
P R O F I L E

Professor Iuliu Moldovan From Biopolitics to Public Health

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ON 15 JULY 2017 we celebrate 135 years since the birth of Professor Iuliu Moldovan, one of the most prominent personalities of Transylvania in the field of medicine. 2017 also marks 90 years since the adoption of the bill on the establishment of a new Institute of Hygiene and Public Health in Bucharest, the current National Institute of Public Health.

Without overemphasizing his virtues, we can state that he is the father of the hygiene school in Romania, and, through this, one of the founders of modern public health in Romania. This paper is intended to examine the legacy of Professor Iuliu Moldovan from a dual perspective: as a member of the intellectual elites in Transylvania, who advocated biopolitics and eugenics, on the one hand, and as one of the most important forerunners in the field of public health, on the other.

Professor Iuliu Moldovan was born in 1882 in Bogata de Mureş, where his father served as a Greek-Catholic priest. As his father became dean, the family moved to Mediaş, where he graduated from high-school and came

first in the graduation exam. He enrolled in the first year of theology at the Seminary in Blaj, but he dreamt of becoming a medical doctor and, therefore, with the help of his uncle, Captain Ioan Brad, he attended the Medical School in Vienna, one of the most prestigious centers of higher education in this field. He obtained a military scholarship while studying, with the obligation to serve for six years in the Austro-Hungarian army. While in Vienna, he joined the Romanian Youth Society, which gathered together young Romanian students from all over the Austro-Hungarian Monarchy, a crucible for social and cultural development.

After graduating the first five semesters in Vienna, he completed his studies at the German Faculty of Medicine in Prague, and then returned to Vienna where he served as an army physician for eight years, until the outbreak of World War I. Between 1908 and 1914 he worked, under the supervision of Dr. Robert Doerr, for the Central Bacteriology Laboratory of the Austrian-Hungarian Army. It was there that he learned the principles of epidemiologic surveillance of infectious diseases, including the epidemiological investigations of outbreaks, the principles of the drinking water supply and the principles of sanitation. Meanwhile, he also dedicated himself to research, being the first and only Romanian to be appointed docent at the Faculty of Medicine of Vienna, in 1915.¹

He served in the Austrian-Hungarian army, and in 1914 he introduced massive anti-cholera immunization on the battlefield, managing to override the interdiction issued by the chief medical officer, afraid of possible adverse reactions of the vaccine. In 1915, in an effort to control the spread of epidemic typhus, he set up the first mobile unit for pest control and the disinfection of soldiers. The procedure was repeated every five or six weeks, making soldiers familiar with hygiene measures, a tremendously effective means to combat and prevent the spread of infectious diseases, which, during the First World War, were either a helpful ally or a terrifying enemy. Another scourge on the battlefield were the sexually transmitted diseases, especially syphilis and gonorrhea, which demanded not only the setting up of medical facilities to diagnose and treat these conditions, but also some forms for recording them and, most importantly, some means to prevent them through health education. It was then and there that Professor Moldovan envisaged the need of medical and social measures to combat prostitution, the main source of infections. He stressed the need for surveillance networks made up of hospitals and outpatient units for the recording, regular medical examination, and mandatory treatment of these women. In December 1918 he returned to Romania, and was appointed secretary general of the Social Welfare Department of the Ruling Council of Transylvania.

