The History of Pharmacies in Northwestern Romania during the Communist Period

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HE POLITICAL changes¹ that took place after 23 August 1944 led to urgent measures that were meant to ensure the economic recovery of the country, diminish the consequences of the war and improve the healthcare system by rebuilding all destroyed institutions: hospitals and pharmacies. The subsequent implementation of the socialist system that also organized the medical service, like in other countries², was based on the nationalization of all healthcare establishments as well as of all private property^{3, 4}.

Firstly, several favorable measures were taken as to supply medicines to all areas, including the most remote ones. Pharmacies were still private property during this period. Because they were few in number, depending on the needs of the population, the state began to encourage the opening of new dispensaries. Under Bagdasar's law of 1946, the state granted many concessions especially for the opening of pharmacies in villages. Thus, the state set the industrialization⁵ of the country at the center of its economic policy and began the nationalization of the main means of production and the establishment of socialist ownership. This opened both the perspective of economic planning and of a forced industrialization that continued throughout the entire 40 years of communist dictatorship.

The pharmaceutical sector went through two stages until it became public property. In 1949, the private pharmacies and drugstores in urban worker centers were nationalized, followed in 1953 by the nationalization of those in rural areas. Just like the people's common goods, the nationalized healthcare establishments became state property. They were free of any tasks and were administered by the Health Ministry. Pharmacists ceased their activities as owners, becoming subordinate to the Health Ministry.

All the stages of the nationalization process, in all areas of activity, had been previously planned, including the nationalization of pharmacies. That is why, prior to the nationalization itself, Centrofarm pharmaceutical warehouse had been set up in Bucharest. Later it was transformed into a state-owned company. For this purpose, 17 branches of *Centrofarm* warehouse were set up under the name of *Regional Pharmaceutical Offices*. The pharmacies and drugstores in each county were subordinated to these branches.

This study is based on an analysis of the legislation in force. Additional information, concerning the *Pharmaceutical Office of Oradea* as well as other administrative institutions of the time, was found in the county archives. Old publications, documents and discussions with contemporary pharmacists were also very useful.

The *Pharmaceutical Office of Oradea* was created as a conglomerate of all the pharmacies in Bihor County. Its headquarters were in the village of Sânmartin, near Oradea city^{7, 8, 9}. In 1949, 27 pharmacies in Oradea, 17 in Bihor County, 1 chemical-pharmaceutical laboratory and 1 drugstore were nationalized¹⁰. In 1953, 21 rural pharmacies in Bihor County were nationalized. The gardens, yards and buildings where these pharmacies had functioned were nationalized as well¹¹.

Instead of the old names and firms, the new pharmacies were assigned numbers and became entities with no personality. The former owners' name and reputation, which had been dilligently gained over time, were erased from the collective memory. They were relocated to other villages, away from the places where they had had their businesses¹². In 1953 in Bihor County, the pharmacies run by the state were: pharmacies *no. 1-11* in Oradea; *no. 12* and *13* in Beiuş (the second largest town in the county); *no. 14* to *60* (excluding the numbers between 43 and 59) located in various smaller towns or villages¹³.

Under the new legislation, the pharmaceutical network included: urban and rural open (public) pharmacies, closed circuit pharmacies (in hospitals, clinics and polyclinics), drugstores, technical-medical and optical units, pharmaceutical working points and micro production laboratories. Specialized authorities were set up to supervise the distribution of medicines as well as to ensure their quality.

In the rural areas of Bihor County pharmacies were organized in accordance with the normative documents issued by the Ministry of Health, the General Pharmaceutical Directorate of Bucharest on 27 June 1953, under official letter 23886 to O.F.R. Centrofarm Oradea. Former owners were employed within the limits of the vacancies in the rural areas, those that remained after all the new graduates had been assigned a position. All graduates were assigned to rural pharmacies where the scheme provided for 2 pharmacist positions, and were employed on the second vacant position. Graduates could take charge of a pharmacy only after a training period of at least 6 months¹⁴.

Since not all former pharmacy owners could be hired in the rural pharmacies, they were sent back to the pharmacies they had once owned (this time as employees) in the following order: the personnel posted from another region, the personnel with family difficulties and other posted staff.

