. An inspection was also made of the University Medical School in Cracow and of several hospitals in each Province.

The Province of Cracow.

General Health Information

The Province contains a population of 2,300,000. Cracow is the capital and largest city with a population of 300,000. Dr. Oscar Anselm is the Provincial Health Officer. The Province is divided into 15 Powiaty or districts.

Before the war there were 1,200 physicians in the Province. Now there are only 900. There has also been a reduction in the number of hospitals from 53 to 47 since the war. Most of these have suffered war damage. At the present time there are 7,700 hospital beds in the Province, as compared with 8,300 before the war. Actually, however, this number gives a false picture of bed availability. Many beds are in hospitals which are extensively damaged and which lack such facilities as heat, mattresses, linens, etc. The distribution of hospitals is quite uneven. Within the city of Cracow there are 4,107 hospital beds, a rate of 137 beds per 10,000 population. In twelve of the fifteen districts, however, the rate is only 23 beds per 10,000 population.

In regard to tuberculosis hospitals, there are 1,139 beds for tuberculosis patients in Cracow province. Nearly all sanatoria are located in the mountains of the southern part of the Province at Zakopane which is near the Czechoslovakian border. One municipal tuberculosis sanatorium is located in the City of Cracow.

.....

15 November, 1945.

At the present time there are no mental hospitals in the Province, but a 350 bed unit is scheduled to open at Kobierzyn on the outskirts of Cracow about December 1. This was originally a 1,000 bed institution, but the buildings and equipment suffered greatly during the war. In this connection, it should be stated that the Germans made it their practice to liquidate systematically all inmates found within mental hospitals. There is little doubt that Poland has a much lower incidence of advanced mental disease than before the war. Suicides are practically non-existent in Poland to-day in spite of circumstances which are extremely depressing for millions of people.

There has been a reduction in the number of nurses, as well as physicians, although exact figures are not available. There were 784 nurses registered in the Province before the war. Five hundred have been registered up to the present time, but registration has not been completed. The standard of training for nurses has deteriorated to a considerable degree. Most of the better trained nurses are going westward to the newly acquired territory and are being replaced by poorly trained personnel from the east. Two training schools for nurses are in operation, one at the University for 80 students, and the other in a Catholic institution. A third training school for nurses is in the process of being organised by the National Health Insurance Organisation. These training schools require a high school diploma for admission and have a curriculum lasting $2\frac{1}{2}$ years.

Seven hundred and eighty three midwives are registered within Cracow Province. This represents about the same number that existed prior to the war. The standards of training are rather low.

One medical school, the University of Cracow, is located in Cracow.

There are 38 health centers in the Province, as compared with 51 before the war. Twenty more are in the process of organisation. In this connection, it should be mentioned that each Powiat or district has at least one health center. The Ministry of Health plans to increase the number of these districts a great deal so that eventually there will be at least five in each district.

Most of the out patient services are conducted in these health districts, although in the City many of them are operated by the University. In the field of

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15 November, 1945

Venereal disease control 54 clinics are being operated at which Venereal diseases are treated free of charge. Seven of these clinics are directed by specialists, while forty-seven are directed by general physicians. In Poland out patient clinics are called Ambulatoria. They are conducted on specified days in much the same manner as in the United States.

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Health Problems

Typhus: The peak of typhus cases was reached in March when approximately 100 cases per week were reported. At the present time, only 4-5 cases per week are being reported. Dr. Anselm has fears for this winter on account of the shortage of housing. No typhus vaccine has been received from UNRRA, but the locally made Weigl's vaccine is available. Notification has been received that D.D.T. powder is available in Warsaw for Cracow, and it will be transported to the Province within the near future, together with hand pumps for dusting.

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Typhoid Fever: Approximately 100 cases of typhoid fever weekly are being reported. Fifteen to eighteen of these are within the City itself, in spite of a safe water supply. The Health Officer blames this on the breakdown in sanitation facilities. He stated that before the war 23 trucks were in service in the sanitation department, now only two are available and they are obviously unable to take care of garbage disposal.

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H23/1/18

Dysentery: During my previous visit to Cracow in August from 30 to 50 cases of dysentery were reported weekly. At the present time, practically no cases are being reported.

Tuberculosis: Approximately 70 new cases of tuberculosis are being reported weekly. Most of these cases are being found among persons returning from Germany. Prior to the war only about 7-10 new cases were reported weekly. In view of the fact that sixty deaths from tuberculosis are being recorded weekly, a good impression of the extent of the tuberculosis problem may be obtained. The 54 tuberculosis dispensaries are operating in the Province mainly in connection with the health centers.

