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The Industrial Committee of the Medical Society of Kraków (1886–1912)

The Medical Society of Kraków [MSK, Polish: Towarzystwo Lekarskie Krakowskie] was incorporated in 1866 following an initiative of dr. Aleksander Kremer and physicians gathered around him, who, for quite a time, had regularly met for scientific sessions of the physicians' section of the Academic Society of Kraków [Polish: Towarzystwo Naukowe Krakowskie]. The meetings resulted in scientific publications in "Rocznik", the society's annual journal. The quick progress in medicine, increasing numbers of physicians, and the ever expanding demand for academic development in the field as well as an increasing interest in professional matters were the reason why a decision was reached to start an independent learned society that would contribute to the professional development of physicians by exchanging experiences. Initially, the gentlemen met in their own closed circle in Kremer's home. The first official meeting of the newly established society was held on 18 December. The activity of the society, established in Kraków, at the time being the cultural, academic, and also social centre of Galicia, quickly flourished. Not only did it become the centre for education and dissemination of modern medical

ideas, but also conducted broadside social activity, mostly within Galicia. It made physicians from various parts of partitioned Poland communicate in unified Polish medical terminology, which at the time of rapid development of medicine and coinage of new words was neither easy nor obvious. To develop such a diverse and intensive activity, the society developed a plethora of temporary and standing committees. Some of them ceased to exist very quickly, once a specific problem had been solved, others were incorporated for long-term activities and operated for years. One of the largest and most important committees was the Industrial Committee, which in a sense continued the operation of another gigantic committee, namely that dealing with balneology. The Balneological Committee of the MSK has been the object of detailed studies providing good insight into its operation.¹ However, besides this area, the history of the Medical Society of Kraków, still vibrantly functioning in the city, has not been researched in detail. Only several incidental works have been published, notably those on the 100th anniversary of incorporating the Medical Society of Kraków (1966),² on the Medical Society of Kraków in 1866–1918,³ for the 135th anniversary of forming the Medical Society of Kraków (2003),⁴ and the Jubilee Book (2006).⁵

The key problem is the near absence of archival materials, which were stored in the basement of the House of the Medical Society of Kraków at 4 Radziwiłłowska Street. Gathered for years, the archive included all the materials related to the activity of the society, and therefore also to the work of the committee, so that they were always at hand, to be available for browsing by members of the MSK.⁶ However, in the wake

- 1 M. Nowakowska-Zamachowska, *Towarzystwo Lekarskie Krakowskie 1866–1914. Komisja Balneologiczna*. Kraków 2008, PhD thesis, http://dl.cm-uj.krakow.pl:8080/Content/1034/Doktorat_monika-080212ok.pdf (Accessed on: 11 July 2022).
- 2 J. Bogusz, K. Lejman, *W setną rocznicę założenia Towarzystwa Lekarskiego Krakowskiego*, Kraków 1966.
- 3 Z. Gajda, M. Nowakowska-Zamachowska, *Towarzystwo Lekarskie Krakowskie w latach 1866–1918*, “Przegląd Lekarski” 58 (2001) suppl. 6, p. 2, https://ruj.uj.edu.pl/xmlui/bitstream/handle/item/272495/gajda_nowakowska-zamachowska_towarzystwo_lekarskie_krakowskie_2001.pdf.
- 4 *135 lat Towarzystwa Lekarskiego Krakowskiego*, Kraków 2003.
- 5 *Księga Jubileuszowa*, ed. by I. Gościński, A. B. Skotnicki, Kraków 2006.
- 6 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie II z 5 marca 1892, “Przegląd Lekarski” 31 (1892) no. 21, p. 258.

of a hot water pipe that belonged to the heating system of the building bursting and flooding the premises of the archive, the society did not manage to save its archives or library collections. A query conducted in Kraków archives brought results far from expected. Only scanty information on MSK that hardly contributed anything to the state of the art was found: bills for office materials and cleaning agents. The main source of knowledge on the committee and society are the reports that were published in “Przegląd Lekarski”: a professional medical journal that doubled for the media outlet of the society. The reports are the minutes of the meetings made by the secretary of the committee or by another member standing in. The reports were printed regularly, and featured the date of the meeting plus a detailed description of the activities taken and subjects addressed at a meeting as well as reports from the tasks assigned to committee members. Some of the scientific problems discussed at the meetings were later printed in “Przegląd Lekarski” as separate academic publications.

The purpose: The purpose of this paper is to present the history of the Industrial Commission operating within the Medical Society of Kraków. The work continues the author’s research on the oldest Polish medical society, still active today, whose history has nonetheless not yet been studied in detail.

The method: The publication primarily makes use of the materials printed in “Przegląd Lekarski” and supplements thereto. It also draws from a number of 19th-century scientific monographic works including Ema Jaworska, Walery Jaworski, *Kuchnia higieniczna ze szczegółowym uwzględnieniem potrzeb chorych* [literally: Hygienic cooking with particular consideration of the needs of the ailing] and Ludomił Korczyński, *Zarys balneoterapii i balneografii krajowej. Dla użytku lekarzy i uczniów* [literally: Outline of domestic balneotherapy and balneography. For the use of doctors and students]. Biographical information was taken from the *Polski słownik biograficzny* [literally: The Polish biographical dictionary], Stanisław Koźmiński’s *Słownik lekarzów polskich* [literally: Dictionary of Polish physicians], the Repository of the Jagiellonian University, Jagiellonian University’s website: in memoriam, and the *Wielka ilustrowana encyklopedia Gutenberga* [literally: The Great illustrated Gutenberg encyclopedia]. Contemporary printed sources used include Ewa Wyka, *Mechanik Uniwersytetu Jagiellońskiego Władysław Antoni Grodzicki i jego skraplarki gazów* [literally: A mechanic of the Jagiellonian University Władysław Antoni Grodzicki and his gas condensers], and Edward Waszyński, *Historia położnictwa i ginekologii w Polsce* [literally: History of obstetrics and

gynaecology in Poland]. Also the author's earlier publications on the Balneological Commission and the Medical Society of Kraków in, both printed and digitised, have been used.

Establishment of the Industrial Committee

At a meeting of the Medical Society of Kraków on 3 February 1886, dr. Edward Korczyński, a well-known Kraków professor of internal medicine and head of the Medical Clinic, proposed that, “recognising the need to take care of the national industry in the field of healthcare, the MSK”⁷ should reinstate the Standing Committee for the Promotion and Protection of National Industry for Therapeutic Purposes that operated here previously (1878–81). The new committee was given the task of “searching, evaluating, and maintaining a continuous record and supporting those national chemical, pharmaceutical, dietary, diagnostic and therapeutic tools, and materials used for patient and dressing care that the Committee would recognise good and suitable for the purpose. All secret and so-called universal remedies are strictly excluded from the remit of the Committee.”⁸ A team composed of the chairman, dr. Leon Blumenstok (Halban) professor of forensic medicine recognised in the academic world and the polite society, and the deputy head of the surgical department of St Lazarus Hospital in Kraków,⁹ dr. Alfred Obaliński, professor of the Jagiellonian University, secretary and rapporteur of MSK meetings,¹⁰ and Antoni Gluziński, a young, promising scientist, later a professor of internal medicine in Kraków, Lviv, and Warsaw¹¹ was formed to consider this issue. The committee also included professor of gynecology in Kraków dr. Antoni Rosner,¹² a world-renowned professor of surgery

7 *Sprawozdanie komisji wybranej do roztrząsania wniosków prof. Korczyńskiego i doc. Gluzińskiego*. Special supplement to “Przegląd Lekarski” 25 (1886) no. 16, p. 1.

8 *Sprawozdanie komisji...*, p. 1.

9 J. Wordliczek, *Leon Blumenstok (Blumenstok)-Halban (1838–1897)*, https://ruj.uj.edu.pl/xmlui/bitstream/handle/item/169373/wordliczek_leon_blumenstok_blumenstok-halban_1838-1897_2014.pdf (Accessed on: 4 July 2022).

10 J. Paruch, J. Lisiewicz, *Obaliński Alfred Karol (1843–1898)*, in: *Polski słownik biograficzny*, ed. by E. Rostworowski, Z. Albert, vol. 23, Wrocław 1978, pp. 421–422.

11 W. Szumowski, *Gluziński Władysław Antoni (1856–1935)*, in: *Polski słownik biograficzny*, ed. by K. Lepszy, vol. 8, Wrocław 1959–1960, pp. 84–86.