During the first years after the Great Union, Moldovan had ministerial authority in the area of health and social welfare and had the opportunity to start a work that laid the foundation for some of his later comprehensive programs. He devised a sanitary organization and healthcare plan for Transylvania, whose main goal was not only controlling and treating diseases, but also preventing them, the core of a future organization of the health system of Romania. He presented his plan, together with his already strong convictions about the importance of combining curative and preventive medicine and about the need to make basic preventive medical services and hygiene education accessible to the rural masses, at a congress of Transylvanian doctors that took place in Sibiu under the presidency of another outstanding medical personality, Iuliu Hațieganu. Upon meeting each other, they divided their roles, Hațieganu having the task of developing the Faculty of Medicine of Cluj, with Moldovan organizing the healthcare system. He created, as early as 1919, seven hygiene inspectorates which covered the whole territory of Ardeal: in Cluj, Oradea, Satu Mare, Târgu-Mureș, Sibiu and Brașov. The newly established institutions had bacteriology and chemistry laboratories and teams for disinfection and pest control provided with the necessary equipment. In addition, he founded three hospitals: one in Abrud, one in Reghin, and one for women in Cluj; a tuberculosis sanitarium in Aiud; an Institute for Nursing in Cluj; several centers for children's assistance, at Beiuș, Orlat and Odorhei; and a network of outpatient clinics that served as social hygiene institutions² for the control of social plagues, tuberculosis, sexually transmitted diseases and infant mortality. The first of these clinics was created in Sibiu, being followed by sixteen others. This way, Professor Moldovan laid the foundations for the primary care network in Romania. The role of these establishments was not only to provide free healthcare services to the population suffering from the infectious diseases mentioned above, but also to perform epidemiological investigations in order to track the contacts, to detect the source of infection and limit its spread, and provide health education within the affected community.

In 1919, when he was appointed head of the Hygiene and Social Hygiene Department, he and Iuliu Hațieganu became the first two professors of the Romanian medical school in Cluj. Professor Moldovan found the location of his department to be inappropriate for what he had envisaged, and therefore, with the help of the Ruling Council and of Iuliu Maniu, who financed his project with 1.5 million lei, he moved to a new building where he founded the Pasteur Institute of Cluj, which included the hygiene and social hygiene institute, the institute and department of biochemistry, the institute and department of histology, the institute of general and experimental pathology and the rabies

department. Moldovan acted as director of the institute of hygiene from its establishment to the occupation of Transylvania by the Hungarian army in August 1940.³ This institution was to become the site of continuous research in eugenics in Transylvania.

Between 1918 and 1920, Iuliu Moldovan came in direct contact with many of the health problems in Transylvania, some of them of apparently catastrophic proportions. After the war, he found a backward sanitary organization in Transylvania, not only poor in curative health services, but lacking any preventive medical services. Until then, no comprehensive effort had been made to assess the general standards of health in this region, let alone to address the existing issues. The outpatient clinics Moldovan founded in 1919 started some sort of what we call today epidemiological surveillance, collecting data from various areas and sending it to the Institute of Hygiene in Cluj, where the information was processed to provide practical measures to combat the scourges. This method of combining research with practice was unprecedented in Transylvania. He observed the epidemic spread of syphilis in rural areas, an unlikely place for a venereal disease that is, usually, characteristic for large cities and their promiscuity and, because of his army experience, considered the mass draft and the participation of many peasants in the war as determining causes for that situation.⁴ Alcoholism and tuberculosis were other important public health problems as they affected not only patients, but also their families.⁵ Mortality, and especially infant mortality, which was distressingly high, prevailed over natality, although the latter was not small. Moldovan was keen to understand the causes of this situation, which he believed was a threat to the future of the nation, and to correct it. In the sixteen months that he held the highest position in the public health administration of Transylvania, Moldovan fought to lay the foundations for a new form of healthcare, one that devoted equal attention to preventive and curative medicine, focusing primarily on the health of the ethnic Romanians.