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Diphtheria: About 30 cases of diphtheria per week are being reported. Immunization was required prior to the war and during German occupation. Inasmuch as all German laws and regulations have been nullified, immunization against diphtheria is not now required, but necessary steps are being taken to re-establish this requirement as a Public Health measure.

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H23/5

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15 November, 1945.

Venereal Diseases: It is evident to all physicians that there has been a marked increase in Venereal diseases since the liberation of Poland. Sulfathiazol and arsenicals are now available in amounts sufficient for an attack on Venereal diseases, and as previously stated, 54 treatment clinics are scattered throughout the Province. Penicillin is not yet available in sufficient amounts to permit of its use in treating gonorrhea.

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UNRRA Medical Supplies: Three trains of UNRRA medical supplies have been received in Cracow, all of them were shipped from the port of Constanza. The first of these arrived on the 1st of June, the second on the 18th of August, and the third shipment arrived in September. On account of the fact that the shipment of medical supplies from Constanza was not intelligently planned, it was necessary to redistribute many of the items from the several points to which shipment was made. For instance, the second shipment to Cracow contained large quantities of ether which had to be redistributed. Some time ago, I pointed out that large quantities of lysol had been sent to Lodz, and in turn had to be redistributed from that point.

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on H40

Many of the boxes of medical supplies were damaged in transit and some of them were empty. Detailed information in connection with these deficiencies presumably have been reported to the Government, and will be covered in subsequent reports to UNRRA. The distribution of medical supplies is made to hospitals, health centers and health insurance organizations on the basis of need and without discrimination. The supplies so far received are grossly inadequate and the needs for large amounts of additional supplies are very evident. The most urgent needs, as stated by the Director of Health, are fifteen ambulances, 30 trucks, 50 microscopes, X-ray equipment and various insundry other supplies and equipment items. A list of these needs has been transmitted to the Ministry of Health.

University of Cracow: I was conducted through the Medical School and several hospitals connected with it by Dr. John V. Supniewski, Dean of the Medical Faculty, who was a former Fellow of the Rockefeller Foundation, and who speaks English quite well.

The Medical School in Cracow is called the Faculty of Medicine of the Jagellonian University. It has been in existence since 1433. In spite of the fact that it has suffered great losses during the war, it is still the

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15 November 1945.

only medical school in Poland which functions more or less normally at the present time. During the German occupation, the School of Medicine was closed, but lectures were carried on in an underground fashion. Regular classes have been resumed since the 5th of April 1945. During this year 1,012 medical students were in the school, of which 270 are doing their first year's work. Prior to the war only 125 students per year were admitted. This heavy load necessitates a duplication of lectures by faculty members who are working very long hours.

Only slight losses to buildings were suffered as a result of military action. One of the medical hospitals was damaged to the extent of having the roof blown off and the window panes blown out as a result of bombings. Also the Institutes of Histology, Hygiene, Biology, Bacteriology, Embryology and Laryngology were damaged as a result of structural changes made by the Germans. During the occupation much of the scientific equipment was removed by the Germans. The Institute of Bacteriology was completely robbed and its equipment and library were transported to Neuremberg which is in the American zone. Application has been made to the American Army for the return of this equipment. The equipment of the Pathological Institute is also in Neuremberg.

The scientific staff of the Medical Faculty is more or less complete, in spite of the murder of some of the professors. No mention was made by the Dean in regard to need for visiting professors or lecturers, but Dr. Supniewski stated that the question of Fellowships abroad had been discussed in detail with Dr. Bauer of the American Red Cross and Rockefeller Foundation. The principle needs of the School, as stated by the Dean, are as follows:

- a) American and British scientific literature and books.
- b) Scientific apparatus necessary for didactic work to replace that stolen by the Germans. At least 150 microscopes are needed as soon as possible for instruction in histology and bacteriology.
- c) X-ray and diathermic apparatus in the hospitals.
- d) Beds, mattresses and bed linen which are in very short supply. It is necessary to place two and sometimes three patients in one bed in the crowded wards.

.....

Miss
Penna
to see.

15 November, 1945.

- e) Kitchen and other utensils in hospitals.
- f) Medicines and dressings.
- g) Two four ton trucks and one ambulance.

The needs of the hospitals connected with the Medical School may be met out of UNRRA supplies, but some of the other equipment necessary for teaching purposes would seem to be outside the scope of UNRRA relief and should be procured from private sources.