Documents from the archive provide some personal data about all the employees of Oradea Centrofarm (name, profession, position, date of birth, civil status, length of service). Based on the information provided by the personnel records, we have managed to draw up a statistics of the health professionals who were employed just one year after the nationalization of rural pharmacies. Among these professionals one may find the former owners of dispensaries ^{15, 16}. Most pharmacists in Bihor were Hungarians, Jews, Saxons or Slovaks, and only a third were Romanians ¹⁷.

At the end of 1954, the public healthcare personnel in Bihor County counted 245 employees: 1 director—*Spitzer Antonia*, 47 chief pharmacists, 38 pharmacists and 15 junior pharmacists. Besides them, each pharmacy had one or two cashiers and one janitor.

According to their personal data, we can conclude that approximately one third of the pharmacists were born in Bihor County^{18, 19, 20}.

All pharmacies had medium or highly skilled personnel, according to their needs: a pharmacist with a higher education degree (head pharmacist or chief of pharmacy) and a junior pharmacist. The junior pharmacist title was obtained after having passed an examination held by the Faculty of Pharmacy, formerly called *elevation* or *tyrocinnate* exam. Those with high school graduation diplomas and with a 5-year experience in pharmaceutical practice (a certificate signed by the health department and by the finance department certifying 5 years on the payroll) had the right to sit the examination²¹.

In addition to the practical work carried out in pharmacies, some pharmacists also had scientific and research preoccupations. They organized symposiums where they presented their own papers or reviews of specialized papers. The report set up in 1964 by the Pharmacy Department in Marghita District shows these preoccupations. The department had 12 pharmacists and 8 assistants. In 1964, the pharmacists, led by *Gy rgy Agota* and *Cziriak Eva*, organized three symposiums with 21 papers and 8 sessions where 43 works and 10 journal reviews were presented. All these helped to improve the pharmacists' professional training²².

Following the nationalization of rural pharmacies on 16 May 1953, the Pharmaceutical Office of Oradea had to reorganize several pharmaceutical points, the recently nationalized pharmacies or the pharmacies whose area of activity included the respective pharmaceutical points. It also had to ensure a wise distribution of the units in the territory. New pharmacies, kiosks and pharmaceutical points were set up in the localities where their presence was requested, especially in worker centers and in rural areas. In isolated communes, second degree pharmaceutical points were built within healthcare districts, so as to raise the level of healthcare in rural areas²³.

Pharmacist *Paneth Alexandru* was in charge of the pharmaceutical points in Bihor County. Each region had a chief pharmacist. All regional pharmacy chiefs, coordinators of the pharmaceutical points, were required to train the employed pharmacists on the proper functioning of the dispensaries, any time they did fieldwork²⁴.

The two inventories that were carried out in 1953 show that the annual revenues of the pharmaceutical points were of 307,420 lei, while the revenues for 1952 stood at 179,194 lei. We notice a revenue increase of 71% concomitant with the increase in the number of pharmaceutical points²⁵. The medicines that could be sold by pharmacies and the medicines that could be sold by pharmaceutical points were stipulated in a specific standard for each type of dispensary. Thus, there was one standard for pharmaceutical points and another standard for pharmaceutical kiosks^{26, 27}.

The monthly income was rising, but there were situations when it decreased, usually due to the withdrawal of certain medication. Thus, under Order 14/337 of 2 April 1953, the income shrank considerably due to the withdrawal of several medicines that were no longer in the standard (Burow tablets, Sulfatiazole tablets, Fosfocalcin, Sirocol)²⁸.

The authorities showed a permanent interest in establishing new pharmacies and pharmaceutical points as well as in supplying them with furniture and drugs. New pharmaceutical points were set up especially in worker centers and in rural areas as they were necessary. First degree pharmaceutical points (pharmaceutical kiosks) were subordinated

to and directly supplied by the Pharmaceutical Office of Oradea. They were not allowed to sell toxics or illicit drugs. Second degree pharmaceutical points were established in remote villages. They were subordinated to the health departments and functioned under the supervision of a public pharmacy²⁹. Third degree pharmaceutical points were founded especially in rural areas and were included in the village cooperative³⁰.