12 E. Waszyński, *Historia położnictwa i ginekologii w Polsce*, Wrocław 2000, pp. 98–100.

dr. Jan Mikulicz-Radecki,¹³ and physicians dr. Aleksander Zarewicz and dr. Kazimierz Grabowski. A month later, the committee presented its findings to the society. They were made into a resolution on 7 April 1886: “The Med. Soc. of Krak. Acting on behest of Korczyński’s proposal establishes hereby a committee for the protection and promotion of national industry products used in medical practice”.¹⁴ The original Industrial Committee¹⁵ were: eminent physiologist, discoverer of adrenaline, co-creator of world endocrinology, head of the physiology department in Kraków, dr. Napoleon Cybulski,¹⁶ pioneer of Polish radiology and gastrology, future professor of the Jagiellonian University and head of the Medical Clinic, dr. Walery Jaworski,¹⁷ pharmacologist, professor of pharmacology and pharmacognosy at the Jagiellonian University, head of the department of pharmacology dr. Józef Łazarski, Edward Korczyński, Jan Mikulicz-Radecki, Alfred Obaliński, and Antoni Gluziński. The Industrial Committee was incorporated at its first meeting on 18 May 1886. Edward Korczyński was elected chairman, Obaliński — his deputy, and Gluziński — the secretary.¹⁸

Purposes of the Industrial Committee

The tasks Edward Korczyński defined in the introduction to the proposal were approved. Specialists, that is experts on the subject, both members and non-members of the Medical Society of Kraków, who agreed to assist in a specific case assessed instruments and products.¹⁹ Starting on 20 May 1890, the tasks of the Industrial Committee were expanded by the addition of support for domestic spas and resorts, and the Polish balneological industry, following the official resolution of the board of the Medical Society of Kraków transferring the duties of the recently

13 E. S. Olszewski, *Mikulicz Jan Antoni (1850–1905)*, in: *Polski słownik biograficzny*, ed. by E. Rostworowski, W. Albrecht, vol. 21, Wrocław 1976, pp. 173–175.

14 *Sprawozdanie komisji...*, p. 1.

15 *Sprawozdanie komisji...*, p. 2.

16 L. Wachholz, *Cybulski Napoleon Nikodem (1854–1919)*, in: *Polski słownik biograficzny*, ed. by W. Konopczyński, vol. 4, Kraków 1938, pp. 116–118.

17 M. Skulimowski, *Jaworski Walery (1849–1924)*, in: *Polski słownik biograficzny*, ed. by E. Rostworowski, vol. 11, Wrocław 1964–1965, pp. 113–115.

18 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 18 maja 1886, “Przegląd Lekarski” 25 (1886) no. 25, p. 346.

19 *Sprawozdanie komisji...*, p. 2.

dissolved Balneological Committee to the Industrial Committee.²⁰ Now, the Committee had the right “to communicate with entrepreneurs and manufacturers, to obtain comprehensive information, however, submitting each and every assessment of a processed or medical product to the resolution of the Med. Soc. Only based on the resolution of the Med. Soc., the president of the Med. Soc. of Krak. in agreement with the committee’s chairman can issue certifications on the use/advantage of any product, and the Med. Soc. of Krak. Shall decide on the manner in which such a verified product should be supported.”²¹ Beginning with 2 May 1888, the motions of the Industrial Committee were presented to the committee of the Medical Society of Kraków, upon whose request the MSK approved them in its meetings. On 2 January 1889, the MSK decided that the Committee’s proposals must be presented directly at the MSK meetings and approved by voting.²²

Members of the Committee

The Committee was elected for a period of three years, and obliged to submit annual reports on its activities at the annual administrative meeting of the MSK. After three years, it was required to submit a general report, decisive for its further operation or dissolution.²³ It was composed of seven active members of the MSK, who elected the chairman, deputy, and secretary from among their number.²⁴ On 18 March 1891, in the wake of assumption of duties that previously belonged to MSK’s Balneological Committee, the Industrial Committee amended its regulations. The changes included increasing the number of ordinary members of the Committee to ten. It now included three professional balneologists: Leon Kopff, dr. Władysław Ściborowski, and dr. Bolesław Skórczewski.²⁵ At the same time, a permanent balneological subcommittee was formed. It consisted of PhD Karol Olszewski, professor of chemistry and physics at Jagiellonian

20 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 20 maja 1890, *Przegląd Lekarski*” 29 (1890) no. 32, p. 461.

21 *Sprawozdanie komisji...*, p. 2.

22 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 29 stycznia 1889, *Przegląd Lekarski*” 28 (1889) no. 9, p. 112.

23 *Sprawozdanie komisji...*, p. 2.

24 *Sprawozdanie komisji...*, p. 2.

25 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 9 marca 1891, *Przegląd Lekarski*” 30 (1891) no. 16, pp. 212–213.

University, inventor of the cascade method of gas condensation,²⁶ Kopff, Ściborowski, Skórczewski.²⁷

There is no full list of members in the sources. However, it is known that Edward Korczyński resigned as chairman in May 1895,²⁸ and died in September of the same year. Another entry regarding the chairman states that dr. Ludomił Korczyński,²⁹ professor of balneotherapy and climatotherapy at the Jagiellonian University, founder and chairman of the Polish Balneological Society (1905–36),³⁰ who became a member of the Committee in December 1905,³¹ served as its chairman until November of the following year. Leaving the city, had to resign from his position, which in 1907 was temporarily taken over by dr. Michał Seńkowski. Later in the year, the Committee practically suspended its activities. In 1908–10, its chairman was dr. Gustaw Bielański,³² and in December 1911 — *Privatdozent* Erwin Mięśowicz.³³ Antoni Gluziński held the post of the secretary until 1891, when had to resign from the Committee due to his appointment to the position of the MSK Chairman. His place was taken by dr. Stanisław Ponikło.³⁴ However, due to his absence from the meetings, dr. Stefan Skrzyński acted as secretary. In the following year, dr. Michał Śliwiński became the secretary and was replaced in 1906 by Bolesław Korolewicz,

26 Z. Wojtaszek, *Olszewski Karol Stanisław (1848–1915)*, in: *Polski słownik biograficzny*, ed. by E. Rostworowski, vol. 24, Wrocław 1979, pp. 27–30.

27 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 9 marca 1891, p. 213.

28 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 4 maja 1905, "Przegląd Lekarski" 44 (1905) no. 26, p. 411.

29 S. Koźmiński, *Słownik lekarzów polskich obejmujący oprócz krótkich życiorysów lekarzy Polaków oraz cudzoziemców w Polsce osiadłych, dokładną bibliografią lekarską polską od czasów najdawniejszych aż do chwili obecnej*, Warszawa 1888, p. 231.

30 *Wielka ilustrowana encyklopedia Gutenberga (1934–1939)*.

31 Towarzystwo Lekarskie Krakowskie, Posiedzenie wyborcze z 20 grudnia 1905, "Przegląd Lekarski" 45 (1906) no. 7, p. 127.

32 Towarzystwo Lekarskie Krakowskie, Posiedzenie administracyjne w dniu 13 stycznia 1909, "Przegląd Lekarski" 48 (1909) no. 6, p. 98; Towarzystwo Lekarskie Krakowskie, Posiedzenie 12 grudnia 1910, "Przegląd Lekarski" 50 (1911) no. 2, p. 25.

33 Towarzystwo Lekarskie Krakowskie, Posiedzenie z 20 grudnia 1911, "Przegląd Lekarski" 51 (1912) no. 2, p. 42.

34 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 20 grudnia 1890, "Przegląd Lekarski" 30 (1891) no. 7, p. 101.

a member of the Committee since December 1905.³⁵ Śliwiński became a member of the Committee in December 1891, taking the place vacated by Jaworski.³⁶ He was admitted to the Committee in recognition of his organisational skills. In 1881 he “distinguished himself by the excellent arrangement of the medical exhibition at the layest Congress of Polish Physicians and Natural Scientists”.³⁷ An authority of the first order, dr. Odon Bujwid, only joined the Committee at the end of 1894, when Kazimierz Grabowski left it.³⁸ Approved in the same year was also Leopold Adametz.³⁹ Feliks Sobierajski was admitted to the Committee as a permanent rapporteur for pharmaceutical matters in 1891.⁴⁰ He participated so actively in the works and his assistance was so highly valued that, when he tendered his resignation from the Committee in 1896, it was not accepted.⁴¹

Finances

The rules and regulations of the Industrial Committee contain no references to financial resources. Nor did the Committee elect any members to serve as treasurers, at least according to the sources available. It is only known that the Committee’s office expenses were borne by MSK.⁴² Yet, it was recorded in 1892 that the funds had been exhausted, so the Committee were drawing from MSK’s funds.⁴³ There had been earlier reports that the conditions for analysing at least some products and inspecting local facilities were individually negotiated with the owners: “On submitting,

35 Towarzystwo Lekarskie Krakowskie, Posiedzenie 12 grudnia 1910, p. 25.

36 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VII z 5 grudnia 1891, “Przegląd Lekarski” 31 (1892) no. 2, p. 24.