There is transmitted herewith a plea from the Medical Students Association for food and clothing which is self-explanatory and which illustrates the acute and destitute conditions under which students of higher learning are required to live in Poland.

copy for
WE 81/1
" 86
11/1

Field Visit to Zakopane

M. M. M.
26 JAN 1946

A field visit was made to Zakopane which is approximately 80 kilometres south of Cracow. Several institutions were visited and the first one of these was the Sanatorium of the Polish Red Cross. This tuberculosis hospital formerly had a capacity of 240 patients, now there are only 50 on account of the lack of equipment and supplies. As soon as replacements of looted materials can be effected, and repair of damage to installations in the building can be made, it is planned that 350 patients will be admitted. It is estimated by the Director, Dr. Ludwig Fisher, that six million zlotys will be required to rehabilitate this Institution. There are no linens, blankets or sleeping bags; mattresses, pillows and sheets are particularly needed. Also artificial pneumothorax machines are badly needed inasmuch as only one is available in the Institute. There is only one microscope and very little laboratory apparatus as most of it was removed by the Germans. The hospital authorities presume that the Polish Red Cross will re-equip this hospital but they would be very glad to receive medical supplies from UNRRA.

Sanatorium for Students: This is a modern institution built out of the proceeds of contributions from students all over Poland. It had 90 beds before the war, and is expected to have a total capacity of 180. The Director, Dr. Stephan Jasinski, stated that the Sanatorium was utilized as a German school during the occupation. The Germans made considerable renovations for this purpose and removed walls in order to make class rooms. Upon

copy of
WE 81/1
as above
M. M. M.

26 JAN 1946

15 November, 1945.

departing they took all movable equipment. **1**

General Hospital at Nowy Torg: This hospital is the Municipal or District hospital for the Powiat of Nowy Torg. Dr. Jan Przetoczniak is the Director. The institution has 110 beds and is a general hospital. Ten cases of typhoid were in the hospital at the time of my visit. No damage to the building or equipment was suffered as a result of the war, but six years of constant use without replacements has resulted in a great need for hospital linens and bedding. Also the X-ray equipment is badly needed inasmuch as no pictures can be taken with the obsolete Roentgen machine.

Province of Silesia

The Province of Silesia contains a population of 3,500,000. The capital is Katowice, and the Provincial Health Officer is Dr. Felix Presser.

General Health Information

Hospitals: There were 93 hospitals in the Province with a total of 13,308 beds as compared with 13,091 in 1939. However, since the boundaries of this Province have been changed no comparison with pre-war figures can be made. Two tuberculosis sanatoria are located in Silesia, one for children at Estebna. There were also three mental hospitals in the Province, one of which is now occupied by the Soviet Army. All of the hospitals, especially the communicable disease wards are very crowded.

Physicians and other Personnel: They have 778 physicians in Silesia. Approximately 400 nurses and 300 midwives have been registered to date, but registration has not been completed. There are no medical schools.

Health Centers: Sixty-one health centers are located in the twenty-two Powiaty or districts in Silesia. Forty-two Venereal disease clinics are operated at these health centers. **Copy on HHO**

Health Problems

Typhus: Approximately 30 cases of typhus fever are reported weekly in Silesia, as compared with approximately 100 cases in August during my previous visit. Ninety per cent of these are found in camps for Germans, where all the conditions favouring the spread of typhus may be found. **Copy on HHO**

Each Powiat or district health officer has on hand three

.....

15 November, 1945.

drums of D.D.T. powder for use in combatting typhus fever. While no typhus vaccine has been received from UNRRA, some has been received from Cracow.

Copy
on H23/1/18

Typhoid Fever: Approximately 300 cases of typhoid fever weekly are being reported in the Province, as compared with 500 cases during my previous visit in August. Most of these cases occur in the West, and many of the original cases were imported from Germany, and subsequently the infection was spread to others by direct contact.

Copy on
H23/4/18

Tuberculosis: From 50 to 60 new cases of tuberculosis are reported weekly. As is in the case in Cracow, a large percentage of these patients are persons who have recently returned from Germany. Fifty-nine dispensaries are located throughout the Province in the several health centers. There is a need for artificial pneumothorax equipment and X-ray equipment in combatting the tuberculosis problem.

Copy on
H23/2/18

Diphtheria: Sixty to sixty-five cases of diphtheria are being reported weekly. There is need for diphtheria antitoxin.

Copy on
H23/5/18

Venereal Diseases: As is the case in Cracow, Venereal diseases in Silesia are quite rampant. Sulfathiazol is now available for treatment purposes.