On 30 June 1954 the pharmaceutical network in Bihor included 1 warehouse, 41 pharmacies, 2 pharmaceutical branches, 1 drugstore, 1 technical-medical society and 215 pharmaceutical points, distributed in various towns and their 7 districts.

The records of the pharmaceutical points in the Crişana region were as follows:

- in Aleşd district *Pharmacy 22* in Aleşd, *Pharmacy 26* in Tileagd, *Pharmacy 30* in Borod, and *Pharmacy 31* in Bratca; a number of *25 pharmaceutical points* in the surrounding villages belonged to them.
- in Beiuş district *Pharmacy 12* and *13* in Beiuş, *Pharmacy 14* in Ceica, *Pharmacy 19* in Sudrigiu, *Pharmacy 32* in Ginta, *Pharmacy 21* in Vaşcău; a number of *47 pharmaceutical points* belonged to them.
- in Marghita district *Pharmacy* 15 in Marghita, *Pharmacy* 27 in Derna, *Pharmacy* 28 in Voievozi; 27 pharmaceutical points belonged to them.
- in Oradea district *Pharmacies 1-11* in Oradea, *Pharmacy* 40 in Tărian, with 43 pharmaceutical points.
- in Săcueni district *Pharmacy 16* in Săcueni, *Pharmacy 24* in Valea lui Mihai, with 18 pharmaceutical points.
- in Salonta district *Pharmacy 17* in Salonta, *Pharmacy 18* in Salonta, *Pharmacy 20* in Tinca, with 29 pharmaceutical points.
- in Şimleul Silvaniei district *Pharmacy 23* in Şinteu, *Pharmacy 25* in Sărmăşag, *Pharmacy 34* in Suplacul de Barcău, with *25 pharmaceutical points* ^{31,32}.

The number of these units increased annually, until 1965, when the pharmaceutical network included 80 pharmacies: 60 open circuit pharmacies (22 urban, 38 rural) and 20 closed circuit pharmacies (14 urban, 6 rural). Besides these, there were another 23 first degree pharmaceutical points (3 urban, 20 rural), 236 second degree pharmaceutical points (1 urban, 235 rural) and 3 third degree ones (rural)^{33, 34}.

Beginning with the first communist decade, the state was preoccupied to constantly improve the population's health. Consequently, the medical logistical material increased thanks to the significant funds that were allotted: 3 hospitals were built (Aleşd, Marghita, Nucet), 2 hospitals were extended (Beiuş, Salonta) and 87 rural medical dispensaries were established³⁵.

Between 1966 and 1975 the county healthcare network included 14 hospitals, 111 health divisions, 9 area and enterprise outpatient clinics, 51 birth houses and 64 open circuit pharmacies. In addition, 823 physicians, 133 pharmacists and 3,612 medium-level healthcare workers provided medical assistance³⁶.

As the years passed, a series of changes took place in the administrative organization of Bihor County: new communal centers were founded because of the expansion of the villages, several towns became municipalities and some villages turned into towns. Once the population increased, new districts were erected which led to the formation of new departments to supply people with medication.

The way healthcare was organized in the county is also reflected by the reports of the district health departments from this period. Physician *Lazăr Gheorghe*'s report for the year 1957 says that in the district of Lunca Vașcăului medical assistance was ensured by the hospital and the clinic in Nucet, by two polyclinics in Băița and Ştei, by 9 rural health circuits and by 2 polyclinics. The staff included 5 doctors, 6 pharmacists and 396 medium-level and administrative personnel. *Pulca Ioan, Tulvan Elena, Kovacs Stefan, Klein Margareta* and *Ciolac Ileana* were the pharmacists³⁷.

In the same period, in Săcueni district there functioned: the Unified Hospital of Săcueni district with 16 employees, the rescue station with 3 employees, the circuit hospital in Valea lui Mihai, company dispensaries, the tuberculosis dispensary, the paediatric dispensary in Diosig, a number of school medical rooms and 6 rural health circuits staffed with highly or medium skilled specialists³⁸. The correspondence of the medical authorities shows their preoccupation for a proper medical supply and quality. At the order of the General Pharmaceutical Directorate, commissions were set up at the level of the closed-circuit medical facilities. These commissions had to follow and report their findings in order to improve the quality of medical drugs.