In 1920, as the Ruling Council dissolved, he was appointed General Hygiene Inspector for Transylvania and, during the following five years, tried to continue implementing his earlier programs and ideas. Moldovan found this change somehow frustrating, stating that Bucharest was imposing several laws and regulations, without any preparation, any written proof of the laws, without sending a single expert from the center to guide the province, although they had been requested.⁶ The situation worsened with a scandal that erupted in 1922, in which Moldovan was accused of fraudulent misuse of state funds followed by an investigation that proved all allegations were false. Moldovan became convinced that this had been a campaign of the liberal regime in Bucharest to taint his reputation and, therefore, regarded Ion I. C. Brătianu's National Liberal Party as dishonest, opportunistic, and disinterested in the general welfare of the

nation and especially in the vital regional problems of Transylvania, an opinion that was largely shared by many other young professionals who had great ambitions in 1918 but were quickly disappointed by the increasing centralization after 1920.⁷ As a result, Moldovan turned his political sympathies towards the National Peasant Party and, in particular, towards its leader, Iuliu Maniu. His political preferences became apparent in 1928, when he was named general secretary of the Ministry of Health and Social Welfare under the Maniu government. Iuliu Maniu was already familiar with Moldovan's eugenic ideas, a fact proved by an early platform of the National Peasant Party that contained specific references to the need to implement comprehensive public health reforms: "The Service for public health will have to be reorganized as an independent technical service, which will handle all problems related to maintaining the health and vigor of the present and future generations. . . . A rational education will have to guarantee the indispensable harmony between the physical, the intellectual and the moral, as an essential foundation for the validity of our nation."⁸

In his autobiographical volume,⁹ while expressing his deepest feelings for the Romanian nation, he justifies his impeccable behavior on the fronts of the Central Powers stating that "it was only natural to have all the love and admiration for my people, to wish to be somehow beneficial to them, at least by doing my duty, in the place that I was destined, so exemplarily that I could contribute with something to increase the prestige of the Romanian people."

Considering that "the power to govern is the power to heal"¹⁰ one might argue that the pursuit of health has been central to modern identity formation in some former colonies who strived to impose new rules of the game.¹¹ During the interwar period, biological concepts became necessary components of national identity.¹² In addition, eugenics, racial anthropology, and serology received official endorsement from governments and political regimes throughout Europe.¹³ As the nation was becoming more and more an object of political adoration, biopolitics developed as a symbol of modern theories of national identity by emphasizing the need for biological identification combined with a quest for national rejuvenation.¹⁴

With the Darwinist Revolution in the natural sciences, scientific discourse spread beyond the laboratory in an attempt to influence the conceptualization of social relations and politics. The industrial revolution brought with it a series of social issues that placed the focus on hereditary determinism in developed countries. Eugenics sprang in the late nineteenth and early twentieth century from the theory of Francis Galton about the heredity of genius and developed into an international movement for social change. There was a eugenics society practically in every Western European country, whether France or England, Italy or Germany, Finland or Sweden, not to mention the United States.¹⁵ The same

trend can be noticed in the newly created Eastern European states at the end of World War I. In their efforts to become “European” nations, social reformers in these countries became interested in this modern scientific theory and social reform movement. Eugenics societies appeared in Poland, Czechoslovakia, Hungary, Yugoslavia, and Romania. For Romania, the delay is understandable, if we consider that the secularization process was slower than in other countries. At least in Wallachia and Moldavia, knowledge was constructed and controlled primarily from within the Orthodox Church, which was not really interested in science-based arguments.

After World War I Romania not only nearly doubled its territory, but also included ethnically diverse regions of Transylvania, Bessarabia, and northern Bukovina, a fact that put a huge pressure on the Romanian state in engaging an unprecedented process of nationalization and centralization. As an almost natural result, addressing the ethnic diversity became central to the biopolitical programs devised during the interwar period. Anthropological and serological studies were carried out in order to prove national belonging to a population that had been strong enough to survive centuries of oppression.¹⁶ In Transylvania, it was nationalism rather than racism that determined the position one took on the question of racial anthropology and serology. As Professor Moldovan put it in his memoirs: “[The Romanian people] resisted throughout its difficult past thanks to its natural forces, to its readily available biological capital made out of body, soul and mind, through which it could keep and strengthen its numerical preponderance and through which it created that great shield of art, thought and popular solidarity . . . of deep faith, so as, once and finally freed, to be able to assert its natural potential, to raise to the necessary level among other peoples.”