Infant Mortality: Infant mortality is unusually high, and it was stated that 30% of infants die before reaching the age of one year. This high infant mortality rate may be ascribed to the almost complete lack of milk and to the poor sanitary conditions of life among the vast majority of the people.

UNRRA Medical Supplies:

Five shipments of medical supplies, totalling approximately 65 tons, have so far arrived in Silesia. The first of these came in June and the last one, consisting of one car, arrived four days prior to my visit. It was again stated that the contents of many UNRRA boxes are not known prior to opening. Consequently, there is considerable delay in the distribution of these goods because it is the practice to ship them to Warsaw for proper cataloguing and distribution. In regard to the method of distribution, hospitals, health centers and

Copy
on H23/18

.....

sanatoria are the only recipients of medical supplies to date.

In connection with needs, Dr. Presser stated that the most acute specific need was for thirty additional ambulances inasmuch as five are only available in the Province at the present time. Also, only two trucks are available for health purposes throughout the whole Province, and there is a need for at least fifty.

copy
on H41/18

Visit to the Sanatorium at Estebna

A visit was made to the Sanatorium for Children located at Estebna approximately 120 kilometres south of Katowice. This Institution was completed in 1936 at the cost of seven million pre-war zlotys. It was used by the Germans during the occupation as a hospital for German women and children. As is their custom, upon departing the Germans removed everything in the way of instruments and scientific equipment, including clean bed linen. A few days later, the Soviet troops removed the dirty linen and some 8,000 metres of window curtains. However, aside from these deficiencies in scientific equipment, this is one of the finest institutions of its kind that I have ever seen; and with a relatively small amount of equipment and supplies, it should be restored to an effectively operated institution within a very short time. It is planned to re-open the hospital on November 15th with 200 patients, and gradually to increase the number to 500. To my great satisfaction I saw UNRRA supplies in this hospital, together with a new truck which had only been received the day before my visit.

Visit to Silesian Hospital at Cieszyn

A short inspection visit was made at this hospital which is under the direction of Dr. Jan Kubiasz, and consists of 500 beds. Only 250 are in operation at the present time because the Germans and the Russians took most of the equipment, and it has not yet been possible to replace all of it. Fortunately, the employees were able to hide a relatively small amount which has been enough to keep the Institution operating up to the present time.

Dictated 5 November, 1945.

CONFIDENTIAL

Appendix F.

Polonia Hotel

Warsaw

7 September 1945

Mr. Herbert H. Lehman
Director General
United Nations Relief and
Rehabilitation Administration
Dupont Circle Building
Washington, D. C.

RECEIVED
5 NOV 1945
U. N. R. A.
MAIL UNIT

Dear Mr. Lehman:

I am attaching herewith comments and recommendations on the health requirements program presented to you by the Polish Government to the Council Session in London in August. A copy of our Cable No. 104 on this subject is also attached.

In general, requests of the Polish Government for health needs as presented in London fall short of actual requirements. Dr. Holle suggests that the request be used for procurement justification, if necessary, but that shipments to Poland, after existing schedules through September have been completed, be made in response to detailed lists to be submitted monthly, with allowance for approximately four months before delivery, as discussed with Dr. Sollins in July. The September list is now almost completed. Only relatively small amounts of medical supplies shipped through Constanza have been received by the Ministry of Health, but more are arriving daily.

More catalogues are urgently needed, and we would appreciate any steps taken to expedite their delivery.

We recently received the name of Dr. Arthur Lejwa through a cable from ERO as a prospect for Medical Supply Officer, and the approval of the Polish Government has been requested. A Medical Supply Officer is urgently needed, and we hope all necessary preparations for his early departure are being made.

Sincerely yours,

M. Menshikov
Deputy Director General
Head of the Temporary UNRRA
Delegation to Poland

Enclosures - 2

Holle:Willson:gm
7 September 1945

CONFIDENTIAL

CONFIDENTIAL

Appendix F.

6 September 1945

TO: Mr. Menshikov
FROM: H. A. Hollo
SUBJECT: Comments and Recommendations on Health Requirements presented by the Polish Government of National Unity at the UNRRA Council Session in London.

General Comments.

