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LA CONFIGURACIÓN HISTÓRICA DEL SISTEMA HOSPITALARIO EN ESPAÑA

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Factors determining the historical configuration of the hospital system in Spain

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Genealogy of hospital reform in Spain: the gestation of a new hospital-centric health culture

Josep Barceló-Prats 27

1.—Introduction. 2.—Precedents of the modern hospital in Spain. 3.—Bases of the hospital reform in Spain: regionalization and hierarchization. 4.—Conclusions.

ABSTRACT: In Asturias, Spain, a new way of understanding the hospital emerged at the end of the 1950s. This new model, designed to be used by all types of patients, regardless of their pathology or economic situation, would end up being a key influence on the modernization of Spanish hospital organization. Thus, the General Hospital of Asturias became a pioneer in Spain by opting for a hierarchical structure in all clinical medical services, whether for hospitalization, outpatient departments or emergencies. Another significant consequence was the introduction of specialized healthcare training in Spain *via* the creation of the first internal medicine residency programme. Until this time, the hospital had still been a healthcare resource that was not very accessible to large sectors of the population in Spain, unlike the situation in many European countries at the time. The new organizational model broke definitively with obsolete concepts

of «autonomous» and «closed» hospitals. From then on, hospitals were «open» to the entire community and were integrated into a functional and hierarchical coordinated network of hospitals, in a process known as «regionalization». This new reality required the accreditation of hospitals in order to comply with criteria established by international hospital doctrine and to offer insurance companies and users a minimum guarantee of the quality and rationality of the health services provided. This process eventually led to a new healthcare culture, based on a hospital-centric vision of the health system, being assimilated by the Spanish population.

Teaching hospitals in contemporary Spain: the case of university clinical hospitals

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- 4.—Between consolidation and limitations in teaching hospitals (1963-1980).
- 5.—The crisis of clinical hospitals and their transfer to INSALUD (1980-1986).
- 6.—Conclusions.

ABSTRACT: From the 18th century onwards, there were major developments in the teaching function of hospitals in Europe and North America. The unification of medicine and surgery and the integration of clinical practice into the curricula of medical studies created the need to link schools of medicine to hospitals. Spain only joined this process gradually and belatedly and with its own peculiarities. The aim of this article was to outline the history of teaching hospitals in Spain, particularly the university clinical hospitals managed by the Ministry of Education. The study also focuses on political aspects of the issue, especially the establishment and development of the relationship between local institutions and the central state in managing the country's hospital system in general and teaching hospitals in particular.

The role of municipal and provincial hospitals in Spain from a historical perspective

Margarita Vilar-Rodríguez and Jerònima Pons-Pons 79

- 1.—Introduction.
- 2.—The 19th century configuration of hospitals around municipalities and provincial councils until the Spanish Civil War.
- 3.—The survival of provincial and municipal hospitals against the slow advance of the State (1939-1975).
- 4.—The slow transition towards a coordinated hospital system (1978-2005).
- 5.—Conclusions.

ABSTRACT: Municipal and provincial hospitals played a key role in the historical creation of the hospital system in Spain until the second half of the 20th century. Their strategic role in coverage of the poor under the 19th century charity system gradually changed with the creation of the modern hospital, located in new buildings and with innovative management techniques, which had a hierarchical internal structure and implemented advances in the diagnostic and therapeutic field. These helped to provide coverage to an increasingly large segment of the

population. With this background, this paper focuses on a historical study of the public hospital structures linked to municipalities and provincial councils with specific objectives. First, it analyses how they were set up and organized, the services they provided, and how they were financed up to the Franco dictatorship. Second, it examines how the functioning and survival of the old municipal and provincial infrastructures were affected by the implementation of compulsory sickness insurance in 1944 and the construction of an accompanying network of hospitals known as *«residencias sanitarias»*. Finally, it analyses their practical disappearance after the transfer of responsibility for health care during the transition to democracy.

History of a waning infrastructure: the terminal crisis of the rural hospital at the end of the Franco regime (1960-1975)

Daniel Lanero Táboas 111

1.—Introduction. 2.—A winding road: hospitals and rural medicine between the end of the Old Regime and the early 20th century. 3.—The rural hospital infrastructure during the dictatorship. 4.—Conclusions.

ABSTRACT: This paper analyses the evolution of rural hospitals in Spain from the second half of the 18th century to the final decades of the Franco dictatorship, a period of rapid development known as *«desarrollismo»*. The first part describes the characteristics of the rural hospitals in towns and villages and the causes of their decline at the expense of provincial hospitals during the 19th century. It also examines the conditions in which rural medicine was practised during the 19th century and the first decades of the 20th century (up to the Spanish Civil War). The second part, based on an analysis of hospital registers corresponding to 1963 and 1970, portrays hospital care in the rural world towards the end of the dictatorship and compares its specific dynamics in four regions: Galicia, the Basque Country, La Mancha and Andalusia. For rural dwellers, who comprised the majority of the Spanish population until the second half of the 20th century, the final decades of the dictatorship marked a definitive transition from a rural healthcare model of liberal medicine and (public and private) charity to one of socialized medicine and urban localization.