IN 1925, Moldovan published his first work in the field of eugenics, called *The Hygiene of the Nation*, in which he formulated the major tendencies of the new scientific paradigm that he considered worth following: “eugenics is exclusively interested in hereditary factors which come down from parents to children, and are not traits given by the physical or social environment.”¹⁷ As stated above, the eugenics movement in Western Countries was fueled by the consequences of rapid industrialization and urbanization. It wasn’t the case with Romania where more than two thirds of the population lived in rural areas. In analyzing these processes, and especially projecting them into the future of our country, Iuliu Moldovan did not reject them, but feared that their excesses could prove dysgenic. Thus, he concluded “we are not, and cannot be against industrialization, just as we don’t oppose labor; but one serious postulate has to become established—that this industrialization should not debilitate but rather

biologically enhance the human capital.”¹⁸ In 1926 he published his “Biopolitics” in which he states that “The fundamental politics will be that which is based *primarily* on the biological ability of the human capital, which it selects, increases, guides and protects so that, in order to validate itself [the human capital] will produce optimally both in the interest of the country, as well as of itself, without harming the present generation or the future ones . . . This fundamental policy is biopolitics, the science of governance based on the biological capabilities of citizens and directed towards their biological prosperity, the regulating conscience of any individual or social trend.”¹⁹ For Moldovan, biopolitics was a matter concerning the Romanian population of Transylvania,²⁰ the Romanians being the initial as well as the final point of this policy. And I might say this is an understandable approach if we consider the historical moment in which it emerged.

In 1927, the Medical and Biopolitical Sections of the Transylvanian Association for the Literature and the Culture of the Romanian People (ASTRA), a very important venue for the formulation and implementation of programs of eugenic orientation, organized a series of lectures entitled “The Biology of the Romanian People.” Among the speakers were important representatives of the intellectual elite of those times: Emil Racoviță, Dimitrie Gusti, Alexandru Tzigara-Samurçaș, Constantin Rădulescu-Motru, Simion Mehedinți, Ioan Bologa, and Alexandru Vaida-Voevod. The same year, with funds from the ASTRA, Moldovan set up a new periodical publication, *Bulletin of Eugenics and Biopolitics*, which was the most important source of information for those interested in sanitary organization, legislation, and public health programs abroad and in Romania, the role of doctors in the rural areas, and the biological dangers to the nation’s health (the social plagues).

*The purpose of our bulletin is to spread in broad circles the knowledge of biological laws, which govern our fate as individuals, nation, and country, and to show the way we conform to those laws in our conception of life, in our work, in our responsibilities and duties, so that we don’t jeopardize our future by ignorance or negligence, and others will not endanger it by exploiting our weaknesses. Therefore, we will raise awareness upon those parts of general biology which are utterly necessary for judging the biological evolution of our people, we will deal with the biology, pathology and hygiene of our nation, and we will discuss, in the light of biopolitics, the executive leadership of the state as it stands and as it should be. We will discuss laws and regulations that affect the biological prosperity of our human capital and we will report on surveys and studies undertaken in order to pursue the biological capital of our nation so as to establish its qualities and study its distinctions and their importance.*²¹

Between 1932 and 1947, Iuliu Moldovan served as president of the ASTRA. During the '30s, he published a series of short articles that could better explain his vision on modernizing the Romanian public health system. In his two years as general secretary at the Ministry of Health (1928–1930), he drafted a legislative bill that would have radically changed not only the ongoing programs of public health but the whole concept of healthcare and the institutions relevant to it. He developed the Central Institute for Statistics, and the University of Medicine in Cluj, the Cantacuzino Institute, the institutes of hygiene and public health in Bucharest, Cluj and Iași that would later become the Regional Institutes of Public Health, and would form in 2009 the National Institute of Public Health. He is the founder of the Oncological Institute of Cluj (initially called the Institute for the Study and Prevention of Cancer), a novelty for those years even in more developed countries.