37 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie IV z 12 maja 1891, “Przegląd Lekarski” 30 (1891) no. 23, p. 295.

38 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 12 listopada 1894, “Przegląd Lekarski” 34 (1895) no. 4, p. 58.

39 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 12 listopada 1894, p. 58.

40 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie IV z 12 maja 1891, p. 295.

41 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie IV z 18 listopada 1895, “Przegląd Lekarski” 35 (1896) no. 1, p. 13.

42 *Sprawozdanie komisji...*, p. 2.

43 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie II z 5 marca 1892, pp. 258–259.

the manufacturer of beer fortified with iron was given guidelines as to the conditions that would allow the committee consider evaluating the product”.⁴⁴ The committee is also known to have used its own funds to pay for certain advertisements of recommended products for other activities serving the Polish industry. Perhaps such individual conditions concerned not only matters related to product quality improvement but in some cases might involve specific funds. The committee had no official price list for its services.

Meeting statistics

Intended to be held twice a month, the meetings of the Committee were less regular from the start to become increasingly infrequent with time, and as a rule were not held in the spa season, tantamount to today's summer holidays. At that time, some of the physicians working in the committee moved to spa resorts, where they were employed as spa doctors. Such a practice was not only financially profitable but it also allowed them to conduct scientific balneological research. The meeting statistics are but guesstimates, as most of the meetings were not numbered and, bearing in mind the possibility that not all the meetings might have been recorded in “Przegląd Lekarski”, no accurate calculations are possible. Thus, in 1886 and 1887, the committee met 10 times, in 1888 – 7 times, in 1889 – 6, in 1890 – once, in 1891 – 7, in 1892 – 5, 3 meetings were recorded both in 1893 and in 1894, in 1895 there were 5, in 1896 – 3, in 1897 – 4, in 1898 – 5, in 1899 – only one, then no meetings were recorded in 1900 and 1901, and in 1902 and 1903 there were 2 meetings each year, in 1904 and 1905 – just one meeting a year, and in 1906 the committee met 3 times. In 1907, the Committee did not operate due to the lack of a suitable candidate to serve as chairman. In 1908, dr. Gustaw Bielański became the chairman, and the report from the MSK annual administrative meeting of January 1909 informs that the committee held at least two meetings in 1908.⁴⁵ In the following years, there are no reports of meetings in “Przegląd Lekarski”. However, lack of meetings does not seem to denote lack of activity.

Choosing individuals or special subcommittees, which worked according to their own standards, for solving various problems was a frequent

44 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 9 marca 1891, p. 213.

45 Towarzystwo Lekarskie Krakowskie, Posiedzenie administracyjne w dniu 13 stycznia 1909, p. 98.

practice, and only the results of their activity were presented at the meetings. For example, the subcommittee chosen on 12 March 1891 to formulate suggestions for the incorporation of a national pharmaceutical and chemical factory, which consisted of professor and architect PhD Gustaw Steingraber, pharmacist Feliks Sobierajski, Michał Śliwiński, and pharmacist Dobrowolski,⁴⁶ was not dissolved despite issuing a negative opinion on the project, and pursued the work on its idea of establishing a central domestic hub, operating under a grand and original name of *wielka drougeryja*, whose task it would be to supply pharmacies with Polish and foreign products. It was to act as the wholesale hub for medicinal, dietary, and hygienic products, and domestic herbs.⁴⁷ Another example is the subcommittee appointed on 18 May 1886 to support domestic production of surgical tools, bandages, and orthopedic instruments. Its rationale was to issue opinions about domestic manufacturers and plants producing such equipment. The committee dealt, among others, with the case of Ludwik Knapiński's factory, whose products won a silver medal at the Congress of Polish Physicians and Natural Scientists.⁴⁸

Activity of the Committee

The main activity of the Industrial Committee focused on evaluating pharmaceuticals and medical supplies before applying to MSK for endorsing such products (issuing certificates). The certification process consisted in qualitative evaluation of medical product and medication samples received. In the case of pharmaceuticals, besides the products themselves also entire production lines in the plants applying for recommendation were assessed. Evaluation covered purity and technology of manufacture. The process was not limited to reviewing documents as it involved a visit from a delegated member of the Committee to the plant or pharmacy for an on-site inspection. The following step in the assessment was the chemical analysis of the composition of the tested substance, that is checking whether the composition matched the manufacturer's description. Additionally, if a specific product required, the

46 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VI z 5 listopada 1891, "Przegląd Lekarski" 30 (1891) no. 50, p. 633.

47 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie I z 3 lutego 1892, "Przegląd Lekarski" 31 (1892) no. 14, p. 167.

48 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VI z 5 listopada 1891, p. 633.

method of its preparation for use was tested, e.g. ease of dissolution, formation of a paste, or another pharmacologically active form. The process culminated in clinical testing conducted by assistants supervised by professors of internal medicine, pediatrics, and surgery at the Kraków Clinical Hospital. It was the final stage: testing on an appropriately selected clinical group, being the patients of the clinical hospital. Importantly, as a rule, research was supervised by professors of great renown in the medical world and – in Galicia – also in public and circles and the society, which significantly raised the status of the certificates issued. First, they were, with few exceptions, issued for an indefinite time. Later, some received individual expiry dates. The longest-standing recommendations were in some cases revoked. For instance, a decision was reached in 1889 that certificates issued from 1879 to 1882 would lose their validity unless the manufacturers resubmitted the products for reassessment.⁴⁹ Manufacturers of recommended products had the right to mark them with “Polecane przez Towarzystwo Lekarskie Krakowskie”, that is Recommended by the Medical Society of Kraków. Such information was also included in advertisements printed in magazines. This form of advertising motivated both the prescribing doctors and the patients. Some products became fashionable. The source of funding of commercial announcements and leaflets is unclear. Some of them were certainly financed privately by the manufacturers, while others – probably from the committee’s funds. The report from the meeting held in November 1888 states that “the advertisements for products recommended by MSK were printed with subscription money, the remaining money was spent on advertisements for these products placed in medical journals.”⁵⁰ However, the source of these funds is difficult to track. As mentioned earlier, the reports include statements that the conditions for testing, also clinical, of products were individually negotiated. This most probably concerns fees for the process of certification. Unfortunately, no clear explanation as to what these “conditions” meant was provided. In 1894, a decision was made to intensify activities in the eastern part of Galicia. For that reason, complete documentation of certified products, along with their list and samples, and copies of minutes from the meetings were sent to the Lviv

49 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 27 lutego 1889, “Przegląd Lekarski” 28 (1889) no. 12, p. 148.

50 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VII z 28 listopada 1888, “Przegląd Lekarski” 28 (1889) no. 2, p. 24.

Section of the Medical Society of Galicia.⁵¹ From 1895, the journal of the Pharmaceutical Society of Lviv printed a list of domestic products and preparations recommended by MSK.⁵² In 1905, reference lists were also sent to professional journals and other medical societies, e.g. the Medical Society of Lublin.⁵³ Also the Industrial Assistance League [Polish: Liga Pomocy Przemysłowej] was involved in promoting the recommended products.⁵⁴ Attempts were made to advertise these products in various ways. Manufacturers were informed about international exhibitions and scientific conferences where they could present their products. For example, information about “an international exhibition of food products and military supplies” in Leipzig in January 1992 was distributed among selected recipients.⁵⁵ Exhibitions of recommended hygienic and medical products were also organised at the congresses of Polish physicians and naturalists.⁵⁶ Exhibitions of recommended materials were also organised, at the expense of MSK, during the General National Exhibition in Lviv in 1894.⁵⁷ When the newly established Museum of the History of the Austrian Industry in Vienna requested objects, despite lack of suitable samples, the committee sent a list of Polish manufacturers potentially interested in cooperation.⁵⁸ The committee also engaged in assistance to individual entrepreneurs. For instance, when in 1895 M. Dobrowolski decided to establish a factory for dressing and pharmaceutical products,

- 51 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 14 marca 1894, “Przegląd Lekarski” 33 (1894) no. 15, p. 199.
- 52 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 5 marca 1895, “Przegląd Lekarski” 28 (1889) no. 26, p. 398.
- 53 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 4 maja 1905, p. 411.
- 54 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 4 maja 1905, p. 411.
- 55 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie V z 10 czerwca 1891, “Przegląd Lekarski” 30 (1891) no. 26, p. 331.
- 56 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VII z 28 listopada 1888, p. 24; Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 20 grudnia 1890, p. 101.
- 57 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie II z 11 maja 1893, “Przegląd Lekarski” 33 (1894) no. 24, p. 323.
- 58 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie II z 5 marca 1892, p. 259.

which had received repeated positive assessments from MSK, in Podgórze district, Alfred Obaliński helped him to obtain a formal approval from the government.⁵⁹

Other than to pharmaceuticals and dressing materials, and orthopedic instruments and medical devices, certification also extended to various dietary supplements such as milk, dried vegetables, meat powders, medicinal alcohols, and mineral and soda waters. Several examples of such activities are presented below.

