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EVOLUTION OF MEDICAL PEDAGOGY IN UKRAINIAN LANDS (lecture)

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Background. The relevance of this study lies in the need for a comprehensive analysis of the historical stages of the formation and development of medical pedagogy in Ukrainian lands, reflecting the continuity of the educational tradition in 10th–20th century. It allows comprehension of contemporary educational paradigms and the determination of their historical conditioning.

Aim. The retrospective analysis of the evolution of medical pedagogy in the territory of Ukraine from 10th to the early 20th century.

Materials and Methods. The authors used a complex of general scientific and special methods: historical method, which provided a chronological analysis of events and stages; the systemic method for considering medical pedagogy as a holistic, dynamic system; and the comparative-historical method for juxtaposing educational approaches from different periods. The study was carried out as a private initiative of the authors, did not receive funding from grant programmes, and the research topic has not been formally registered with a state body.

Research Ethics. The research was conducted in compliance with the ethical norms of academic integrity: mandatory citation of information sources, ensuring the objectivity of the presentation of historical facts, and proper referencing of the works of predecessors.

Results. It is established that approaches to treatment and teaching, linked to monastic and folk medicine, were laid down as early as the Kyivan period. It is proven that the KMA first institutionalized the teaching of medical disciplines, elevating it to a qualitatively new level of the European university tradition. It is emphasized that the second half of the 19th and the early 20th century saw the modernization of medical education. The founding of the KhWMI (1910) is highlighted as a key result of this modernization establishing new pedagogical standards oriented towards clinical practice and scientific activity.

Conclusions. The evolution of medical pedagogy in Ukrainian lands in the researched period is a complex but continuous process, characterized by the transition from empirical knowledge to institutionalized university education. The authors investigated markers of this evolution for the further development of national medical science and pedagogy.

Keywords: *medical pedagogy, Kyiv Mohyla Academy, Kharkiv Women's Medical Institute, medical education, history of medicine.*

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Introduction

The relevance of this study lies in the need for a comprehensive analysis of the historical stages of the formation and development of medical pedagogy in Ukrainian lands, reflecting the continuity of the educational tradition from the Middle Ages to the modern era. Understanding the origins and transformations of medical knowledge instruction allows for a better comprehension of contemporary educational paradigms and the determination of their historical conditioning. The illumination of the influence of national institutions on the formation of unique pedagogical approaches is of particular significance.

The **aim** of the study was a retrospective analysis of the evolution of medical pedagogy in the territory of Ukraine from the Kyivan period (10th century) to the beginning of the 20th century. Specifically, the focus is placed on the foundational principles of teaching medical knowledge in the early period, the achievements of instructors in the medical classes of the Kyivan Mohyla Academy (17th–18th centuries), and the innovative significance of the establishment of the Kharkiv Women's Medical Institute (1910) as a crucial milestone in the democratization of medical education.

Materials and Methods

The authors of the article used a complex of general scientific and special methods. Among the general scientific methods are the historical method, which provided a chronological analysis of events and stages; the systemic method for considering medical pedagogy as a holistic, dynamic system; and the comparative-historical method for juxtaposing educational approaches from different periods. Special methods include the historiographical analysis of primary sources,

archival materials, and scholarly publications, as well as the periodization method.

Research Ethics

The research was conducted in compliance with the ethical norms of academic integrity: mandatory citation of information sources, ensuring the objectivity of the presentation of historical facts, and proper referencing of the works of predecessors.

Results

The study of the continuity and evolution of medical pedagogy requires distinguishing between the concepts of "folk medicine" (empirical knowledge transmitted in folklore) and "institutionalized elements of knowledge" which were passed down through school, monastic, or academic channels. Although direct curricula from the early period have not survived, source analysis allows tracing the formation of educational prerequisites for future medical schools.

The analysis is based on a diverse source base. Data on princely courts and the nature of elite treatment provide insight into the demand for professional medicine. A monument of Orthodox hagiographic literature, the *Kyivan Caves Paterikon*, also has critical significance as a source for studying medical knowledge and evidence of the transmission of practical skills. Concerning KMA, biographical and archival data on faculty, particularly the work of Mytrofan Yellinskyi, are used, allowing an assessment of the level of formal education at the end of the 18th century.

In exploring the elements of medical education in these lands (10th–13th centuries), the authors analyzed pre-Mongol medical practices, how medical knowledge was transmitted during this period, and the ratio of elitist (secular, princely) and folkloric medicine.

Medical practices in these lands were characterized by significant duality. On the one hand, there was a deep "uncultured stratum", where illnesses were often explained by mystical causes (e.g., the plague attributed to a "demon," and gangrene to poor-quality grain). Such etiology, naturally, did not promote the development of rational pedagogy.