A quality control committee operated within the pharmaceutical office. For example, in 1962, 681 samples were collected for analysis from the pharmaceutical units, of which, according to the reports of the regional control laboratory, 18% were inadequate³⁹.

According to the report of the county laboratory for drug control, during the first semester of 1969, 756 samples were collected for analyses: 200 chemical substances, 180 galenics, 346 magistral preparations and 52 specialties. Of these, 71 samples (or approximately 9%) were declared inappropriate. Pharmacist *Kiss Ladislau* was head of the laboratory⁴⁰.

Funds were allocated to move some of the pharmacies into more suitable buildings and to buy adequate furniture and appropriate equipment. After repairs and transformations, some pharmacies changed their appearance entirely, both inside and outside. The serving space increased in order to meet the needs.

Many pharmacies were modernized:

- *Pharmacy 12* in Beiuş for whose painting and facade the sum of 24,000 lei was spent in 1961⁴¹.
- Pharmacy 33 in Sălacea, Pharmacy 36 in Diosig, Pharmacy 15 in Marghita, Pharmacy 26 in Tileagd, Pharmacy 37 in Episcopia, Pharmacy 39 in Sălard to which considerable improvements were brought in 1962⁴².
- *Pharmacy* 20 in Tinca whose repairs carried out in 1963 amounted to 49,989.85 lei⁴³
- Pharmacy 37 in Episcopia, where the repair work amounted to 55,500 lei in 1967⁴⁴.
- Pharmacy 34 in Suplacul de Barcău with funds of 34,000 lei from the National Bank on 28 June 1967⁴⁵.
- *Pharmacy 14* in Ceica, *Pharmacy 32* in Ginta, *Pharmacy 16* in Săcueni, for different arrangements between 1968 and 1969^{46, 47, 48, 49}.
- *Pharmacy 29* in Vadu Crişului where for the construction of a new 220 m² building 320,000 lei were spent in 1971⁵⁰.

- *Pharmacy 17* in Salonta, *Pharmacy 34* in Suplacul de Barcău, *Pharmacy 37* in Episcopia where for the purchase of equipment and furniture required for the emergency service, the sum of 101,093 lei was spent in 1971⁵¹.
- Pharmacy 22 in Aleşd, Pharmacy 26 in Tileagd, Pharmacy 15 in Marghita, for capital repairs between 1971 and 1975, and Pharmacy 86 in Batăr, Pharmacy 65 in Şuncuiuş, in 1981⁵².

In 1981, the Pharmaceutical Office of Oradea counted 47 public pharmacies (2 permanent, 17 semi-permanent, 28 with a normal schedule), 17 hospital pharmacies, 3 outpatient clinic pharmacies, 16 first degree pharmaceutical points and 86 second degree subordinated ones. The staff of the pharmaceutical departments counted: 160 pharmacists, of which 120 in Oradea and in other towns, 14 pharmacists in suburban villages and 26 pharmacists in the villages, 251 medium-level healthcare professionals and 61 persons as auxiliary staff⁵³.

The incapacity of the national industry and the serious limitation of imports forced pharmacies to continue to prepare medicines in their laboratories. The old art of creating pharmaceuticals in the dispensary, from classic galenic preparations to IV preparations, developed and remained at high standards. By filling a large number of prescriptions, pharmacists tried as much as they could to compensate for the insufficient industrial pharmaceutical output.

Depending on the volume of their activity, pharmacies were classified into four categories (degrees), from 1 to 4, according to the number of *magistral* prescriptions filled and to the general volume of medication released, expressed by value. Each category of pharmacy was assigned a surface and a number of employees. Over 85% of the public pharmacies in Bihor belonged to the fourth degree.