Supervision of pharmaceuticals and other medical products

Various forms of medications were produced in pharmacies under the supervision of Masters of Pharmacy. Medicines containing the same active ingredients differed in their form and the amount of supplementary substances for improving taste and aroma, and also helping to swallow. They were presented to the committee in large numbers. Major manufacturers of pharmaceuticals, producing dozens of different forms counted not only on promotion of a specific product but also of the brand, which is why they eagerly submitted them for examination. Many of the pharmaceuticals evaluated came from distant locations, often from the province. Each underwent chemical analysis for the content of active substance to verify whether the declared amount was actually present in the product. The composition of excipients was also examined. The testing was conducted in the laboratories of recognised professors, to mention the world-renowned chemist Karol Olszewski, which guaranteed a scientific approach to the subject and boosted product prestige. The pharmaceuticals were subsequently taken to the Kraków Clinical Hospital, where assistants supervised by such celebrities of internal medicine as Edward Korczyński, Antoni Gluziński, and Walery Jaworski conducted clinical trials, enhancing the value of the certificate further. Pharmaceuticals administered to patients were evaluated not only for their therapeutic effects and potential side effects but also for taste, ease of swallowing, and simplicity of application. Another significant factor was the price. Medicinal products were only recommended if they were at least as good as their foreign equivalents and more affordably priced. The committee regularly checked the prices of recommended products and, in the case of uncontrolled price increases, warned producers and threatened to revoke the

59 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 5 marca 1895, p. 398.

recommendation.⁶⁰ Any change in production technology, equipment used in the process, and/or ownership forfeited the recommendation for the pharmacy's products and required a new process of certification.

Recommendations resonated with doctors and, more importantly, patients. A product approved by Kraków celebrities simply had to be effective, which in a sense made the pharmacy fashionable. And that was the primary objective: to promote Polish pharmaceutical industry. It must be noted that the tests were conducted with greatest diligence and it seems that with no favours for Polish producers, while the medications that received certification were indeed worthy of promoting. Within the scope of this work, it is impossible to describe all the tested medical products in detail in detail, but mentioning some of them may be a worthwhile insight into their diversity in terms of the preparation itself and its origin.

Mańkowski's sugar-coated pills with creosote and arsenous acid came from a pharmacist in Sieniawa and were a new formulation of what had previously been marketed as chocolate-coated pills with tolu balsam.⁶¹ Clinical tests at the Krakow Clinical Hospital were very successful, and the favourable price was also emphasised. In turn, Maryjan Zahradnik, a pharmacist from Jezierna (who moved to Złoczów in 1893),⁶² produced elastic capsules containing castor oil and cod liver oil. They were considered "a product for all means and purposes meeting the requirements of pharmaceutical technology and worthy of recommendation".⁶³ To boost his popularity, Zahradnik officially promised to print the price on every package of his pearls and capsules so as to prevent pharmacists from raising it arbitrarily. He also pledged to donate a part of the revenue from its sales to charitable causes: "he offers to donate to the construction of the

60 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 23 marca 1891, "Przegląd Lekarski" 30 (1891) no. 17, p. 224.

61 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie IV z 12 maja 1891, p. 295.

62 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie II z 11 maja 1893, p. 323.

63 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie II z 11 maja 1893, p. 323; Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VII z 28 listopada 1888, p. 24; Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VI z 15 grudnia 1889, "Przegląd Lekarski" 29 (1890) no. 2, p. 29.

Academic Dormitory in Kraków the same percentage of the revenue from capsule sales that he donated during the previous Congress of Polish Physicians and Naturalists in Kraków to the Museum of Polish Inventions.”⁶⁴

Władysław Beldowski from Kraków sought certification for his sugar-coated guaiacol pills, and later, with Stanisław Kowalski, for the same form of medicine with creosote. Additional advantages of the latter pills included easy dissolution (superior to Jasper’s pills available in the market) and high effectiveness even after prolonged storage. As his plant turned out c. 83 different types of pills and capsules, the recommendation was also an advertisement for his pharmacy.⁶⁵ In his Kraków pharmacy, Feliks Sobierajski produced nitroglycerin pills: an absolute novelty at the time. The first Polish physician to use and promote them was the aforementioned Professor Edward Korczyński. Their certification process involved physicochemical tests, production process control, and clinical trials conducted, under the watchful eye of the professor, by his assistants: Dr Ludomił Korczyński and Dr Marian (Maryan) Piątkowski, while the clinical trials made use of the latest diagnostic instruments: a sphygmograph and a plethysmograph.⁶⁶ It is worth noting that Feliks Sobierajski also received recommendations for many other products, e.g. the sugar-coated atropine sulphate pearls,⁶⁷ sodium arsenate pearls, creosote pills, and chocolate nitroglycerin tablets.⁶⁸ The change of pharmacy ownership in 1894 triggered loss of all recommendations, so its new owner Gustaw Otowski⁶⁹ had to submit the products to testing again.⁷⁰

64 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie II z 5 marca 1892, p. 258.

65 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 23 marca 1891, p. 224.

66 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie II z 11 maja 1893, p. 323.

67 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 14 marca 1894, p. 199.

68 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 5 marca 1895, p. 398.

69 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 12 listopada 1894, p. 59.

70 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 5 marca 1895, p. 398.

Products for therapeutic inhalation were also recommended; their number included forest lozenges and discs produced by the Warsaw Chemical Laboratory that turned out to be made of plastic clay saturated with essential oils. Their final assessment stated that they could successfully replace the more cumbersome method of spraying essential oils for therapeutic and air-refreshing purposes.⁷¹ In 1905, towards the end of the committee's operation, the products of Antoni Manduk's pharmaceutical company from Warsaw were positively assessed. The evaluation concerned such products as dermatol, tannopin, tannigen, tannofom, and antypirynum et coffeinum citricum. According to the then latest regulations, marketing all these products required prior approval from the ministry, which was tantamount to having been thoroughly tested by state institutions.⁷²

Vaccines and drugs administered subcutaneously constituted the most demanding group of medications due to the need for meticulous sterilisation and maintenance of accurate concentrations of active substances, which decompose under high temperatures. The chemical composition of subcutaneous aqueous solutions of morphine, cocaine, atropine, and ergot (*Claviceps*) from Kraków pharmacist Eugeniusz Heller was analysed by Professor Józef Łazarski, and clinically tested by dr. Walenty Jeż under the supervision of Walery Jaworski.⁷³ They all received recommendations from MSK⁷⁴ Finally, vaccines against smallpox were at the time controversial due to side effects, and had to be controlled not only for acquisition of immunity but also for such effects. The committee and MSK believed that the best vaccine was Kubicki's "cow pox vaccine" from Lviv. Every time the manufacturer submitted it for periodic assessment, it received successive certificates. The commentary read that "it works excellently" not only after the first vaccination but also after revaccination. In 1891, as part of the certification process, dr. Franciszek Murdzieński, a student of Leon Jakubowski, head physician of the St Louis Hospital in Kraków,

71 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VII z 5 grudnia 1891, p. 24.

72 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 4 maja 1905, p. 411.

73 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie IV z 18 listopada 1895, p. 13.