Public health, as Professor Winslow of Yale University stated in 1920, “is the science and art of preventing disease, prolonging life and promoting physical health and efficiency through organized community efforts for the sanitation of the environment, the control of community infections, the education of the individual in principles of personal hygiene, the organization of medical and nursing service for the early diagnosis and preventive treatment of disease, and the development of social machinery which will ensure to every individual in the community a standard of living adequate for the maintenance of health.”²² The Sanitary and Healthcare Law of 14 July 1930, known as the Moldovan Law, is an accurate representation of this definition.

As early as 1918 many doctors emphasized the need for a separate Ministry of Health with the political and financial power to address all issues regarding the health of the nation. They argued that the health of the Romanian population was in a period of crisis, which, if uncontained, could lead to the demise of this people, despite the victory in World War I. In 1921 Victor Babeș was among those who stressed this need, as well as the passivity of politicians and institutions concerning the people’s health, stating that “Just as death is equally fatal for everyone, all individuals are also equal and must be treated equally, and the state has an obligation toward its members to spend no less and no more than the strictly necessary amount to ensure the health of all citizens and cure their ailments.”²³ Another proponent of public health programs was Alexandru Vaida-Voevod, a prominent politician of the National Peasant Party who accused the liberal government of irresponsible behavior, because, in his opinion, it dealt with critical public health issues by letting them solve themselves.²⁴ The National Peasant Party seemed to be ready to develop a policy that would expand the state’s responsibilities for public health and Iuliu Maniu open-

ly expressed his support for Moldovan's ideas.²⁵ When the NPP came to power in 1928, it was Maniu that appointed Moldovan as general secretary at the Ministry of Health and gave him a free hand in regulating public health. Meanwhile, Brătianu's National Liberal Party presided over the founding of a Ministry of Health in 1923. But Iuliu Moldovan, as well as other supporters of a reformed Ministry of Health, found it impossible to work with the liberal regime. There were several (good) reasons for this. The largest part of the budget for health went toward hospital care, despite the fact that those healthcare units were in complete chaos as a result of the war.²⁶ Of course there had been efforts to rebuild these institutions as part of the national reconstruction, but this was done to the detriment of preventive medicine. All policies to improve public health were undertaken in a piecemeal fashion, rather than on comprehensive grounds. For instance, the government spent very little money on immunization, or hygiene programs, but gave generous subsidies to private foundations that worked to treat and prevent tuberculosis without any attempt to study the causes of its spread. The same happened with malaria. The Ministry of Health did support some of the reforms started by Iuliu Moldovan in Transylvania (the Institute of Hygiene, the School for Nursing, the hospital for women), but gave little credit to the impact of his more important reforming institutions. For instance, the subsidies for the outpatient clinics were not increased, so these remained insufficient in number and in financial difficulties throughout the 1920s. Nevertheless, the efforts made by Professor Moldovan to increase awareness about public health measures and community health concepts were helped by the financial assistance offered by the Rockefeller Foundation, whose representatives, sent to examine the situation in Romania, decided that the Cluj medical center that had developed more modern and more progressive programs, rather than the one in Bucharest, would become the main focus of their philanthropic activities in Romania.²⁷

Under the NPP regime, the foundations for a comprehensive public health reform were laid down in the Moldovan Law.²⁸ Its provisions maintain their actuality even nowadays. If we compare the law written almost ninety years ago with the law issued in 2006 (Law 95 regarding the Reform of the Health Sector with all its amendments), we find striking similarities. The legislation addressed the global problems of Romanian healthcare, but at the same time included very specific measures about every aspect of health: from education and preventive medicine to medical practice and administration. The principles of organization and financing of the health system are very close to those of today. He proposed a regionalization scheme for the sanitary administration of health services in seven regions; we are trying to accomplish that goal today. He brought to life