On the other hand, there was a high demand for qualified practical medicine, concentrated in elitist centers – princely courts (such as the courts of Volodymyr, Yaroslav, or the court in Berestove). Chronicle and archaeological evidence indicate complex surgical interventions, particularly the "rezaniye" (surgical cutting) of the prince, and the presence of highly qualified specialists, evidenced by a discovered skull showing signs of successful traumatological treatment. Professional elitist medicine, especially surgery, required minimal formalization of knowledge and skill transfer. This acted as a catalyst for specialized training, likely through an apprenticeship system under princely healers. The advanced state of traumatology and surgery in princely courts indirectly created prerequisites for a structured educational process, as such sophisticated knowledge could not be acquired through folkloric or domestic practices alone.

The adoption of Christianity in 988 triggered an educational revolution, providing access to written culture. Along with theological texts, translated medical collections, known as iatrosophies, came to these lands, containing systematized knowledge of anatomy, physiology, and pharmacology.

Ancient monasteries were centers of culture in these lands. Antique and early medieval medical manuscripts arrived here. Monks (among whom were chroniclers Nikon and Nestor) translated them into the Slavic language.

Many ancient monasteries were educational centers, teaching medicine based on Greek and Byzantine manuscripts. In the process of translating manuscripts from

Greek and Latin, the monks supplemented them with their own knowledge, based on the experience of folk healing [1; p. 76]. Monasteries, particularly the Kyivan Caves Lavra, became centers not only of spirituality but also of latent medical education. Monastic healers were integral carriers of practical knowledge. Their activity was closely linked to the Christian mission of charity, which gave medical knowledge not only a practical but also a high moral and ethical meaning [1; p. 74].

There were also women healers. For example, the peasant girl, daughter of a beekeeper, Fevronia, who received medical knowledge from her parents – folk doctors – successfully applied it in practice. Euphrosyne, daughter of Chernihiv Prince, was "very knowledgeable in the writings of Asclepius" – as medical books were then called. Princess Anna Vsevolodivna opened a secular school in Kyiv in the 11th century, where medicine was taught, and students gained practice at the hospital of the Kyiv-Pechers'k Lavra, which was famous at that time for monk-healers (Anthony, Agapit, Pimen) [1; p. 78].

At the beginning of the 20th century, Khristian Loparev put forward the hypothesis that the treatise *Alima* in Greek, found in the library of Lorenzo de' Medici in 1902, was written by Volodymyr Monomakh's granddaughter, Yevpraxia (1108–1172) [2; p. 425]. However, this hypothesis remains debatable and has not been conclusively proven Tychkivska O. (2009) [3; p. 51–56].

The *Kyivan Caves Paterikon* is an extremely important historical source for studying the medical knowledge of in these lands. Scientific literature confirms that "the knowledge of the art of healing and medical culture was disseminated by monastic healers among the inhabitants". Every monastery here had "hospital chambers." Monastic hospitals were transformed into military hospitals during warfare, city sieges, and into quarantine hospitals during epidemics. For example, the Nikon Chronicle

testifies that in the 11th century (1091), Metropolitan Yefrem built a "bannya" (bath-house) in Pereyaslav, organized hospitals where doctors provided "free treatment to all arrivals". The fame of monastic doctors spread far beyond their monasteries, even beyond the borders of land: for instance, Metropolitan Oleksii was invited by the Khan to the Horde to cure his wife Taidula's eyes [1; p. 75].

The Paterikon contains direct evidence of the transmission of medical culture to representatives of the elite. The story of the Chernihiv Prince's daughter's education is documentary proof of the functioning of an informal educational system, where the monastery acted as a school of medical culture and knowledge. Education was a form of piety, not just purely scientific training. Furthermore, mentions of a "medical dispute" (a controversy with an Armenian) and the assertion of "the superiority of local healing over foreign medicine" indicate the existence of a medical community's self-awareness and a critical reflection on different medical systems. This is the foundation of any pedagogical school that requires comparative analysis of existing knowledge.

After the disintegration of early feudal state in these lands, these forms of knowledge transmission were mostly preserved. Opportunities to acquire medical knowledge were added by schools at barber guilds. The most famous barber guild was the Lviv one, founded in 1512. Barbers even had a chance to study with professional doctors. Depending on the level of acquired knowledge and skills, barbers were divided into apprentices, journeymen, and masters. The "apprentice" training course lasted 3 years. One master had the right to train no more than 3 or 4 apprentices. The basic knowledge and skills of graduate apprentices included: to put cupping-glasses, cut abscesses, to pull out teeth, to dress wounds, treat fractures and dislocations. Pupils learnt the symptoms of some diseases, how to make blood-letting and exactly, basics of shaving.

Kyiv-Mohyla Academy (KMA), founded in 1632, became the key institution that transformed informal medical knowledge into structured educational disciplines. In the initial stages of the Academy's development, medical knowledge was not taught as a separate faculty but was integrated into philosophy courses, particularly the "physics" (natural sciences) section. Within this course, students were introduced to anatomy, physiology, and pharmacognosy, viewing them as part of understanding the world and the human body.