It should be pointed out that the official request for assistance from UNRRA in the health field for the period ending 30 June 1946 was prepared by individuals outside of the Ministry of Health. The request, therefore, is quite general, and, in many ways, incomplete. There is little question in my mind that it falls far short in every category of the actual needs of Poland for the period mentioned. One does not need to struggle for arguments to justify the needs for vast amounts of medical supplies. There is present in Poland today a rapidly increasing incidence of typhoid, typhus, venereal diseases, tuberculosis; a scarcity of physicians; an almost complete lack of hospital equipment and medical supplies, with the exception of those supplies which have been shipped by UNRRA and of which only relatively small amounts have so far been received; a complete blackout on new medical knowledge since 1939.

Recommendations on items Requested and on Future Shipments of Medical Supplies.

It is recommended that the items mentioned in the request submitted be used only as a general guide for procurement purposes and not for shipping purposes. In accordance with my conversation with Dr. Sollins of the Supply Division, arrangements have been made with the Ministry in Warsaw for the preparation of a detailed list of needs each month. This list will be sent to Washington and London on or about the first of each month. Allowing sufficient time for procurement and shipment, it is hoped that receipt of the requested supplies might be expected in about four months. The September list is almost complete.

The above mentioned lists of needs furnished monthly will be all-inclusive and will be accompanied by explanations, when necessary. Subsequent lists will not duplicate items previously requested and not yet received. The preparation of the lists of medical supply requirements will be made on the basis of requests received from local health authorities who are charged with distribution in the several provinces and to a large extent will be based on consumption of existing supplies.

The Administration has already sent large amounts of medical supplies to Poland. Only relatively small amounts of such supplies have so far been received by the Ministry of Health for distribution. The remainder presumably are in the process of being shipped by rail from Constanza. Bills of lading or other records necessary for checking are not as yet available to the Ministry, and some confusion in the distribution of the early shipments is inevitable. It is evident, therefore, that, until the medical supplies from Constanza have been received and properly inventoried, it is hazardous for a reasonably accurate estimate to be made in regard to future needs without danger of waste in the case of some individual items. For this reason monthly requests are considered to be the best method for supplying Poland in the future from a medical standpoint.

CONFIDENTIAL

Appendix F.

POLISH GOVERNMENT OF NATIONAL UNITY

HEALTH

1. The number of physicians in Poland has been reduced from 12,500 in 1939 to some 7,000 in 1945. Between 3,000 and 4,000 physicians of Jewish origin were murdered by the Germans, some hundreds perished during, and as a result, of military operations from 1939 to 1941, a thousand or so are serving with Polish forces in the Western and Southern European areas or are temporarily resident in Western Europe.

2. Seven to eight thousand physicians for an estimated population of 23 millions can only serve with a system of "institutionalized" medicine. Hospitals, sanatoria, maternity homes, children's institutions of various kinds, outpatients departments, health centres, specialized clinics etc. must form the foundation for adequate medical care.

3. Many hospitals and kindred institutions were destroyed in the course of offensive operations. Many others were burned down in Warsaw, Posnan, Gdanak, Radom, Jaslo and numerous other cities. Most were requisitioned by the enemy for his own use, and were found after liberation in a plundered condition. Essential equipment, linen, patients' clothing, drugs etc. have almost vanished and are totally unobtainable within the country.

The prime need is thus for fully equipped hospitals. The original programme provided for 58,000 beds; some 15,000 are to be shipped through December 1945. The balance of 43,000 represents a basic and urgent need.

4. The repatriation of Polish citizens from West and East will involve the movement of some three million people, adults, adolescents and children, many in a state of requiring immediate medical and preventive attention.

5. Returning Displaced Persons are to be directed to 20 reception centers in the Western Area and some 20 centers in the East and South. Of these 20 of a daily capacity of 3,000 persons and 25 of 1,500 persons.

It must be borne in mind that while a large bulk of displaced persons will be repatriated by rail, very many are, and will be returning in increasing numbers, by horse carriages, trucks, indeed any means of conveyance, and also on foot.

45 Emergency hospitals and anti-epidemic units with full equipment are needed to serve the reception centers.

In addition an internal re-settlement on a very large scale is under way and will continue for several months.

A particularly difficult problem is presented by the 400,000 people with further daily arrivals who dwell in the ruins of Warsaw, once the chief center of hospital system in Poland, now reduced to a bare few thousand beds available for a population exposed to untold hardships.

To meet the above exigencies, and in particular the needs of returning displaced persons, a supplementary programme is required.

6. A list of drugs supplementing the deliveries and projected shipments through December 1945 is available, and no particular difficulty should be encountered in meeting this need.

7. An assignment of 100 tons of D.D.T. powder is considered urgent in view of the approach of the Typhus season and the almost total lack of soap.

8. A very real service can be rendered by providing sets of American, British and French technical publications for the period of 1939 - 1945; they are indispensable for the process of rehabilitation of medical services.