The Contribution of Mutual Provident Societies to the Spanish Hospital System: the case of *La Alianza*

Pilar León Sanz 135

1.—Introduction. 2.—Mutual Provident Society Hospitals 2.1.—Quantification and localization of the hospitals. 3.—Initial development of *La Alianza* Hospitals. 3.1.—Multiple origins of the economic resources of the hospital. 3.2.—Opening to other institutions and other types of patients. 3.3.—The years before the Civil War (1936-1939). 4.—The expansion of *La Alianza* after the Civil War. 4.1.—A new boost to the federation of Mutual Aid Societies. 4.2.—The public accord with *La Alianza* clinics. 4.3.—*La Alianza* hospitals between 1963 and 1970. 4.4.—Implementation of new specialties. 4.5.—A characteristic management style. 5.—Decline of *La Alianza*. 6.—Conclusions.

ABSTRACT: Mutual aid societies comprised a varied set of social, private and non-profit institutions that provided social welfare benefits to a large part of the population, also in the event of illness, during the second half of the 19th century and the first half of the 20th century. Only a few hospitals were promoted by these institutions in Spain, perhaps because most of them did not have enough members to do so. Hospitals of this type were mainly located in Catalonia, the Spanish region that saw the greatest development of workers' mutual aid societies. This study uses the paradigmatic case of the hospitals of *La Alianza* to show that these hospitals were open to diverse types of patients (private or referred by other institutions) and were economically dependent on multiple sources. The changes that most influenced these institutions in the second half of the 20th century are analyzed, i.e., the processes of federating mutual societies and establishing public agreements. These hospitals participated in the development of new medical and surgical specialties. It was precisely the hospitals of *La Alianza* that led to a further development of this entity.

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The medical controversy around cold drinks in the 16th century: the Latin opuscule of Bernardino Gómez Miedes

Sandra Inés Ramos Maldonado 163

1.—Introduction. 2.—The medical controversy around «cold drinking» in Modern Europe. 3.—Spanish editorial panorama: the decade from 1569 to 1579. 4.—The Latin opuscule of B. Gómez Miedes on «The use of drinks chilled with snow very necessary and appropriate for health» (Valencia, 1579). 4.1.—Printing and binding of the opuscule as *Appendix* of the *Commentarii de sale*. 4.2.—Latin vs. vernacular languages. 4.3.—Dialogical vs. discursive genre. 4.4.—Argument, purpose, and sources of the work. 5.—Conclusions.

ABSTRACT: This study establishes the framework within which six treatises on the medical controversy of «cold/chilled drinks» were disseminated in the decade from 1569 to 1579. The debate centered on its possible harmful or therapeutic effects and involved renowned physicians of the Renaissance. At the center of this controversy around the healthier use of cold drinking with snow stands out the only Spanish opuscule edited in Latin, with the vernacular language being used in the other five. It was written by prelate Bernardino Gómez Miedes and published in Valencia in 1579 as an «Appendix» in the second edition of his monumental *Commentarii de sale*, dedicated to King Felipe II and his son Prince Diego. This Latin monograph is approached in order to address rhetorical-pragmatic matters related to this medical controversy.

The Professional Association of Liberal Physicians: the progressive response to Spanish medical associationism (1935-1939)

Juan Atenza Fernández, Rubén Mirón González and Benito Díaz Díaz 187

1.—Introduction. 2.—Early years of the Professional Association of Liberal Physicians (*APML*): establishment and affiliation. 2.1.—The process of its constitution. 2.2.—An approach to the affiliation of *APML*. 3.—Activity of the *APML* (1935-1939). 3.1.—Social presence and organizational proposal. 3.2.—Actions of the *APML* during the Civil War. 3.3.—Scientific activity of the *APML*. 4.—Repression and exile: the end of a progressive project. 5.—Conclusions.

ABSTRACT: This paper represents an important contribution to the scant historiography on medical professional associationism in Spain in the mid-20th century. The Professional Association of Liberal Physicians (*Agrupación Profesional de Médicos Liberales, APML*), created during the Second Spanish Republic, not only attempted to break with the traditional associative background of the medical profession but also actively participated at political and social level in order to achieve a medicine committed to society. This active positioning made the *APML* an enemy of the Franco regime, leading its members to become victims of repression and exile.

Vaccine and serum preparation during the Spanish flu in Argentina. State initiatives at the periphery of science (1918-1919)

Adrián Carbonetti 211

1.—Introduction. 2.—Vaccines and therapies against the Spanish flu. 3.—The entry of Spanish flu into Argentina and its development. 4.—The Bacteriological Institute. 5.—The Bacteriological Institute and the Spanish flu pandemic. 6.—Sera against Spanish flu. 7.—Preparation of a vaccine against Spanish flu and associated diseases. 8.—Tests of the 1919 vaccine. 9.—Conclusion.

ABSTRACT: This article studies the development of two methods to combat Spanish influenza (flu) in Argentina: sera and vaccines. Research on the etiological agent and development of these instruments were carried out at the Bacteriological Institute. At the time of the entry and spread of the disease, this state institution was directed by the Bohemian physician Rudolf Krauss, working with a part of the Buenos Aires and foreign medical elite. We analyze the methodologies used for creating these instruments and for the tests that were developed throughout 1918 and 1919. We consider that the same State that allowed and encouraged the development of both prevention and therapeutic methods, in particular the vaccine, was also, due to its own dynamics, a factor that prevented the implementation of tests for its validation and application. The study was based on a hermeneutical approach and drew on various sources, including state documentation, scientific articles, and journalistic notes.

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