ORIGINAL ARTICLE

Monitoring Medical Affairs in Fars (1921 – 1936) based on Available Documents

Abstract

The purpose of this study is to investigate Fars medical services monitoring, during fifteen years (1921–1936). Available documents show that a separate office was established by the country health office to support medical affairs in the southern region of Iran, named the South Health Office in 1926. Illegal doctors were forced to stop working unless they obtain and present a degree from the Ministry of Education. At that time, there were 10 pharmacies at Shiraz, namely Adab, Nosrat, Behboodi, Razazade, Ziyaiyan, Iran, Khorshid, Shafa, Hafez, Fars Central. Pharmacies should have a valid license and work permit from the Ministry. There were a totally of 54 doctors, 11 pharmacists, and 3 midwives in Shiraz in 1932.

Key words: 19th century, Iran, Shiraz, Medical monitoring, Fars medical condition, Educational Status

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Introduction

Monitoring medical services started functioning when Cholera appeared in most states of Iran, especially in southern parts of Iran (Fars). In 1896, Dr. Tolouzan, who was the king's chief physician, ordered to establish the central health office, named Hefzosehhe (lit. health conservation (or the Iran health council, which was eventually named Sahihe-Mamlekati (lit. country health). It was the first regular and systematic monitoring that led to establishing a monitoring office in Fars in 1926. Then, the council could hold weekly meetings at Dar AlFonoon to monitor the health condition and advise the government on how to control Cholera. (Shamsardekani, 2012)

What is meant by Fars?

In 1906, the National assembly divided the country into four states (Azarbayjan, Kerman and Balouchestan, Fars and Ports, Khorasan). States, along with their provinces, had their central governments. At that time, the precise borders of the states were not mentioned in the law related to the formation of the states and provinces. This might be because of the following reasons: either they didn't have enough facilities and equipment to do that, or, the borders of the states were so clear that there was no need to mention them. The country division did not change till 1937. (Nohekhan, 2012, p. 115); so the Fars state in this study is based on the law issued in 1906.

Description

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In order to supervise the health services, the South Health Office was established in 1926 (Document number 149, 1926, p. 1). (Figure 1)

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Figure 1. Starting the south health office (Document number 149, 1926, p. 1)

Before the establishment of this legal and cohesive monitoring of health services, numerous illegal doctors were functioning in all parts of the Fars state. Twenty-one illegal doctors were reported practicing in Kazeroon, Neyriz, Estahbanat, Jahrom, Sarvestan, Darab, and Larestan. (Document number 724, 1932, p. 1; Document number 707, 1932, p. 1)

Dr. Abolghasem Foyouzat, who was the manager of Fars education, issued a notifi-

cation in 1932. Based on this notification, these illegal doctors, to continue practicing medicine, had to take part in an exam held in Tehran, Tabriz, Shiraz, Kerman, Esfahan, Mashhad, Bassery, Rasht, and Hamedan. He asked all illegal doctors to participate in this exam to get a medical certificate. (Document number 718, 1932, p. 1).

In the same year, the Fars health manager asked the governor to prevent these illegal doctors from practicing medicine. (Document number 1240, 1932, p. 1) (Figure 2)

فرا فاطرب كالمتحريد مداندها وواردان غرم زرات طمعة ال איר העובו אי ליווה לי בי ל ביו שירי בוב וכויים ניוי ביני בי הידי וב היקיים היו ב בי בי היואי

Figure 2. Preventing illegal doctors from practicing medicine. (Document number 1240, 1932, p. 1)

In 1933, the Fars Health's manager wrote to the governor again and asked for closer monitoring the practice of these illegal doctors (Document number 710, 1933, p. 1).