A series of special monographs and memoranda particularly on recent achievements in preventive and curative medicine should be provided in a Polish translation.

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2 -

POLISH GOVERNMENT OF NATIONAL UNITY

Appendix F

HEALTH

Arrangements will be made by the Polish Ministry of Health to establish with the Health Division of UNRRA a detailed list of the above requirements.

9. This also applies to the rehabilitation of Institutes of Public Health. In particular, essential parts of equipment for the production of Penicillin are required; a study is already under way in Washington and it is requested that the E.R.O. should do likewise.

A list of laboratory requirements is under preparation.

CONFIDENTIAL

Appendix F.

POLISH GOVERNMENT OF NATIONAL UNITY

PUBLIC HEALTH

1. 43,000 fully equipped hospital beds.
2. 45 Emergency hospitals and anti-epidemic units for the Reception Centers for D. P.
3. 100 tons of D.D.T. powder.
4. A supplementary list of drugs and chemicals will be communicated.
5. American, British and French publications for 1939-1945 covering various technical branches. Also special monographs and memoranda in Polish.
6. Essential equipment for two plants for Penicillin production at the National Institute of Health and its branches. A list of other laboratory equipment is under preparation.
7. Machinery for production of artificial limbs, according to the enclosed list.

CONFIDENTIAL

Machinery for the Production of Artificial Limbs

Appendix F.

M A C H I N E R Y

with electric drive 220V x 3 - 50 Hz.

1. Complete Norton lathe 1500 mm between spindles with complete set of gear wheels.
2. Complete Picker-Type automatic revolving lathe for screws a.bolts-1.
3. Milling machine with grade-drum - 1.
4. Complete small lathe up to 20 between spindles - 1.
5. Boring machine 1/2 - 4; up to 1" - 1; up to 2" - 1.
6. Complete lathe for wood up to 20".
7. Machine-saw for metal cutting - 1.
8. Balance handpress with table 300 x 400 mm 30 t - 1.
9. Eccentric press up to 15 t - 1.
10. Hand-boring machine up to "1/2" - 2.
11. Table scissors for tin cutting - 3.
12. Vices for blacksmiths 6" - 10.
13. " parallel 7" - 15.
14. Anvils - parallel 30 kg - 10; 40 kg - 2.
15. Electric-motor 2 phases, power 2 HP - 2.
16. " " 3 " " 3 HP - 1.
17. Machines for sadlers, leftsided drum - 2; for mending - 1.
18. " " tailors / stays/ - 2.
19. " " shoemakers, leftsided - 1; rightsided - 1.
20. " " cutting leather / for sadlers/ -
21. " " shoestrings - 2.
22. " " shoe-holes - 2 with additions.
23. " " soldering.
24. Typewriter - 2.
25. Counting machine - 2 /hand-driven/.
26. Complete shaping machine with electric drive 380/220 V-50 Hz movement
150-200 mm.
27. Lathe with half Norton head 40" between spindles with motor 380/220 x3
50 Hz - 1.
28. Complete grinding machine for stones 220-250 mm with motor.
29. " " " " " 150-200 mm. " "
30. 1 complete electric welding set.
31. Electric brazing machine for band-saws 1.
32. Complete surface copying machine for machining feet, ankles and underknees.
33. Complete wood planing machine with 1 HP motor.
34. 1 balance handpress with table 300 x 400 - 30 t.
35. 1 eccentric press up to 15 t.
36. 10 vices for blacksmiths, jaws 6".
37. 15 " parallel.
38. 3 tables-scissors for tin cutting.