what had become one of his strongest convictions: that a comprehensive public health reform could not succeed unless it combined a system of centralized decision-making with a decentralized system of implementing health policies that might respond to specific local needs and shape the activities needed in a fashion that would help resolve the issues of greatest concern in each community. Therefore he envisaged a very effective decentralization process of the public health administration. The regions were divided into districts, and each district included several sanitary stations (*plăși sanitare*), lead by a hygiene physician, responsible for keeping an eye on everything that could impact the health of the population within the area: from food hygiene to water and air pollution, from communicable diseases, through occupational hazards, to school hygiene. Providing health services according to local needs is another issue highly debated in Romanian public health today. The Moldovan Law also stipulated that health institutions needed to become more self-reliant and begin to draw their funds from the local administration, through either local, regional, or municipal taxes or other sources. The same provisions were adopted in nowadays Romania in 2011.²⁹ The Moldovan Law regulated the medical profession and created the Romanian College of Physicians, laying the functioning principles that are still standing today.

Chapter 2 regulated the functioning of the Institutes of Applied Science: the Institutes of Hygiene and Public Health in Bucharest, Cluj, and Iași, which are still in place, and Cantacuzino Institute, which performs today the same activities that are stipulated in the law: preparation of vaccines and sera, high level research, reference laboratories for infectious diseases. Another chapter included guidelines for hygiene in public places similar to the ones in Western Countries and the United States, and empowered hygiene doctors to control the enforcement of these standards and to fine those who disobeyed the rules. The law also provided strict specifications for architectural, structural, and hygiene standards for operating a public service establishment, as well as regulations over sewage and water services. It is more or less what Sanitary State Inspectorate does today. By regulating the “care office” (*oficiul de ocrotire*) and the “care nurse” (*sora de ocrotire*), he introduced a revolutionary concept combining medical and social care in rural areas.

One important chapter of Law 236/1930 was the one regarding the surveillance of communicable diseases. Perhaps inspired by the International Sanitary Conferences,³⁰ he introduced mandatory health controls of immigrants and goods at the borders. Similar provisions can be found in the World Health Organization’s International Health Regulations.³¹ Article 273 laid down the principles of epidemiologic surveillance as we practice it today, as well as the obligation of notifying certain infectious diseases, listing them, and classifying them in two cat-

egories, as they are listed and classified in several Romanian and European Union legal acts. Besides reporting, the law stipulates the measures to be taken in case of a communicable disease outbreak, including measures regarding isolation, food control, temporary change of workplace or quarantine. An interesting provision regarding mandatory vaccination is also stipulated in the law, and today we are still debating whether to enforce mandatory vaccination by law or not.

Unfortunately, the law proved to be very difficult to enforce because the efforts for reforming state structures in accordance with health priorities were not successful. The amendments proposed to the law in the following years³² eventually rendered it inefficient. Nevertheless, the 1930 health law stays as a symbol of a faith, a plea for the continuity, the improvement and the praise of the biological, spiritual and social values of our people, as well as an incentive for the development of health awareness and knowledge among Romanians.³³

In his *Treatise of Public Health*, published in 1947, a monumental work that can easily serve as a handbook for public health professionals nowadays, Iuliu Moldovan defined health almost as it was defined in the World Health Organization's Constitution which was issued one year later: "We understand health as being not only physical, but fully biological: physical, mental, and moral altogether, [as being] not only the present one, but the future one, as well, throughout the lifespan of the individual and, when speaking of family and nation, throughout the future generations"³⁴; "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity."³⁵ Moldovan's definition certainly expresses his biopolitical ideas, but this doesn't make it less suggestive for its wholeness.