Training in the medical class was mandatory only for philosophers and theologians. But there were many eager to study medicine among the students of the poetics and rhetoric classes. Already in these classes, students became acquainted with the works of Greek and Roman physicians – Hippocrates, Democritus, Epicurus, Claudius Galen, as well as Avicenna, Vesalius, Bacon. They were enthusiastic about various collections of folk medicine (*Herbals*, *Lunar Calendars*, etc.). Since academic students knew Latin brilliantly, all this sometimes had a decisive significance in their choice of a medical profession. Often, after finishing the rhetoric class, students went to hospital schools, which gave them the opportunity to later enter European medical institutions.

On July 6, 1754, the first official decree was signed, "On the selection of 30 pupils from Kyiv Academy and South Ukrainian seminaries to study medico-surgery and pharmacy by their desire" [4; p. 100]. Just from 1754 to 1768, 300 Academy pupils went to medical-surgical schools in frames of empire. Some of them independently went abroad to study medicine. Many Academy graduates later became famous physicians: Ivan Poletyka (Polityka) (1722–1783), Doctor of Medicine. He was the first one out of the Mohyla students to defend a doctoral dissertation in Leiden in 1754. He headed a department at the Kiel Medical Academy. This was the second case after Yurii Drohobych (in 15th century) where a department at a foreign university was given to a Ukrai-

nian. He was the first (non-foreigner) to head the General Land Hospital in the Northern capital of empire. For 20 years he was the head of the Vasylykiv quarantine (near Kyiv), and organized quarantine services throughout Ukraine [4; p. 101]. Martyn Terekhovskiy (1740–1796), Doctor of Medicine, a microbiologist. He was the first one to prove the fallacy of J. Buffon's theory of spontaneous generation of life, later confirmed by Louis Pasteur (1822–1895). Nestor Ambodik-Maksymovych (1742–1812), Doctor of Medicine, Professor, founder of obstetrics, botany, physiotherapy, and phytotherapy in frames of empire. At his initiative, the first Clinical Midwifery Institute was founded in Northern capital of empire (1797). He was the author of many textbooks, including *The Art of Midwifery, or the Science of the Midwife's Business* (published in 1784–1786), and worked on medical terminology dictionaries. Danylo Samoilovych (1742–1805), Doctor of Medicine, founder of epidemiology in frames of empire. He was the first one in the world to establish the spread of plague through contact, and proposed vaccination. Samoilovych provided practical assistance in overcoming plague epidemics in Kyiv, Moscow, Odesa, Kherson, Kremenchuk, Katerynoslav (now city Dnipro, Ukraine), Dubossary, and the Crimea. Samoilovych's works were printed in Strasbourg, Leiden, Paris, and other prominent world medical centers, and he was elected a honorary member of 12 European academies [4; p. 101].

The gradual separation of medical knowledge into specialized courses occurred under the influence of European rational science and the growing demand from the Empire, which included Ukrainian lands, for qualified military and civilian doctors. This state need stimulated KMA to formalize medical courses, transforming them from philosophical supplements into the propaedeutics of professional medical training.

A key moment of institutionalization was the creation of a full-fledged scientific and pedagogical base for teaching empirical medicine. This was expressed in the emer-

gence of specialized positions and departments at the end of the 18th century.

In 1802, at the initiative of Academy alumnus, Chief physician of Kyiv City Council, Doctor of Medicine Afanasii Maslovskiy (1740–1804), a two-year medical class was opened at the Academy. Twice a week, philosophy and theology students listened to lectures on anatomy, physiology, surgery, and underwent practical classes. Maslovskiy A. was the author of original and translated works on surgery, botany, ophthalmology, infectious diseases, compiled the textbook *Instructions on How to Use the Cheapest Home Remedies* (1803), etc., which he recommended to students along with manuals by foreign scholars. Maslovskiy A. was the first practicing physician elected as an honorary member of State Collegium.

Lectures in the medical class were also given by Doctor of Medicine, one of the first pediatricians of the early 19th century, epidemiologist Khristiyan Bunge (1776–1857) [4; p. 99]. In 1802, Kh. Bunge was appointed physician of the Academy. He reorganized the student hospital. Personal responsibility for its condition, at Bunge's insistence, was placed on the rector and prefect. Students willingly practiced at the academic (bursar) hospital, collected herbs with the professor, prepared medicines, and cared for the sick.

Evidence of the transition to a high academic level is the activity of Mytrofan Mykytovych Yellinskyi (1772–1831), who held the position of prosector of anatomy, and subsequently adjunct professor of the department of anatomy and physiology. The existence of the position of prosector (the one who performs dissection) is a critical indicator that medical education at KMA ceased to be merely textual or theoretical. It acquired an empirical, anatomically oriented direction, which corresponded to the highest standards of European medicine of the Modern Era. The fact that Mytrofan Yellinskyi worked under the supervision of Professor Nikon Karpinskyi, confirming the existence of a structured hierarchy of medical education and scientific mentorship.