74 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie IV z 18 listopada 1895, p. 13.

who introduced smallpox vaccinations to the children's hospital with his professor, studied 50,000 cases of vaccinated and revaccinated individuals! The MSK was all in favour of doctors only using the domestic smallpox vaccine.⁷⁵ This may be the reason why MSK refused to recommend the vaccine produced by Józef Freysinger in Leipzig, noting “the need for standardisation of ‘cow pox vaccine’ production in the future” in its conclusion.⁷⁶

Certification also extended to topical medications. For example, Brunicki, Jakubowski, and Co. from Klęczany near Nowy Sącz sought the recommendation for highest-quality vaseline for surgical and ophthalmological use. Its chemical analysis was conducted by Professor Gustaw Steingraber, and clinical studies were carried out in the clinical wards of Ludwik Rydygier, world pioneer of gastric resection, professor of the First Surgical Clinical Hospital in Kraków and successor of J. Mikulicz-Radecki, and dr. Lucjan Rydel—the famous ophthalmologist, head of the Kraków Ophthalmological Clinic, and dean of the Medical Faculty.⁷⁷ They awarded the product a quality certificate.⁷⁸ Professor Alfred Obaliński, a distinguished surgeon, former head of the surgical department at St Lazarus Hospital, and later head of the Second Surgical Clinical Hospital that the former unit transformed into, examined and positively evaluated the alabaster plaster by Czecz and Co. from Płaszów.⁷⁹ “Corrosive sublimate patties” from a Kraków pharmacist Karol Wiszniewski that served preparation of topical antiseptic solutions also received their recommendation. They were considered superior to foreign products as they formed no residue while dissolved in ordinary well water, and the sublimate they contained did not react with protein.⁸⁰ A recommendation was also

75 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 27 lutego 1889, p. 148.

76 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie IV z 18 listopada 1895, p. 13.

77 S. M. Brzozowski, *Rydel Lucjan (1833–1895)*, in: *Polski słownik biograficzny*, ed. by H. Markiewicz, vol. 33, Wrocław 1991–1992, pp. 413–414.

78 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie II z 11 maja 1893, p. 323.

79 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie V z 30 grudnia 1895, “Przegląd Lekarski” 35 (1896) no. 16, p. 216.

80 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VII z 28 listopada 1888, p. 24.

granted to Loebenstein's mustard poultice from Austria, which were not at all inferior to French ones.⁸¹

Another product group subjected to certification comprised medical devices. Recommended, for instance, were the products of two Kraków craftsmen: bacteriological thermostats and sterilisation devices produced by tinsmith Markus, and gynecological phantoms made by a saddler A. Szklarski,⁸² and also devices for then-fashionable galvanic and inductive electric therapy. The committee evaluated two of these: a device devised by Stanisław Freund (employed as a mechanical engineer at the Jagiellonian University in 1891–93)⁸³ and a Krakow mechanical engineer and optician Kazimierz Zieliński.⁸⁴ Stanisław Freund also served as the director of the vocational school in Świątniki, where students produced various types of electrotherapeutic devices that also received MSK recommendations. However, the corset (orthopedic belt) produced by the students of St Scholastica's School failed to receive a MSK certificate for an interesting reason. As much as the product was found to be significantly better than any other available on the market, its use was considered dated in European medicine and its use was gradually discontinued. However, with respect to the manufacturing quality, a decision was reached to modify the corset to adjust it to the latest standards and trends in the treatment of posture disorders. The guidelines for the modifications were to be developed by famous gynecologist-obstetrician and civil activist dr. Henryk Jordan,⁸⁵ Alfred Obaliński, and Ludwik Rydygier.⁸⁶

- 81 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VI z 15 grudnia 1889, p. 29.
- 82 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie V z 10 czerwca 1891, p. 331.
- 83 E. Wyka, *Mechanik Uniwersytetu Jagiellońskiego Władysław Antoni Grodzicki i jego skraplarki gazów*, [ejournals.eu: khnt-21-1-4-wyka%20\(1\).pdf](http://ejournals.eu/khnt-21-1-4-wyka%20(1).pdf) (Accessed on: 06 July 2022).
- 84 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie I z 3 lutego 1892, p. 167.
- 85 S. Ciechanowski, *Jordan Henryk (1842–1907)*, in: *Polski słownik biograficzny*, ed. by E. Rostworowski, vol. 11, Wrocław 1964–1965, pp. 273–276.
- 86 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 29 stycznia 1889, p. 112.

Services for food industry manufacturers

The services provided extended to dairies, production of cocoa and chocolate, and meat powder, fruit and vegetable drying, and also manufacture of soda water, mineral waters, and medicinal alcohols. 19th-century medicine considered milk a fundamental nutritional and medicinal agent, whose nutritional benefits were invaluable for children and adults alike, and – depending on the form it was administered in – also medicinal properties. The 19th century brought a revolution in medicine marked by the shift from natural herbs- and minerals-based treatment to therapies based on the products of the pharmaceutical industry. When, around the second half of the 19th century, reservations about the effectiveness of natural medicines rose and treatment alternatives were still lacking, intensive pathophysiological research, focused strongly on dietary therapy and balneology was conducted. Dietary manuals and cookbooks of the time became virtual textbooks on internal medicine, and contained a whole gamut of indications for using milk and dairy products.⁸⁷ Unfortunately, most dairy products available in shops and markets were not epidemiologically tested, particularly for tuberculosis, whose prevalence was high at the time. Moreover, the contemporary dairy products were commonly adulterated with starch. Therefore, the idea of certifying dairies was an excellent initiative. For obvious reasons, individual peasants selling their produce remained outside any mandatory control. Only three of the nearby production facilities took advantage of the recommendation offer, and even those were hard pressed to meet all the criteria the Committee imposed. Dairies were required to send monthly veterinary and medical reports on the health status of the animals and barn staff. Monthly checks were made to see whether they met the criteria developed by the Committee and approved by MSK, and the Certificates were sent by mail.⁸⁸ The three dairies had their barns located in Śledziejowice, Grodkowice, and Gnojnik. The dairies often happened to forget to send the reports, usually for two or three consecutive months.⁸⁹ After that time, they were issued a reminder with a deadline to comply on the

87 E. Jaworska, W. Jaworski, *Kuchnia higieniczna ze szczególnym uwzględnieniem potrzeb chorych*, Kraków 1897.

88 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VII z 28 listopada 1888, p. 24.

89 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 29 stycznia 1889, p. 112.

threat of certification withdrawal.⁹⁰ Grodkowice and Gnojnik had more problems with keeping deadlines.⁹¹ Despite delays in sending reports, recommendations were as a rule extended.⁹² In 1894, one dairy (probably Grodkowice) ceased sending reports, and the two remaining ones unfortunately were unable to supply Kraków. Despite encouragement from MSK, only one new dairy applied for certification. To continue the process, physician and veterinarian Professor Andrzej Walentowicz went to inspect the site, where he positively evaluated the cow breed, feeding, and the facility setup. A decision was made to proceed to the second stage, that is chemical and bacteriological analysis of the milk.⁹³ In the same year, the certification conditions were tightened when a resolution was passed that required veterinary certificates to be issued by a professional and certified veterinarian.⁹⁴ Perhaps these additional conditions of the controls, already cumbersome and costly, had the Gnojnik dairy also lose its recommendation soon afterwards.⁹⁵

At the time, cocoa and chocolate were popular for nutrition, invigorating, and medicinal use. Chocolate was also a popular additive in pharmaceutical production, as it improved the taste and smell. Patients often bought chocolates containing appropriate active ingredients by prescription at pharmacies. Unfortunately, in most cases the products available in the market came from foreign manufacturers. The first to submit his

90 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie IV z 10 kwietnia 1889, "Przegląd Lekarski" 28 (1889) no. 20, p. 256.

91 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VI z 15 grudnia 1889, p. 29.

92 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 20 maja 1890, p. 461; Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 20 grudnia 1890, p. 100; Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 15 kwietnia 1891, "Przegląd Lekarski" 30 (1891) no. 20, p. 256; Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie IV z 12 maja 1891, p. 295; Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie V z 10 czerwca 1891, p. 331.

93 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 14 marca 1894, p. 199.

94 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 14 marca 1894, p. 199.

95 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie IV z 18 listopada 1895, p. 13.

products to MSK for evaluation was Henryk Trettner from Lviv.⁹⁶ Karol Olszewski conducted the chemical analysis and dr. Zygmunt Wachtel carried an on-site inspection in the factory. At half the price, the Lviv cocoa was recognised at par with foreign.⁹⁷ Also Trettner's chocolate received its certificate⁹⁸ Olszewski praised the owner for introducing an improved fat removal technique that "makes the product even better".⁹⁹ The following product inspection was conducted when the factory's production increased enough to afford more cocoa production machines. It determined that quality still goes hand in hand with quantity, and the tins in which the products were sold were sufficiently tight to guarantee proper storage.¹⁰⁰

In 1903, another product that had already been approved for sale, and as such had been tested by the Imperial-Royal Institute for the Examination of Foodstuffs in Kraków, was issued a certificate recommending "the health coffee" produced by Waśniewski, Łuczko & Co.¹⁰¹

Another popular product used in specialised diets was meat powder, considered easy to digest. It was only natural that it had to meet rigorous production conditions. For that reason Feliks Sobierajski, a Kraków pharmacy owner and, incidentally, a member of the Industrial Committee, asked his colleagues to evaluate his product. Research showed that it consisted of dried pulp made in a water bath at 40–50°C from beef stripped of fat and connective tissue that could be stored in tightly sealed glass containers for a long time without fear of it undergoing decomposition. 100 grams of powder corresponded to about 750 grams of meat and cost 1 złoty, not including the container. Clinical studies were conducted by dr. Stefan Skrzyński at the Kraków Clinical Hospital

96 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VII z 28 listopada 1888, p. 24.