As it was necessary to ensure more accurate medical diagnosis, it was decided to send experienced practitioners, who had already obtained their Daralfonoon diplomas, to all parts of the Fars state, but until then, local doctors, like Mirza Mohammad Khan, practicing in Borazjan, were allowed to treat people. (Document number 690, 1926, p. 1)

In 1931, to increase health services, the Fars fiscal budget approved the functioning of three mobile doctors, moving from one region to the other, and four doctors, practicing in health centers/offices; but as the area of this state was about 150 by 130 Farsang (936000 by 811200 meter), it required more doctors to provide health services. However, the government provided the state with three mobile doctors, but just three non-mobile ones instead of four. (Document number 1249, 1931, p. 1)

Health practitioners, holdings their Daralfonoon diplomas, used to monitor health services provided to Arab and Bassery nomads, along with supervising their moral, educational, political, and the like issues in 1931. (Document number 1257, 1931, p. 1)

A part of health monitoring was done by Nazmiye (the police force). It should confirm the doctors' moral health and proper behavior with patients and the results of their treatments (Document number 755, 1932, p. 1). (Figure 3)

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المراجع المسلم وزارت داخله اداره مرکو متحد المال ایات میشرا کر قدقن ثيد برسيله نظميه بادقت تمام صورتي ازكليه اطباى حسوره آن الزيسير ماتهيه وارسال دارند · هويت وتابعيت اصلي وقدميلي هريك بامراجعه باوراق سجل وتحديق نلمه وجمسوا ز وهمجتين نتيجه معالجا حواخلا وووضع رفتار آنهابامرضي أنجه مكن باشديد ستآيد بايد درجد ولما مخصوص كرشود -(1119KC University in the second secon

Figure 3. Nazmiye monitoring the doctors (Document number 755, 1932, p. 1)

There were 54 doctors, holding high school diplomas (Table 1), 11 pharmacists, and three midwives in Shiraz in 1932. (Document number 714, 1932, p. 1).

As reported, in 1934, there were 12 mobile practitioners used to inject the smallpox vaccine in Fars. (Document number 639, 1934, p. 1).

Table 1: The identity of some of the doctors based on the available documents	

	Year	Document
Fazlolah Khan Zahedi	1931	1259
MirzaMostafa Kahn BehjateVesal	1932	703
Farboud	1932	722
Agha BozorgKhane Hakim	1932	748
Eslamzade	1932	760
ShojaeNouri	1933	599
Mir HoseinShahpari	1933	609
Behdin	1933	610
BoghratOliyai	1933	615
Karim Khan Hedayat	1934	647
Faghihi	1936	505
Barkhordar	1936	515
Hekmat	1936	518

There were 10 pharmacies established in shiraz whose license and work permits were issued by the Ministry of Education and education manager in 1924. The pharmacies' names were as follows: Adab (Document number 50, 1924, p. 1),Nosrat (Document number 51, 1924, p. 1), Behboodi (Document number 52, 1924, p. 1), Razazade (Docu-

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ment number 53, 1924, p. 1), Ziyaiyan (Document number 54, 1924, p. 1), Iran (Document number 55, 1924, p. 1), Khorshid (Document number 56, 1924, p. 1), Shafa (Document number 58, 1924, p. 1), Hafez (Document number 1271, 1924, p. 1), and Fars Central (Document number 59, 1924, p. 1). (Figure 4)

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Figure 4. Hafez pharmacy permission (Document number 1271, 1924, p. 1)

Conclusion

Monitoring health services started at the end of the 19th century. Sahihe Mamlekati ordered the establishment of the South Health Office to control medical affairs in the Fars state. So systematic monitoring increased the medical services. Doctors, having their Daralfonoon diploma, all around the state, helped the Country Health to control diseases by accurate diagnosis and vaccination provided for infectious diseases. Issuing the work permit for pharmacies made them to give the best services to the patients. Medical services were less available for the nomads but the South Health Office decided to send doctors having Daralfonoon diploma to increase the medical services and monitor the health condition. This time was the beginning of modern medical services.

The available documents and evidence show that monitoring the actions of doctors and pharmacies and sending mobile doctors to treat patients in cities and villages has played a good role, especially, in treating the smallpox in children and in improving the treatment of patients, saving more lives threatened by infectious diseases, especially smallpox

Conflict of Interest

None.

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