The activity of Mytrofan Yellinskyi, a probable KMA alumnus, serves as a vivid proof of the quality of academic training. He made a significant scientific contribution, including preparing works in the field of anatomy: *"On the heart covered, besides the common pericardium, by three separate membranes"*, *"On the accessory hepatic duct"*, and *"On stones impacted at the mouth of the ureters"*. These works, published in a collection in 1805, demonstrate a high level of empirical research and attention to detailed anatomy necessary for surgical practice.

In addition to purely scientific work, the activity of the KMA medical school maintained a social orientation, which is a continuation of the tradition of monastic healing. Yellinskyi's publication of the *Pharmacopoeia for the Poor* (1807) underscores the applied, clinical focus of the training and its social significance. This attempt to create a standardized and accessible treatment for the broader population underscores the deeply humanistic nature of Ukrainian medical pedagogy.

The high level of medical education at KMA is confirmed by the professional trajectories of its graduates. Mytrofan Yellinskyi's career is indicative: he not only held key positions at the Academy but also continued his path in St. Petersburg, becoming a regimental doctor, staff doctor, and in 1826 received the highest title of Leib-Surgeon.

The fact that KMA graduates achieved the highest military medical ranks testifies not only to their personal abilities but also to the exceptional quality of academic training received in Kyiv. Thus, KMA functioned as a powerful intellectual donor for imperial medical structures. The success of the Ukrainian medical school allowed the legitimization of the Ukrainian intellectual elite in the general imperial scientific space, confirming the professional competitiveness of the local pedagogical tradition.

The evolution of medical pedagogy in Ukrainian lands reflects a fundamental cultural shift. This path began with the philosophy of medieval theocentric medicine,

where the monastic healer provided aid as an expression of charity and piety, and concluded with the transition to the rational medicine of the Modern Era, embodied in the activities of the adjunct professor of anatomy, who worked based on empirical evidence and the scientific method.

The importance of this transition lies in the fact that knowledge separated from the religious-mystical context, becoming an independent, scientific discipline that required specialized training (anatomy, physiology). Although the foundations of medical practice in Kyivan period were predominantly practical (surgery), they were inseparable from moral and ethical guidelines. At KMA, this ethical component transformed into social responsibility (e.g., the *Pharmacopoeia for the Poor*), but the mechanism of knowledge transmission became purely scientific.

The formation of medical pedagogy contributed to the development of a separate professional identity. In the Kyivan period, this was manifested in the emphasis on the "superiority of home healing over foreign medicine," which testified to the defense of a local tradition.

Later, at Kyiv Mohyla Academy (KMA), this identity gained scientific legitimation. The creation of their own, original scientific works, such as Yellinsky's works in anatomy, and the publication of practical manuals for the local population demonstrated the capacity of Ukrainian educational centers not simply to imitate, but to develop medical science at a level comparable to European universities. This institutionalization ensured the preservation and multiplication of medical intellectual capital in the Ukrainian lands.

The authors see prospects for further research, as a deep study of KMA archival data is needed to identify the complete curricula detailing the teaching of surgery, obstetrics, and other specialized disciplines, which will allow for a more complete reconstruction of the history of medical pedagogy in the Ukrainian lands.

In the first half of the 19th century, access to higher university education was

limited for representatives of most estates and classes. The situation began to change after the abolition of serfdom in 1861. The educational reform of 1863–1864 contributed to the introduction of broad autonomy in universities. In 1864, a unified system of primary education was introduced. At the secondary education level, in addition to classical gymnasiums, which primarily prepared students for university admission, a network of *real schools* was created, which prepared students for entering specialized institutes. Regarding women's education, the problem truly existed. The university statutes in force at the time practically gave no chance for this, which is why women had to go abroad, where, according to officials, they could "be infected" with free-thinking. In 1879 from Odesa and two years later from Kharkiv, petitions were sent to the Ministry of Public Education regarding the organization of systematic Higher Women's Courses in these cities, which, unfortunately, were never implemented. Nevertheless, the demand for medical education for women was already quite high.

In a context where the state authorities were reluctant to grant women the right to higher education, the development of medical education for women became a matter for the local intelligentsia, philanthropists, and professional communities. This led to the creation of non-state institutions which, despite their independence, often relied on charitable contributions.

In Kyiv, the process of professionalization began earlier. In 1906, a medical department was established at the Kyiv Higher Women's Courses [5]. Its curriculum fully corresponded to that of the university, and the term of study was 5 years. However, the department did not have state status and functioned exclusively on charitable funds. Female students received the opportunity to study medicine in parallel with the men who studied at the St. Volodymyr University [6; p. 194]. The significance of the Kyiv experience lay in its maximal dependence on philanthropy: prominent events were

organized to raise funds, for example, a concert by opera singer Fyodor Chaliapin, which brought thirty thousand rubles. Local magnates also provided support, including sugar refiners, brick factory owners, and publishers. The city government dared to grant a plot of land, a subsidy, and permission to practice at the Oleksandrivska Hospital only after seeing the scale of public and philanthropic donations.