97 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 29 stycznia 1889, p. 112.

98 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie IV z 10 kwietnia 1889, p. 256.

99 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VI z 5 listopada 1891, p. 633.

100 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie I z 3 lutego 1892, p. 167.

101 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 22 grudnia 1903, "Przegląd Lekarski" 43 (1904) no. 16, p. 248.

under the supervision of Edward Korczyński to test its digestion in the gastrointestinal tract of both ailing and healthy patients. The positive therapeutic effects were confirmed by the authority of Korczyński and thus Sobierajski's powder gained the status of a certified medicinal product.¹⁰²

One of the most popular medicinal waters that was not considered mineral was soda water. It did not come from a natural intake but was produced in special facilities and sold in bottles. The popularity of soda water resulted in spinning off a special subcommittee consisting of Karol Olszewski, Walery Jaworski, and the city physicist (a physician and veterinary doctor) dr. Jan Buszek to subject all artificially produced medicinal waters in Kraków to chemical and bacteriological testing. The problem turned out to be the poor quality of the drinking water used for the process rather than the technology. Kraków had struggled with that problem for years, and had not yet resolved it at that time. The only water recommended as it met health standards came from Rząca and Chmurski's plant in Kraków. They used spring water from a well insulated and protected from the seepage of groundwaters situated close to the Łobzowska toll-gate, which had been purchased from the army. The chemical analysis Olszewski conducted showed absence of nitric acid and ammonia, and low content of organic matter. It was also considered the best for everyday use: "Ordinary soda water is better than any other currently produced in Kraków, and in the absence of decent potable water in Kraków, it is recommended to be drunk daily". The Society believed that production of other soda waters should be officially banned. Such a proposal was even tendered to the Municipal Sanitary Commission, where the Industrial Committee had its delegate.¹⁰³ Moreover, Rząca and Chmurski's plant had appropriate warehouses for water storage and the highest quality production technology and solutions. It produced ten types of waters, most of them medicinal. They were all subjected to regular internal quality control and the control of the Industrial Committee. Beginning with 1880, MSK considered the factory the leading and best in Kraków. Every year, it received quality certificates allowing the owners to label it as "Recommended by the Medical Society of Kraków and remaining

102 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie II z 5 marca 1892, p. 259.

103 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VII z 28 listopada 1888, p. 24.

under the control of its Industrial Committee”.¹⁰⁴ As this did not help the company to increase its turnover significantly, another subcommittee consisting of Jan Buszek, Napoleon Cybulski, and Karol Olszewski was asked to consider how to improve sales.¹⁰⁵ One of the outcomes was to address the Municipal Sanitary Commission to run controls at other soda water plants that used well water that was in many cases heavily contaminated.¹⁰⁶ The subcommittee mentioned that even the best filters cannot make Kraków well water hygienic and suitable for producing such soda water.¹⁰⁷ This might have been another attempt to force the municipal commission to take action limiting the sale of water from other plants. In the 1890s, such controls in the plants were only conducted only every few years.¹⁰⁸ In 1895, guidelines for the production of Bad Ems waters were drafted for plant owners.

Domestic herbology came to the focus of attention in 1891, when four owners of herb drying facilities approached the Committee for support. They were: Domain in Ropczyce, Roman Pawlikowski in Mielec, Felicjan Szybalski in Morawica, and Porfiry Zieniewicz in Brzostek. In turn, Marcei Żymirski requested aid from the National Committee for Supporting Domestic Industry and Handicrafts for businesses that collect and sell “domestic vegetations”.¹⁰⁹ Another request was made to the Board of Agricultural Associations to issue a statement to peasants with instructions for collecting medicinal herbs, along with a description of their properties, applications, and sales opportunities.¹¹⁰ In the wake of positive

104 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VII z 28 listopada 1888, p. 24.

105 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VI z 15 grudnia 1889, p. 29.

106 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 20 grudnia 1890, p. 101.

107 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 9 marca 1891, p. 213.

108 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VII z 5 grudnia 1891, p. 24; Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 12 listopada 1894, p. 59.

109 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 23 marca 1891, p. 224.

110 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 15 kwietnia 1891, p. 256.

response from the aforementioned institutions, Feliks Sobierajski drafted a list of native plants with medicinal properties, both growing in the wild and cultivated, that could be used in pharmaceutical purposes, as well as methods of their collection and drying, commercial prices, and a list of businesses purchasing such herbs.¹¹¹ A decision to republish the collected material in both scientific and popular format “for the people” was reached four years later.¹¹² Again, the person most engaged in the matter was Sobierajski. Lack of statistical studies resulted in a problem with estimating the actual export and domestic demand. For that reason, Sobierajski approached landowners Siegler and Seeling and asked them to start a trial cultivation of the medicinal plants he had selected, to test the market capacity and demand.¹¹³

Dried fruit and vegetables were widely recommended as a component of a healthy and/or therapeutic diet when fresh ones were unavailable due to market reasons or the season. One of the first fruit and vegetable drying facilities in the country to receive a recommendation was the American one run by Jan Różański & Co. in Bochnia.¹¹⁴

Alcohol was commonly used as a medication, either in its traditional form, now purchased in alcohol shops and considered a recreational substance, or in a specialised form produced from traditional alcohols in pharmacies.¹¹⁵ Traditional alcohols were beyond the scope of certification by MSK, as their commercial testing was within the remit of the chemical and bacteriological laboratories. That is why the chemical analysis of Karol Bałłaban’s rye Starka from Lviv, alleged to have the same impact on the human as real cognac, was conducted by Karol Radziszewski. Having excluded fraud, the producer was advised to turn to Odon

111 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie IV z 12 maja 1891, p. 295.

112 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 5 marca 1895, p. 399.

113 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 5 marca 1895, p. 399.

114 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 29 stycznia 1889, p. 112; Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie II z 11 maja 1893, p. 323.

115 E. Jaworska, W. Jaworski, *Kuchnia higieniczna ze szczegółowem uwzględnieniem potrzeb chorych*, Kraków 1897.

Bujwid's Institute of Hygiene for the assessment of the health values of his product.¹¹⁶

The medicinal malt beer produced by a Kraków pharmacist Konstanty Wiszniewski from strong "export" beer was examined by PhD Professor Gustaw Steingraber, for its chemical composition and technological process.¹¹⁷ The amount and quality of the added malt extract, as well as sugar, dextrin, non-coagulating proteins, and silica and phosphoric acids content in the ash were supposed to attest that "the beer used, as well as the malt extract used, come from good and healthy raw produce". Another forte found in the assessment was the fact that the beer had "pleasant to look at, being clear and sparkly in appearance, and good to taste." The production technology proved flawless. The product was compared to Hoff's malt beer and was recommended by the Society's resolution on 10 April 1889, as a "product worthy of recommendation and support."¹¹⁸ Some producers of medicinal beers purchased malt extract from the Okocim Brewery, which was highly valued by the Committee, so on discontinuing the production of this substrate for medicinal purposes, the brewery informed the MSK about the fact.¹¹⁹

Evaluation also extended to medicinal wines, such as the quinine, quinine-and-iron, pepsin, peptone, and rhubarb wines marketed by Zygmunt Jan Kalicki pharmacist from Przemyśl. They were highly rated for the high-quality Malaga that contained no fusel alcohols, and the very good quality of quinine bark and other medicinal ingredients. All these came together with an excellent taste, no dregs, and a favourable price.¹²⁰ Interestingly, the standardised criteria for evaluating medicinal wines had not been developed for the Committee until it was done by Walery

116 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 14 marca 1894, p. 199.

117 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie III z 2 kwietnia 1889, "Przegląd Lekarski" 28 (1889) no. 18, p. 227.

118 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie III z 2 kwietnia 1889, p. 227; Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie IV z 10 kwietnia 1889, p. 256.

119 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie IV z 18 listopada 1895, p. 13.

120 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie IV z 10 kwietnia 1889, p. 256.