In 1989 the pharmaceutical sector in Bihor included 26 open circuit pharmacies in the urban area (first degree - 1, second degree - 8, third degree - 9, fourth degree - 8) and 21 open circuit pharmacies in the rural zones (third degree - 2, fourth degree - 19). The 21 rural pharmacies provided medication for 340,835 residents, meaning 16,230 inhabitants per pharmacy. We must also consider the approximately 100 pharmaceutical points. Besides these pharmacies, in the territory there were also six closed circuit pharmacies functioning within the hospitals and the outpatient clinics in towns or industrial centres⁵⁴.

One of the most important measures that were taken in the pharmaceutical field during the communist period was the establishment, beginning with 1949, of the Regional Pharmaceutical Offices. They included all the pharmacies and had organizational, economic and technical attributions. For a proper organization and fair territorial distribution of pharmacies in the county, each pharmacy was assigned about 10,000 inhabitants. This figure would be reached in rural areas only in the 1970s. The legislation and the organizational measures that were taken led to the setting up of a centralized healthcare system.

In this period, the existing medical facilities were modernized and refurbished due to investments that were allocated for Bihor County. In order to provide medical assistance in all territories, new hospitals, dispensaries, territorial outpatient clinics, pharmacies and laboratories were built in the towns. As far as the specialized healthcare staff was concerned, one may notice significant progress. In 1975 statistics showed that in the county there were 823 doctors, 133 pharmacists and 3,612 medium-level healthcare profsessionals⁵⁵. Medication supply was guaranteed by developing the chemical and pharmaceutical industry and by widening the county pharmacy and drug warehouse network.

This paper can be considered a contribution and an integral part of the research activity in the field of Pharmacy History, as it mentions some important aspects regarding the evolution of the Romanian pharmaceutical sector. The establishment of the Soviet political regime, after the end of World War II, led to profound changes in the field of public pharmacy, following the nationalization of pharmacies. By setting up the central drug warehouse, pharmacies were fully taken over and assigned to the 17 Regional Pharmaceutical Offices. Pharmacists, whose pharmacies had been nationalized without any compensation, were no longer allowed to work in the pharmacies they had once owned, being posted to other areas. The profession of pharmacist decayed and became a humiliating one. Pharmacists were helpless before the system and ended up being disregarded and treated as mere shop assistants.

The whole period was characterized by major drug deficiencies due to the drastic limitation of imports and excessive centralized planning. Pharmacies in major cities were supplied once a week and those in rural areas once a month⁵⁶. The chronic shortage of industrial preparations forced pharmacists to pay particular attention to the preparation of magistral prescriptions, leaving the release of medicines and patient counselling to pharmacy assistants who had fewer studies in the field.

Gradually, things improved with the construction of new healthcare units and the increase in the number of doctors, pharmacists and healthcare professionals at the county level. The demographic evolution, which later led to the increase in drug consumption, as well as the improvement of the national health policies led to the development of the Romanian chemical and pharmaceutical industry.

The achievements of this era, regarding the protection of the population's health, are unquestionable and should not pass unnoticed. However, the regime did have its own limitations⁵⁷ in this field, caused by nationalization, which led to a market without competition, excessive planning, centralization, a lack of free initiative and to the disappearance of the traditional concept and personality of the pharmacies that had functioned before the communist period⁵⁸.

Notes

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Abstract

The History of Pharmacies in Northwestern Romania during the Communist Period

The article presents the organization and evolution of the pharmaceutical sector in Bihor County in the communist era, from the nationalization until 1989. Moving towards a new society based on socialist ownership over production means by way of nationalization meant the end of private property in all fields of activity. Under Decree no. 134/2 April 1949 the health departments and pharmacies in all towns were nationalized, and under Decree 418/1952 the pharmacies in the rural areas had the same fate. Pharmacies became state property, subordinated to the *Pharmaceutical Office of Oradea*, with a new and centralized form of activity. On the one hand, during this interval, the number of pharmacies suffered little changes; on the other hand, in order to supply the population with medical drugs, a series of pharmaceutical points were established in more remote areas. This type of structure of the pharmaceutical network was maintained until 1989.

Keywords

history of pharmacies, Bihor County, communist period, nationalization, Oradea Pharmaceutical Office