T O O L S

CONFIDENTIAL

TOOLS

Appendix F

1. Moving gauge - 300 mm - 10.
2. " " - 200 mm - 3.
3. 1 micrometer.
- 4.
5. Thread cutters 2 - 10 mm - 20.
6. " " 6 - 7 mm - 20.
- 7.
8. 20 ginlets 1 1/2 - 20 mm.
9. 10 " 10 - 30 mm.
10. Milling knives 80 x 4 - 10.
11. " " 80 x 1 - 10.
12. " " 50 x 0,2 - 10.
13. " " 50 x 0,3 - 10.
14. " " 100 x 6 - 10.
15. 4 pairs of hancissors for tin, fingers 10", straight 12".
16. 3 dozens of small saws for iron, onesided.
17. 4 dozens of small saws for iron, twosided.
18. 6 frames for "small iron saws".
19. Tube tongs 8" 10" 12" /tube pincers/.
20. 2 Spanners.
21. 2 sets of keys 1/8 - 2".
22. 6 pincers for wire cutting.
23. 15 normal pincers.
24. Flat pincers 8" - 20.
25. Conical pincers 8" - 20.
26. Universal pincers - 10.
27. 20 screwdrivers 4 - 18 mm.
28. 100 hammers 200 gr. - 1 kg.
29. Compasses with measure 20.
30. " without measure - 10.
31. Scissors for gyps - 2.
32. Normal scissors 8 mm - 10.
33. 2 knives for gyps.
- 34.
- 35.
36. 10 normal knives.
- 37.
- 38.
- 39.
40. 300 wooden handles for files.
41. 50 flat files 14" mm /reduce/.
42. 50 " " 12" mm "
43. 50 " " 10" "
44. 50 " " 8" "
45. 50 " " 6" /smooth/.
46. 50 files halfrounded 12" / reduce/.
47. 50 " " 10" / smooth/.
48. 50 " " 6" "
49. 50 " rounded 14" / reduce/.
50. 50 " " 12" / reduce/.
51. 50 " " 10" / smooth/.
52. 25 " " 8" "
53. 10 " three sided 6" "
54. 10 " " 8" "
55. 30 " Square 14" / reduce/.
56. 1 water-gauge horizontal.
- 57.
58. 5 sets of shoemaker's tools.
59. Iron shape for shoes and boots.
60. 5 sets of sadler's tools.
61. 3 sets of shoemaker's tools.
62. Sadler's awls 2" 2 1/2 "3" - 30.
63. Shoemaker's awls 2 1/2 "3" - 30.
- 64.
65. 20 dkg bristles.
66. 5 frame saws - 4 types.
- 67.
- 68.

CONFIDENTIAL

- 2 -

TOOLS

Appendix F

- 69.
- 70.
- 71. 3 normal cranks.
- 72. Planers of various types.
- 73. Lathe tools - 1 set.
Wood-sculptor's tools 1 set.
Chisels straight 3 - 30 mm, halfrounded 6 - 30 mm - 9.
- 74. Spiral gimlets 3 set 6 - 20 mm.
- 75. Syldrical gimlets 4 set 22 - 25 mm.
- 76. 2 band - saws 20 x 6000 mm.
- 77. De Vilbiss paint spraying pistol.
- 78. Collapsible gauges - 10.
- 79. 12 joiner pencils.
- 80. axe.
- 81. 3 sets of files, round.


satisfactory. Approximately 6,000 cases of typhoid fever, 3,000 cases of diphtheria, 986 cases of scarlet fever and 650 cases of typhus fever were reported during the month of December. Active measures are being carried out by the health authorities on typhus control including widespread use of D.D.T. louse powder. There was no increase in the number of typhus cases reported in December as compared with November and it is hoped that the usual mid-winter rise might be avoided.

Reports and Statistics Branch

Date received: 24.1.46

Copy to: OA Registry (OA 12/x)
for circulation
Economic Analysis Boh.

Extracts to: Mr. Dudley Ward
Sir M. Greagh
Supply
Information
Health
Welfare
Admin. Services
Personal
O & M
Dr. Stuart
Miss Ucell
Finance



Communicable Diseases.

Through agreement with the Ministry of Health communicable disease reports are now broken down by provinces and are being submitted weekly. A corrected monthly report on communicable diseases is submitted approximately six weeks after the close of the month. These corrected monthly reports have been furnished as far back as April 1945 and have been submitted to E.R.O. and to Washington. Weekly reports are also submitted as soon as received.

The situation in regard to communicable diseases is still far from

/satisfactory

746
UNRRA MISSION TO POLAND

EXTRACT FROM MONTHLY REPORT OF ACTIVITIES - HEALTH DIVISION

FOR THE MONTH OF DECEMBER 1945
H. 4/18/1

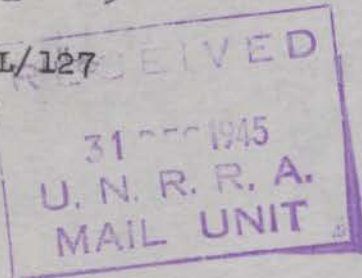
UNITED NATIONS
RELIEF AND REHABILITATION ADMINISTRATION

H 4/18/1

INDEXED

Des. No. 145

PM/L/127



WARSZAWA, 18 December 1945

To: Health Division
UNRRA,
European Regional Office. *19. 1/1/46.*
Attention: Dr. N. Goodman.