Iuliu Moldovan was, without question, one of the proponents of the eugenic movement of the intellectual elites in Romania, but to speak of him as the most ardent promoter of preventive and corrective eugenicist practices, and to regard the 1930 health law as a push for comprehensive eugenic practices³⁶ is a misinterpretation of what Moldovan and his law represented for the future of public health in Romania. Moreover, to say that "Moldovan and his collaborators would have been pleased to see that this time [during the communist regime] the anti-abortion legislation was implemented with greater 'effectiveness' by the responsible state institutions, to the point that it terrorized most young couples and especially women"³⁷ is a statement without any scientific foundation and without any clear link to Iuliu Moldovan's concept of healthcare. Furthermore, to state that, "after 1989, the local reputation of these individuals [the eugenic movement] has been reinvented as victims of communism [Moldovan was imprisoned in Sighet between 1949 and 1955 for collaborating with bourgeois regimes], without reference to their leading role in an aggressive social engineering movement that aspired to destroy democracy, institute a corporatist state,

and eliminate populations deemed unwanted”³⁸ proves a huge lack of understanding of the public health concept.

IULIU MOLDOVAN is definitely one of the most outstanding pioneers of public health in Romania. Not only did he envisage a modern organization of the public health system, but he laid the foundations of some of the institutions in this field that are in place today, having an utmost importance in maintaining and improving the health of our nation. He understood the importance of providing health and social care in rural areas, something that we seem to have forgotten, acknowledging the fact that the health of the nation is the health of each and every citizen. Moreover, he stressed the importance of population, as an object of medical study and practice, and developed the concept of what we call today positive health. In devising his comprehensive reform he used strategic planning based on situation analysis (a modern tool currently used by public health professionals everywhere in the world). He developed the concepts of hygiene and epidemiology, he integrated research in medical practice, and, perhaps most importantly, he emphasized the importance of preventive health services and of community health.



Notes

1. Florea Marin, *Școala medicală clujeană: Precursori. Întemeietori*, vol. 1 (Cluj-Napoca, 2000), 230.
2. Iuliu Moldovan, *Amintiri și reflexiuni* (Bucharest, 1996), 51.
3. *Ibid.*, 64.
4. Iuliu Moldovan, “Motive pentru înființarea Ministerului Sănătății Publice,” *Sănătatea publică* (Cluj) 1, 1 (1921): 10–11.
5. Iuliu Moldovan, “Un program biopolitic,” *Societatea de mâine* (Cluj) 1, 3 (1924): 69–70.
6. Moldovan, *Amintiri și reflexiuni*, 91.
7. Irina Livezeanu, *Cultural Politics in Greater Romania: Regionalism, Nation Building and Ethnic Struggle, 1918–1930* (Ithaca, 1995): 29–48.
8. “Programul Partidului Național-Țărănesc,” *Aurora* (Bucharest) 6, 1481 (1926): 4.
9. Moldovan, *Amintiri și reflexiuni*, 42.
10. Catherine Waldby, *AIDS and the Body Politics: Biomedicine and Sexual Difference* (London, 1996), 5.
11. Alison Bashford, *Imperial Hygiene: A Critical History of Colonialism, Nationalism and Public Health* (London, 2004), 4.