Parallel to the events in Kharkiv, the solemn opening of the Odesa Higher Women's Medical Courses took place on September 27, 1910. These courses demonstrated an immediate aspiration for academic legitimacy and had a clear initial structure that included seven departments, ranging from Theology to Zoology. The teaching staff included famous professors and assistants, such as Mykola Batuyev (Normal Anatomy), Oleksandr Mańkivskyi (Histology), and Sevasťan Tanatar (Inorganic Chemistry) [7; p. 91].

The imperial government did not allocate state funds for women's education, so the Women's Medical Institute was forced to be created as a private educational institution. The reforms of 1905 contributed to the development of entrepreneurship, including in the field of higher education. In 1908 in Kharkiv, Ms. Neviandt N.I. organized the Higher Women's Medical Courses, which gained popularity. The teaching on the first and second years was organized more or less satisfactorily, but starting from the third year, a scandal erupted due to the lack of lecturers in surgical pathology, operative surgery, topographical anatomy, pharmacology, general pathology, clinics, and an outpatient facility. These courses were discredited due to their commercial orientation. The owner of the courses failed to fulfill her key promises: despite significant funds raised, the laboratory and clinical bases were not established within two years [8].

700 attendees of the Higher Medical Courses wrote letters to the editors of local newspapers and magazines, and complained to the Ministry of Public Education, but

never achieved their goal. Subsequently, 344 attendees appealed to the Kharkiv Medical Society (KMS) with a request for assistance to "gain a higher medical education not formally, but practically". On May 17, 1910, the board of the Kharkiv Medical Society adopted a resolution on the organization (on the principles of collegiate governance and autonomy, provided it was self-financing) of the KhWMI (a private medical institution under the aegis of the Kharkiv Medical Society).

The model of patronage was of critical importance. Although the KhWMI had private status, which ensured financial independence from state subsidies, the supervision by the KMS guaranteed academic quality. This was a hybrid, intellectually-oriented approach that differed from the purely philanthropic approach of Kyiv and the commercial approach of the previous Kharkiv courses. The patronage of the KMS, an influential and authoritative scientific organization, became the guarantor of legitimacy and high educational standards.

Danylevskyi V.Ya. (1852–1939) was elected as the head of the organizing committee, and he succeeded in attracting experienced professors to teach. Vorobyov V.P. (1876–1937), Bokarius M.S. (1869–1931), Hryniiov D.P. (1880–1934), Repryev O.V. (1853–1930), Shatilov P.I. (1869–1921), Davydenkov S.M. (1880–1961), Favr V.V. (1874–1920), and others taught at the KhWMI [9; p. 144]. The institute's leadership was much less constrained by bureaucratic requirements, which allowed for greater initiative in organizing the educational and methodological process, the training process, attracting necessary qualified personnel, determining the number of students, etc. The institute's director, Professor Danylevskyi V.Ya., sought to overcome the limitations that existed within the university's medical faculty and aimed to improve medical education, teaching programs, and the curriculum, hoping to attract the attention of both society and the state to this medical educational institution. Lecturers gained the

opportunity to test new approaches to educational and methodological work without having to overcome excessive bureaucratic obstacles, which was characteristic of imperial universities [9; p. 139].

The fundamental contribution to the institute's creation belongs to the KMS leadership. Ovsii Petrovych Braunstein (1864–1926), a prominent ophthalmologist and public figure, was elected Chairman of the Kharkiv Medical Society in 1910 and held this position until 1918, actively promoting the establishment of the Women's Medical Institute [10; p. 47]. His figure personified the necessary connection between advanced medical science and active public life.

Extraordinary attention was paid to the formation of a high-quality educational and laboratory base, which was a direct lesson from the failure of the Neviandt courses. Mykola Avksentiyovych Valiashko (1871–1955), an active member of the KMS, was elected professor of analytical chemistry in 1910 and was entrusted with organizing the corresponding laboratory. His appointment testified that the Kharkiv WMI from the very beginning involved highly qualified leading specialists to ensure practical training, and was not limited to theoretical instruction alone. The institute began its work, located in the Northern Bank Building, which was a temporary but centralized solution that indicated the seriousness of the founders' intentions [9; p. 139–146].

The solemn opening of Kharkiv Women's Medical Institute took place on October 31, 1910. Classes began the next day. At that time, approximately 1 000 students were enrolled in the first three years of study. According to direct witnesses, the quality of the educational process at the Women's Medical Institute was even higher than at the medical faculty of Kharkiv University. Teaching was particularly well-organized at the Department of Physiology (under the leadership of Prof. Danylevskyi V.Ya.), as well as at the Department of Anatomy, which was then headed by the young talented scientist Vorobyov V.P., who was at the time prevented by the

ministry from heading a university department due to oppression from the administration for his active public position during the revolutionary unrest [10; p. 99].