Jaworski in 1895.¹²¹ Doctor Leon Jakubowski, professor, the father of Polish pediatrics, tested clinically dr. Władysław Mogilnicki's blueberry wine by from Buchach in his Children's Ward at the St Louis Hospital in Wesoła district (in Strzelecka Street). The wine was fortified according to the guidelines from the Industrial Committee and recognised a dietary and medicinal product during clinical trials. The wine was tasty, it did not decompose easily during storage at room temperature, and had a alcohol content lower than other similar beverages. It was found to be excellent for treatment of gastrointestinal problems, especially with if accompanied by diarrhoea. Its chemically analysys was conducted by Professor Ignacy Lemberger,¹²² a medical doctor, chemist, pharmacist, member of the faculty of the Jagiellonian University, who at simultaneously managed the Municipal Chemical Laboratory that analyses food products.¹²³

The last products known to have sought the Committee's recommendation were the thymo-sulfo-guaiacol syrup from pharmacist Kazimierz Armatys (recommended on 10 March 1908) and wood wool for stuffing mattresses from Izaak Spira's factory in Tarnów. The only surviving information about the latter is that it was tested in beds of patients at the Medical Clinic in Kraków.¹²⁴

Services in the field of balneology

The Balneological Subcommittee of the Industrial Committee continued the activities of the Balneological Committee operating in the Medical Society of Kraków in 1877–89 to support domestic balneology through scientific (chemical analysis of mineral waters and spa products, geological research, nature conservation, and meteorological and climatological studies) and social activities on behalf of spas and their visitors. As mentioned earlier, this activity was thoroughly studied, and the publication

121 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie IV z 18 listopada 1895, p. 13.

122 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 22 grudnia 1903, p. 248.

123 *Doc. Ignacy Lemberger*, https://in-memoriarn.uj.edu.pl/lista-pamieci?p_p_id=56_INSTANCE_iqXS3KIq9Mfb&p_p_lifecycle=o&p_p_state=normal&p_p_mode=view&p_p_col_id=column-3&p_p_col_pos=2&p_p_col_count=3&osoba=140312995 (Accessed on: 12 July 23).

124 Towarzystwo Lekarskie Krakowskie, Posiedzenie administracyjne w dniu 13 stycznia 1909, p. 98.

on it is available in open online resources.¹²⁵ The activities within the Industrial Committee focused mainly on social activities for the benefit of spas, which was why the following request was submitted to practicing physicians “To protect domestic spring waters from foreign competition, it has been resolved to draw the attention of physicians that they restrain haste in issuing certificates of effectiveness for those foreign waters that can compete with the domestic ones.”¹²⁶ Taking advantage of the committee’s assistance, besides the spas that had continued cooperation with it were also new ones. The spas known to the committee were Iwonicz, Swoszowice, Wysowa, and Krynica, while those lesser known who were only starting cooperation were Lubień and Czarny Potok.

Iwonicz was the first spa to start cooperating with the balneological subcommittee by sending current meteorological observations and statistical data on the spa facilities, therapies conducted, numbers of patients and spa products sold by mail order. Iwonicz continued its intensive cooperation, sending samples of peat, lyes, and salts for free analysis¹²⁷ as well as the water from the Emma saline-alkaline iodine-bromine spring called discovered accidentally during drilling works in the Skrzetuski mining shaft. As in previous years, the analyses were conducted by the renowned chemist and balneologist PhD Karol Trochanowski,¹²⁸ who considered the results valuable.¹²⁹ Soon, the spa’s management responded to the committee’s request to lower the price of Iwonicz water.¹³⁰

Krynica was one of the spas that flourished thanks to earlier cooperation with MSK. The spa not only did benefit from the analysis of mineral water from its sources but also designed buildings according to plans devised by previous balneological commissions. Even though contemporary Krynica was a well-functioning and fashionable spa, the committee did not forget about it. After advertisements for Karol, a new spring, were

125 M. Nowakowska-Zamachowska, *Towarzystwo Lekarskie Krakowskie 1866–1914...*

126 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 1 grudnia 1896, “Przegląd Lekarski” 36 (1897) no. 14, p. 31.

127 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 20 grudnia 1890, p. 101.

128 IC MSK, meeting of 23 March 1891, p. 224.

129 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie IV z 12 maja 1891, p. 295.

130 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie II z 11 maja 1893, p. 323.

published in the press and failed to mention its chemical composition, the committee turned to the office of the imperial-royal viceroy, that is the authority directly supervising the Krynica spa and bathing facility, to have its chemical analysis sent to the committee “so that wider medical circles could form an opinion.”¹³¹ A memorandum was also issued to the Board of the Imperial-Royal Administration to boost the medical treatment, hygiene, medical policing, and communication in the spa developing in Krynica.¹³²

The new owner of Swoszowice asked for support, assistance, and advice to restore the spa to its former fame. The design for the drainage of excess spa water, separation of tanks for peat and sulphur mud, and bathtubs was evaluated and amended.¹³³

The insulation of wells was positively assessed in Wysowa,¹³⁴ where five springs previously known to the committee were investigated. The composition of the water had not undergone negative changes.¹³⁵ Moreover, a decision to respond positively to a request from the Lubień spa and baths establishment for an individual development plan was approved.¹³⁶ The waters of Hipolit Piekleski from Czarny Potok near Łącko were also analysed, with the conclusion that one of the springs deserved regulation, efficiency testing, insulation, and analysis of its medical properties.¹³⁷ Franciszek Bandrowski studied the medicinal waters of the Drużbaki (Rużbacy) spa in Spisz region. He presented a paper on history, topography, hydrography, geology, and balneology with recommendations for the owner concerning modernisation of the facility. The committee also decided to extend its services also to this spa as it lay in the territory

131 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 12 listopada 1894, p. 59.

132 IC MSK, meeting of 23 March 1891, p. 224.

133 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie IV z 18 listopada 1895, p. 13.

134 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VI z 5 listopada 1891, p. 633.

135 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VII z 5 grudnia 1891, p. 24.

136 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 20 maja 1890, p. 461.

137 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie I z 3 lutego 1892, p. 167.

of former Poland, in an area inhabited by people of Polish origin owned by a Pole (Count Władysław Zamoyski) and visited mostly by Poles.¹³⁸ Stanisław Ponikło also visited and examined conditions in Jaszczurówka.¹³⁹ His report was published in “Przegląd Lekarski” together with praise for the owner.¹⁴⁰

Brochure-guide to Polish spas

The initiative to publish a brochure with a systematic description of all spas and climatic establishments in Polish lands continued. It was intended as “a uniform description, covering all, without exception, spa and climate-treatment facilities in Polish lands, having been divided according to the type of waters, each sections opening with of a more extensive description of the most befitting facility, followed by others belonging to the same category, described more briefly but substantively.” The proposal was put forward back in the time of the Balneological Commission in 1883 by Władysław Ściborowski, then its chairman, who had consulted Edward Korczyński on the subject.¹⁴¹ Unfortunately, despite collecting a sufficient amount of data from the spas eager to cooperate, the work could not published for financial constraints.¹⁴² So as to avoid wasting the collected information, Ściborowski prepared an extensive report entitled “Wiadomości statystyczno-topograficzne o zdrojowiskach krajowych wraz z krótkim przewodnikiem dla osób do wód krajowych udających się” (literally: “Statistical-topographical information on domestic spas with a short guide for those heading for the domestic waters”), which was printed in the Industrial-Commercial Annual Journal.¹⁴³ After the matter was revisited in 1889, another request was sent to Polish spas and health resorts for current climatic-balneological-statistical data for the purpose

138 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie II z 5 marca 1892, pp. 258–259.

139 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie II z 5 marca 1892, p. 258.

140 S. Ponikło, *O Jaszczurówce*, “Przegląd Lekarski” 31 (1892) no. 19, pp. 229–230.

141 Komisja Balneologiczna Towarzystwa Lekarskiego Krakowskiego, Posiedzenie I z 12 lutego 1883, “Przegląd Lekarski” 22 (1883) no. 23, p. 305.

142 Komisja Balneologiczna Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 13 maja 1885, “Przegląd Lekarski” 25 (1886) no. 14, p. 204.