From: Dr. H.A. Holle
Chief Medical Officer,
UNRRA Mission to Poland.

Subject: Report of Field Visit to the
Provinces of Lublin and Cracow.

There is transmitted, herewith, a field report which was written upon my return from a field visit to the Provinces of Lublin and Cracow.

Holle

Enclosure: 1



103
5/1/46

INDEXED

P. 238.

UNITED NATIONS
RELIEF AND REHABILITATION ADMINISTRATION

PM/L/18
PM/W/3



To: Personnel Division, ERO, London.
Director, Division of Management and Budget, Washington.

From: Deputy Chief, Finance and Administration, UNRRA Mission
to Poland.

Monthly Health Report for UNRRA Polish Mission as
of 31 October 1945:

NIL

(in lieu of Form H.R.I)

? no answer

I. Douglas Brown

I. DOUGLAS BROWN,
Brigadier.

Revised Stationing

*Forms HRI are not known in the Polish Mission. May some
be sent please?*

N.M. Goodman

19/11

*Seen
5/11/46
G.M.*

A5973

UNITED NATIONS
RELIEF AND REHABILITATION ADMINISTRATION

1344 CONNECTICUT AVENUE
WASHINGTON 25, D. C.

INDEXED

H 11/18/1

VIA AIR MAIL

Confidential

Dr. Neville M. Goodman
Director of Health
UNRRA
11 Portland Place
London, W.1, England

37 OCT 1945

RECEIVED

5 NOV 1945

U. N. R. A.
MAIL UNIT

Dear Doctor Goodman:

I am sending herewith a copy of Appendix F of the report which Mr. Menshikov has filed for the Temporary UNRRA Delegation to Poland. This appendix is principally the report of Dr. Holle's comments and recommendations on health requirements in Poland. It is an appendix to the much larger report of the Delegation as a whole which Mr. Menshikov has prepared and which I assume will ultimately reach ERO. In view of your recent urgent request for any information we might have, I have secured the enclosed pages and am sending them on by air.

We have little other information than you have already received from Dr. Johnstone and others.

It now looks as though I should get away by air next week for London at least. I had a talk yesterday with the Director General regarding the situation as a whole. Mr. Xanthaky is drafting a cable on the proposed trips of Mr. Williams and myself. We all are hopeful that you also will be able to visit Poland at the same time so that we can make sure that any discussions with the health authorities will have a maximum of value to ERO and your program for Poland.

Sincerely yours,

W. A. Sawyer
W. A. Sawyer, M.D.
Director of Health

✓ Attachment

*Covering letter from Washington
to Dr Goodman AS445 18-10-45*

*Original on H7
copy for H4/18*

"Uppermost in mind at the moment is the Polish Mission. We would be greatly concerned over the proposal that the health staff would be in a section under Supply and would consist of about three people, one of whom is already appointed in Poland, except that we are told by Commander Jackson that the organization is being entirely revamped in London and will be adequately handled. I take it that you will be in on the decisions and that the interests of the Health Division will therefore be fully looked after. You have doubtless seen the cable from Warsaw transmitting the invitation of the Minister of Health to me to visit that city but giving little intimation of the main objects of the conference. My first reaction is that we should do anything possible to bring about conferences between the professional health officers of UNRRA and those of Poland and am willing and glad to make the trip if it will facilitate our dealings with that country. I am not however at all certain that we shall be able to accomplish exactly what we think should be done. I also wish that the matter could be so arranged that you would go to Poland as Director of Health for ERO and that we could be there at the same time. I wonder if that cannot be arranged through London and the Chief of Mission, General Drury, who should soon be in Warsaw. The position here now is that both Commander Jackson and Mr. Hendrickson have urged me to go as soon as possible. On the suggestion of the latter, we cabled London and were advised to await further decision after General Drury was on the ground. Mr. Hendrickson suggested that it might be well to save time by going as far as London without further delay but it seemed to me that I could be of greater service here during the next week inasmuch as we are extremely short-handed and have not as yet been able to fill the position of Chief of Field Operations. I do not wish to leave Dr. Bryan with an impossible load and will therefore probably stay around until we get more definite word from London. Incidentally I might say that the Polish representative here, Dr. Rajchman, has warned me that I would be asked to give probably three lectures on such subjects as I may choose related to public health and medical progress. I have told him that I would be willing to do so if invited with the understanding that the time would not permit preparation of lectures in form for publication and that I might have to talk from notes. If you can go at the same time, I think that the odds are that you would also be urged to give talks to the medical group in Warsaw.