Some historical facts indicate that the community was also extremely interested in training female doctors. Thus, the newspaper "Yuzhny Krai" of December 12, 1910, featured a note "Aid to the attendees of the Medical Institute". It reported that there were needy female students among the course attendees, many of whom had already filed petitions for exemption from tuition fees. It was proposed to create a special society whose goal would be to provide material assistance to such attendees – organizing a canteen, finding cheap apartments for them, as well as temporary jobs of a pedagogical or medical nature (tutoring, caring for the sick, etc.) [9; p. 139]. On the same day, the constituent assembly of the guardianship committee for assistance to needy attendees took place at the WMI, where its statute was discussed and adopted. Professor Shatilov P.I. was elected as a head of this committee [9; p. 139]. In May 1911, an announcement was placed in the "Kharkiv Medical Journal": "The Kharkiv Women's Medical Institute of the Kharkiv Medical Society aims to provide women with higher medical education equivalent to a university course. The Institute's course is 5 years. Lectures are given by university professors. The educational administration belongs to the Council of Professors. The 1st, 2nd, and 3rd years are already functioning. The 4th year will open this autumn." [9; p. 141]. Over 10 years of operation, the institute trained about 2000 female doctors. Researchers note that out of 240 WMI graduates in February 1914, all passed the final exams, and more than half of them passed the state exams with distinction [9; p. 143].

The creation of the Women's Medical Institute is a classic example of grassroots feminist achievements, examples of which are recorded throughout Europe in the last quarter of the 19th – first quarter of the 20th century. This achievement looks even more

significant when recalling the realities of the work of the institute's graduates at the beginning of the last century: fighting public ignorance, death from infectious diseases, performing operations in primitive conditions, and a lack of medications. All this was compounded by a contemptuous attitude from men – officials, colleagues, and sometimes even patients. However, despite everything, women excellently proved themselves as leaders in medical professions and in various positions, overcame countless obstacles in their activities, and earned the respect and trust of the population through their sensitivity and professionalism.

The opening of the institute turned Kharkiv into one of the centers of women's medical education, which led to a flow of people into the city, reduced the outflow of youth abroad for education, and also attracted high-level specialists to the region. Moreover, the institute's activity and the training of several thousand highly qualified doctors allowed the Kharkiv Medical Society to scale its plans for the distribution of medical aid among the population and the improvement of its sanitary and hygienic culture.

Having received a medical education, women worked as doctors, feldsher (medical assistants), and nurses. Female doctors often worked with a greater workload than male doctors, despite the fact that they were not even allowed to call themselves doctors: by "imperial decree", they had to be called "learned midwives."

The outbreak of World War I sharply increased the social significance of medical personnel. Female students and lecturers of the Kharkiv WMI actively joined the work in military hospitals. The Institute became part of the military medical complex of Kharkiv, which increased its political and social weight.

The professional network established by the KMS demonstrated its strength in critical conditions. During the war, Professor Valiashko M.A. and other scientists associated with the Society of Scientific Medicine and Hygiene (and the KMS) began important

work – the manufacture of certain medicinal preparations. This confirms that the private institute, thanks to its powerful personnel and laboratory potential, performed strategic state functions. This became an important factor that allowed the Kharkiv WMI to maintain its operations when many other educational institutions collapsed.

Kharkiv Women's Medical Institute demonstrated remarkable institutional resilience, functioning through several political regimes: the Empire, the Ukrainian People's Republic, and the Ukrainian Socialist Soviet Republic. The institution's survival for ten years amid constant political instability (1910–1920) testified to its high internal organization and the critical need of society for its graduates.

The period of 1918–1920 was the most challenging. Although Braunstein O.P., a key organizer, was forced to resign as Chairman of the KMS in 1918 due to illness, he returned to his post in 1920 [10; p. 47]. Under war-time conditions, the Kharkiv Medical Society was no longer able to maintain the WMI. The situation was complicated by the Civil War with its frequent changes of power. Students suffered from rising food prices and apartment rental fees. Some of them were forced to return home [9; p. 145].

Only a small number remained in the city and continued their studies. The newspaper "Yuzhny Krai" wrote on May 21, 1918, that the WMI board and the Council of Professors sought to preserve the institute, for which they appealed to the government of Hetman Skoropadskyi P. for monetary aid. In May 1918, a congress of representatives of higher educational institutions was held in Kyiv, to which the WMI sent its director Popov S.O. and Markov M.N. The delegation petitioned for the allocation of material assistance for the WMI for the 1918–1919 academic year [9; p. 146].

One of the sources of the institute's financing was tuition fees. However, the KMS long tried not to raise the price. Nevertheless, in 1918, when the number of applicants for the first year significantly exceeded the number of available places, a doubling of the fee was announced [9; p. 146].