12. Roger Griffin, *Modernism and Fascism: The Sense of a Beginning under Mussolini and Hitler* (London, 2007), 148.
13. Marius Turda and Paul J. Weindling, eds., *Blood and Homeland: Eugenics and Racial Nationalism in Central and Southeast Europe, 1900–1940* (Budapest, 2006).
14. Marius Turda, “The Nation as Object: Race, Blood, and Biopolitics in Interwar Romania,” *Slavic Review* 66, 3 (2007): 413–441.
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16. Moldovan, *Amintiri și reflexiuni*, 45.
17. Iuliu Moldovan, *Igiena națiunii* (Cluj, 1925), 5.
18. *Ibid.*, 63.
19. Iuliu Moldovan, “Biopolitica,” *Buletin eugenic și biopolitic* (Cluj) 1, 1 (1927): 4–7, 6.
20. Moldovan, *Amintiri și reflexiuni*, 88.
21. Iuliu Moldovan and Iuliu Hațieganu, “Introducere,” *Buletin eugenic și biopolitic*, I, 1 (1927): 1.
22. Charles-Edward A. Winslow, “The Untilled Fields of Public Health,” *Science* 51, 1306 (1920): 23–33, 30. In 1988, Sir Donald Acheson, Chief Medical Officer of the United Kingdom from 1983 to 1991, simplified the definition: “the art and science of preventing disease, prolonging life and promoting health through the organized efforts of society.”
23. Victor Babeș, “Considerațiuni asupra conducerii și organizării luptei noastre sanitare,” *Arhiva pentru reformă și știință socială* (Bucharest) 3, 2–3 (1921): 220.
24. “Congresul extraordinar al medicilor funcționari asistați de medicii practicieni,” *Sănătatea publică* 1, 4 (1921): 13–14.
25. Maria Bucur, *Eugenics and Modernization in Interwar Romania* (Pittsburgh, 2002), 191.
26. Președinția Consiliului de Miniștri, *Activitatea corpurilor legiuitoare și a guvernului de la ianuarie 1922 până la 27 martie 1926: Dare de seamă prezentată de D-l Ion I. C. Brătianu, Președintele Consiliului de Miniștri* (Bucharest, 1926): 337–34.
27. Petru Râmneanțu, “Fundația Rockefeller,” *Buletin eugenic și biopolitic* 16, 7–12 (1945): 120–143, 135.
28. Legea sanitară și de ocrotire, *Monitorul oficial* 154 (14 July 1930): 5338–5398.
29. Legea 174/2011 pentru aprobarea Ordonanței de urgență a Guvernului nr. 162/2008 privind transferul ansamblului de atribuții și competențe exercitate de Ministerul Sănătății Publice către autoritățile administrației publice locale, *Monitorul oficial* 730 (17 October 2011).
30. Norman Howard Jones, *The Scientific Background of the International Sanitary Conferences 1851–1938* (Geneva, 1975), http://apps.who.int/iris/bitstream/10665/62873/1/14549_eng.pdf (last accessed on 23.02.2017).
31. The International Sanitary Regulations (1951) and then the International Health Regulations (1969, 2005) represent a binding international legal agreement, whose

aim is to help the international community prevent and respond to acute public health risks that have the potential to cross borders and threaten people worldwide.

32. Iuliu Moldovan, "Modificarea legii sanitare și de ocrotire," *Buletin eugenic și biopolitic* 5, 7 (1934): 134–139.
33. Octavian Lupu, "O lege sanitară de-acum o jumătate de secol și un gând de reformă controversat," in *Trecut și viitor în medicină*, ed. Gheorghe Brătescu (Bucharest, 1981), 527–534.
34. Iuliu Moldovan et al., *Tratat de sănătate publică* (Cluj, 1947), 2.
35. Frank P. Grad, "The Preamble of the Constitution of the World Health Organization," *Bulletin of the World Health Organization* 80, 12 (2002): 981–984, 984.
36. Bucur, *Eugenics*, 220–233.
37. *Ibid.*, 197.
38. Maria Bucur-Deckard, Romania. Source: <http://eugenicsarchive.ca/discover/connections/530ba1c776f0db569b0000> (last accessed on 7.03.2017).

Abstract

Professor Iuliu Moldovan: From Biopolitics to Public Health

Professor Iuliu Moldovan (1882–1966), one of the leading medical personalities of Cluj, was also an important figure in the eugenic movement in Transylvania. He conceptualized eugenics almost entirely in national terms, and militated for a sanitary organization and activity determined by the need to ensure the biological prosperity of the human capital. In his attempt to modernize public health in Romania, and to emphasize the role of preventive medicine in maintaining the health status of the population, he laid the founding principles of a modern healthcare system that would remain his most important legacy. The Sanitary and Healthcare Law of 14 July 1930, as well as his comprehensive textbooks are still references for the public health professionals of today.

Keywords

Iuliu Moldovan, the Moldovan Law, public health, hygiene, eugenics