143 Komisja Balneologiczna Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 13 maja 1885, p. 204.

of publishing the Annual Journal of Domestic Spas.¹⁴⁴ The project started by Ściborowski was completed by another balneologist, Professor Ludomił Korczyński, yet in a form slightly different than initially planned. In 1900, his work entitled “Zarys balneoterapii i balneografii krajowej” (literally: “An outline of balneotherapy and domestic balneography”) was published. Besides the statistical data on Polish spas, it contained the rudiments of balneotherapy: “The purpose of this work is thus twofold: within the narrowest possible limits, I have tried to include information on balneotherapy necessary for medical staff and to provide medical students and physicians with a book that would help them become familiar with the development of our domestic facilities, their current furnishing and organisation, therapeutic means, and medical indications. Perhaps such knowledge will be followed by their better commitment to memory, and the eagerness and ability to support what is ours, as long as it deserves such a form of support.”¹⁴⁵

A question linked to the above was maintaining the tradition of informing the international community about the technical and therapeutic capacities of the Polish spas. The author of the previous report on domestic balneological literature and the condition of national spas, published in 1887 in volume 213 of Schmidt’s Medical Annals, was Professor Stanisław Smoleński. Asked to compile it this time, in 1894, was Ludomił Korczyński.¹⁴⁶ Lists of Polish physicians practicing in domestic and foreign spas were regularly announced in the press.¹⁴⁷ Moreover, a contribution to the work on a governmental draft of a statute for national spas was made.¹⁴⁸

144 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 29 stycznia 1889, p. 112.

145 L. Korczyński, *Zarys balneoterapii i balneografii krajowej. Dla użytku lekarzy i uczniów*, Kraków 1900.

146 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 23 grudnia 1894, “Przegląd Lekarski” 34 (1895) no. 7, p. 99.

147 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 9 marca 1891, p. 213; Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie II z 11 maja 1893, p. 323; Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 14 marca 1894, p. 199.

148 Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego, Posiedzenie VI z 15 grudnia 1889, p. 29.

Closing

The activities related to Polish balneology were practically concluded by the Industrial Committee in 1905 when services for the spas were officially transferred to the newly established Polish Balneological Society (Polish: Polskie Towarzystwo Balneologiczne).¹⁴⁹ The Industrial Committee concluded its activities in 1912 when, by a resolution of the Medical Society in Kraków, it was combined with the Boycott Committee to form the Balneological-Industrial Committee.¹⁵⁰

The reason behind these changes were new legal regulations concerning the sale of medical and food products introduced at the beginning of the 20th century. Point 6 of the Ministerial regulation No. 40 published in the “Dziennik Ustaw Państwa dla Królestw i Krajów w Radzie Państwa Reprezentowanych” [Journal of Laws] on 16 April 1904 stated that: “Pharmacists may put into commercial circulation specific remedies they produce only if they have obtained permission for the production and sale of such a product from the Imperial-Royal Ministry of the Interior, after prior examination by the Chemical Office of the Imperial-Royal State Health Council.”¹⁵¹ Consequently, the Industrial Committee decided not to test what we today is called dietary supplements, while examining medications approved by the ministry lost its purpose: “It was resolved to draw the attention of pharmacists to focus on manufacturing such medicines whose chemical composition is precisely known, and only the name is protected by a trademark, which are usually imported from abroad at very high prices rather than producing various medications of unspecified chemical composition, being in most cases no more than imitations of various compound medicines. The trademark can often be replaced by an appropriate chemical composition.”¹⁵² In the wake of legal regulations and establishment of special supervisory institutions for medical and food products, the earlier activities of the Industrial Committee related to chemical analysis and clinical trials of products

149 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 4 maja 1905, p. 411.

150 Towarzystwo Lekarskie Krakowskie, Posiedzenie z 15 stycznia 1913, “Przegląd Lekarski” 52 (1913) no. 7, p. 113.

151 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 4 maja 1905, p. 411.

152 Komisja Przemysłowo-Lekarska Towarzystwa Lekarskiego Krakowskiego, Posiedzenie z 4 maja 1905, p. 411.

lost their significance. Certificates continued to be issued for a time, yet they were no longer tantamount to approving the product for the market. Therefore, what became the main goal of the MSK activities at the time was fighting against foreign (mainly Prussian) competition in the medical market and the protection of Polish entrepreneurs. This led to the formation of the Boycott Committee (Committee for Supporting Domestic Medical Industry) within the MSK, which absorbed the Industrial Committee. The original objectives of the new committee were the pharmaceutical industry, spas and resorts, seaside baths, surgical and obstetric tools, furnishing and equipment for operating theatres, and ophthalmic instruments, including the production of artificial eyes.¹⁵³ This trend was soon interrupted by the First World War when the independence regained by Poland posed entirely new tasks before the MSK.

Final conclusions

Recounting the history of the Industrial Committee operating in the Medical Society in Kraków in 1886–1912, and thus providing insight into another topic directly related to the history of the MSK itself was based on the information collected mainly from “Przegląd Lekarski”.

The Industrial Committee was a very active structure within the Medical Society of Kraków. Its activities were invaluable for doctors, patients, and also the medical industry in Galicia as the Committee was established to protect and support the Polish medical industry. While Poland did not officially exist on the world map as a state, the committee provided support to Polish manufacturers and domestic spas. The main activities of the committee members involved evaluating and issuing recommendations for medical products, i.e., medications, dietary food products, medical tools and instruments, and dressings. The certification process investigated production technologies and chemical composition, and involved additional clinical trials to assess effectiveness. The latter half of the 19th century was a time of intense development in medicine and pharmacology. As new products began to enter the market, the committee took over the duty of testing them for medical suitability. Positively evaluated products were presented at MSK meetings and awarded certificates, that is titles of products recommended by MSK. Such a recommendation

153 *Sprawozdanie Krakowskiego Komitetu Popierania Krajowego Przemysłu Lekarskiego: W sprawie wyparcia obcych przetworów i narzędzi lekarskich*, “Przegląd Lekarski” 48 (1909) no. 5, pp. 86–87.

was a particular guarantee of quality. As many of the committee members were scientists of world renown, who were also members of social elites, using the products they recommended became fashionable. This created a real opportunity to compete with foreign products. Early in the 20th century, the committee's activities lost significance due to new governmental laws requiring ministerial permission for the sale of such products. As a result, the responsibility of supervising the quality of these products was taken over by the ministry.

The committee also investigated balneology, at that time considered a leading medical specialisation, and therefore remaining at the centre of interest for doctors and patients. In the case of spas, evaluation extended to their infrastructure, technical solutions for spa treatments, and the therapeutic properties of waters and climate. Various means to encourage patients to visit domestic spas were sought and owners of individual establishments were encouraged to expand and modernise them according to the latest therapeutic trends. This activity was taken over by the newly established Polish Balneological Society in 1905.

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Abstract

Monika Zamachowska

*The Industrial Committee of the Medical Society of Kraków
(1886–1912)*

The Industrial Committee of the Medical Society of Kraków (1886–1907) was established to protect and support the Polish medical industry. In the absence of the official Polish state existed, the activities of the committee provided support for Polish manufacturers and health resorts. The main activity of the committee members consisted in assessing production technology and analysis of the chemical composition of food products, and additional clinical trials of medications. In the case of health resorts, evaluation extended to their infrastructure, technical solutions for spa treatments, and curative properties of the waters and climate. Positively evaluated products and spas received a particular certificate and were officially recommended by the society. As many members of the committee were scientists of world renown who belonged to the social elite, using the products they recommended became fashionable and offered a realistic advantage against foreign competition.

Keywords:

Medical Society of Kraków, Industrial Committee, history of medicine, 19th-century medicine, balneology, history of spas

Abstrakt

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*Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego
(1886–1912)*

Komisja Przemysłowa Towarzystwa Lekarskiego Krakowskiego (1886–1912) powstała w celu ochrony i popierania polskiego przemysłu medycznego. W czasach, gdy państwo polskie nie istniało oficjalnie na mapie świata, działalność Komisji dawała wsparcie polskim producentom i krajowym uzdrowiskom. Główna działalność członków Komisji polegała na ocenie technologii produkcji i analizie składu chemicznego środków spożywczych oraz dodatkowych badaniach klinicznych w przypadku leków. W przypadku uzdrowisk oceniano ich infrastrukturę, rozwiązania techniczne zabiegów zdrojowych, lecznicze właściwości wód i klimatu. Pozytywnie ocenione produkty i uzdrowiska otrzymywały rodzaj certyfikatu i były oficjalnie polecane przez Towarzystwo. Ze względu na skład Komisji obfitujący w światowej sławy naukowców, jednocześnie ludzi należących do elit towarzyskich, modne stawało się korzystanie z produktów przez nich poleconych. To stwarzało realną możliwość walki z zagraniczną konkurencją.

Słowa kluczowe:

Towarzystwo Lekarskie Krakowskie, Komisja Przemysłowa, historia medycyny, medycyna XIX wiek, balneologia, historia uzdrowisk