From the beginning of 1919, when the Bolshevik power was re-established in Kharkiv, the People's Commissariat of Health (as the Ministry of Health was then called) and the People's Commissariat of Education (Ministry of Education of the Ukrainian RSR) directed their efforts towards the preservation and democratization of higher education. All private and public educational institutions lost the possibility of existence in the conditions of the Civil War and economic devastation. To save higher education as centers of enlightenment, it was decided to transfer them to the state. At the KMS meeting on January 28, 1919, representatives of the Soviet government, Artem (Sergeyev F.A.) (1883–1921), who was the deputy chairman of the Provisional Workers' and Peasants' Government of Ukraine, and Tutyshkin P.P. (1868–1937), the People's Commissar of Health, proposed the nationalization of the institutions of the Kharkiv Medical Society [9; p. 146].

There was an attempt to appeal the merger of the WMI with the university's medical faculty in government institutions, however, the decision to unite these educational institutions from April 16, 1919, had already been made Kharkiv Regional State Archive [9; p. 146]. The WMI was merged with the university's medical faculty, and subsequently, in May 1920, the reform of higher education was continued, resulting in the medical faculty of the university being reorganized into Kharkiv Medical Academy. It was in this academy that the Women's Medical Institute and the university's medical faculty were finally successfully united [9; p. 146].

This was a process of institutional synthesis: the teaching staff, material base (laboratories, libraries), and the contingent of female students were integrated into the newly created unified state system of higher medical education – Kharkiv Medical Institute (KhMI) (1922) [10; p. 287]. The academic capital was preserved and used to strengthen state medical education in Kharkiv.

Having survived nationalization, the personnel of the Kharkiv WMI ensured the continuity of the academic tradition. The pro-

fessors who formed the institute's educational base continued their work in the state system. For example, Professor Valiashko M.A., who organized the KhWMI laboratories, continued active scientific work and headed the Kharkiv branch of the All-Union Chemical Society named after Mendeleev D.I. until 1941 [10; p. 260].

Ovsii Petrovych Braunstein, although he lost the independent Women's Medical Institute, continued to be a central figure in Kharkiv medicine. After returning to the post of Chairman of the KMS in 1920, he was actively involved in public activities: he headed the All-Ukrainian Commission for the Fight against Infectious Diseases during the difficult years of epidemics, contributed to the organization of the Ukrainian Red Cross Society, and created the Organotherapy Institute, known today as the V.Ya. Danylevskiy Research Institute of Endocrine Pathology Problems. These achievements indicate that the KhWMI became a catalyst for the creation of a stable infrastructure of Kharkiv medicine, and its intellectual and material capital was successfully transformed and minimized losses from the revolutionary upheavals [10; p. 93].

The graduates of the KhWMI, who began their studies at a private institution, had the opportunity to finish it within the state system and received state diplomas, which became the factual completion of the fight for equal access to the medical profession. This cohort of female specialists played a significant role in the healthcare system of the 1920s–1930s. Their qualification was critically important for overcoming epidemics and forming a new system of motherhood and childhood protection.

Among its famous graduates, Yelyzaveta Kostiantynivna Prykhodkova (1892–1975), a graduate of 1918, stands out in particular. While still a student, working as a preparator at the Department of Normal Physiology alongside Vasyl Yakovich Danylevskiy, she became fascinated with physiology, and after graduating from the Women's Medical Institute, she continued to work under his

leadership as a laboratory assistant (1918–1919), assistant (1920–1929), associate professor (1929–1933), and from 1933 – as a professor (in 1939 she defended her doctoral dissertation, and in 1940 she received the title of Professor of the Department of Physiology). From 1947, Yelyzaveta Kostiantynivna headed the Department of Normal Physiology of the Kharkiv Medical Institute for the next 19 years, and also served as Deputy Director of the KhMI for scientific work. In 1951, E.K. Prykhodkova's scientific achievements were recognized by the Academy of Sciences of Ukraine by electing her a Corresponding Member and awarding her the honorary title Honored Worker of Science of the Ukrainian SSR [10; p. 461].

Kharkiv Women's Medical Institute (1910–1920) was a unique phenomenon among the early centers of higher women's medical education in Ukraine. Its creation was not merely an act of charity (as was observed in Kyiv), but became a decisive act of self-defense of the academic community under the patronage of Kharkiv Medical Society. This decision was aimed at eliminating academic dishonesty and the commercialization of education that had discredited the Neviantd courses. Thus, the Kharkiv WMI became an institution built on high professional standards and civic responsibility.

Its success was guaranteed not only by financial independence but also by reliance on leading scientists (for example, Braunstein O.P. and Valiashko M.A.), who ensured a high level of fundamental and practical training.

The professional training received at the KhWMI provided a generation of medical workers who later, particularly during World War II (1941–1945), formed the basis of the female medical corps involved in military and evacuation medicine. This underscores the deep cultural and practical continuity ensured by the institute, which operated for only ten years.

The legacy of the KhWMI became an integral part of the further development of

the Kharkiv Medical Institute (KhMI). Changes in management, which can be traced through the list of rectors of medical institutions in Kharkiv, demonstrate a continuous process of institutionalization, which included the absorption of all academic assets created by private initiatives. In fact, the KhWMI provided the Kharkiv Medical Institute with an additional flow of qualified lecturers and an established material and technical base necessary for the further state development of medical education in the first half of the 20th century.

Discussion

So, generalizing the result of our investigation we have to emphasize that approaches to treatment and teaching here, linked to monastic and folk medicine, were laid down in Kyivan period. It is proven that the KMA first institutionalized the teaching of

medical disciplines, elevating it to a qualitatively new level of the European university tradition. It is emphasized that the second half of the 19th and the early 20th century saw the modernization of medical education. The founding of the KhWMI (1910) is highlighted as a key result of this modernization establishing new pedagogical standards oriented towards clinical practice and scientific activity.

Conclusions

The research objective was achieved: a retrospective analysis of the evolution of medical pedagogy in Ukraine from the 10th to the early 20th century was performed. The analysis of literary sources established that the prolonged period saw a steady accumulation of experience in teaching medical disciplines and the formation of an original school for the transmission of medical knowledge.

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Authors' Contributions

Contribution Authors	Conception	Design	Data collection	Statistical processing and data interpretation	Writing or critical editing of the article	Approval of the final version for publication and agreement to be responsible for all aspects of the work
Martynenko N.M.	+	+	+	+	+	+
Trotsenko O.V.		+	+			+
Nesterenko R.V.			+		+	+

Prospects for further research

To fully cover the historical and cultural heritage of the KhWMI, further archival research is necessary, aimed at identifying the detailed curricula of the institute and the exact number of graduates. Particular attention should be paid to the personalities of famous KhWMI graduates and their contribution to the development of specific medical fields (such as the fight against trachoma, the organization of obstetric care) in the 1920s–1950s.

Declarations

Conflict of interest is absent.

All authors have given their consent to the publication of the article, to the processing and publication of their personal data.

The authors of the manuscript state that in the process of conducting research, preparing, and editing this manuscript, they did not use any generative AI tools or services to perform any of the tasks listed in the Generative AI Delegation Taxonomy (GAIDeT, 2025). All stages of work (from the development of the research concept to the final editing) were carried out without the involvement of generative artificial intelligence, exclusively by the authors.

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ЕВОЛЮЦІЯ МЕДИЧНОЇ ПЕДАГОГІКИ В УКРАЇНСЬКИХ ЗЕМЛЯХ (лекція)

Актуальність. Актуальність цього дослідження полягає у необхідності комплексного аналізу історичних етапів становлення та розвитку медичної педагогіки в українських землях, що відображає неперервність освітньої традиції у Х–ХХ ст. Це дозволяє осягнути сучасні освітні парадигми та визначити їхню історичну обумовленість.

Мета. Ретроспективний аналіз еволюції медичної педагогіки на території України від Х ст. до початку ХХ ст.

Матеріали та методи. У статті застосовано комплекс загальнонаукових та спеціальних методів: історичний метод, що забезпечив хронологічний аналіз подій та етапів; системний метод для розгляду медичної педагогіки як цілісної, динамічної системи; порівняльно-історичний метод для зіставлення освітніх підходів різних періодів. Дослідження було проведено як приватна ініціатива авторів, не отримувало фінансування від грантових програм, а тема дослідження не була офіційно зареєстрована в державному органі.

Етика дослідження. Дослідження проведене із дотриманням етичних норм академічної доброчесності: обов'язкового зазначення джерел інформації, забезпечення об'єктивності викладу історичних фактів та коректного посилання на праці попередників.

Результати. Встановлено, що підходи до лікування та викладання, пов'язані з монастирською та народною медициною, були закладені ще у Київський період. Доведено, що Києво-Могилянська академія вперше інституалізувала викладання медичних дисциплін, піднявши його на якісно новий рівень європейської університетської традиції. Підкреслено, що у другій половині ХІХ та на початку ХХ ст. відбулася модернізація медичної освіти. Заснування Харківського жіночого медичного інституту в 1910 році висвітлено як ключовий результат цієї модернізації, що встановив нові педагогічні стандарти, орієнтовані на клінічну практику та наукову діяльність.

Висновки. Еволюція медичної педагогіки в українських землях у досліджуваний період є складним, але неперервним процесом, що характеризується переходом від емпіричних знань до інституалізованої університетської освіти. Автори дослідили маркери цієї еволюції для подальшого розвитку національної медичної науки та педагогіки.

Ключові слова: медична педагогіка, Києво-Могилянська академія, Харківський жіночий медичний інститут, медична освіта, історія медицини.

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