

VARIA**KRYSTYNA KACPROWSKA****COUNTERACTING THE SMALLPOX EPIDEMIC
IN POLAND IN 1963****Introduction**

According to I. Kienzler, smallpox was last seen during the epidemic, which broke out in the summer of 1963 in Wrocław. It was the last epidemic of this disease in Poland and one of the last in Europe. Smallpox was brought to Poland by Bonifacy Jedynak, a Security Service officer. Some sources inform that he was returning from Burma, while other sources indicate he was returning from Vietnam. The first victim of the disease was a nurse, the daughter of a room attendant who was caring for an infected patient. 99 people became ill and 7 died¹. The first to recognize smallpox was Dr. Jerzy Rodziewicz, the head of the sanepid. The head of the Infectious Diseases Clinic in Gdańsk, who had dealt with smallpox two years earlier when several sailors from an Indian merchant ship that called at the port of Gdynia were ill, was also asked for a consultation. This consultation confirmed the first diagnosis². The purpose of the study given was to analyze the effectiveness of the policy conducted in Wrocław during the smallpox epidemic of 1963. The main research problem was the applied health policy tools with which to fight the disease. The aim of the research was to determine their effectiveness. By using the literature review, it was possible to analyze the state of knowledge which indicated the level of effectiveness of health policy during the epidemic.

KRYSTYNA KACPROWSKA – Szkoła Główna Handlowa w Warszawie, ORCID: <https://orcid.org/0000-0002-2183-865X>, e-mail: kk101835@doktorant.sgh.waw.pl

¹ I. Kienzler, *Kronika PRL*. Vol. 3: *Scandals and scandals*, Warsaw 2015, p. 39.

² E. Sitek, *Black smallpox in Wrocław*, “Police Newspaper”, <<https://gazeta.policja.pl/997/archiwum-1/2020/numer-183-czerwiec-2020/189956,Czarna-ospa-we-Wroclawiu.html>>, access: 29.12.2021.

Quantitative development of the smallpox epidemic

G. Trzaskowska pointed out that a total of about 100 people fell ill with smallpox in Poland in 1963, including 80 people in Wrocław, and seven people died. More than 2.5 million people were vaccinated in Lower Silesia. In Wrocław alone, about 1400 people were isolated in specially prepared buildings and the isolation period lasted 21 days. In addition, more than a dozen facilities have been quarantined. After the smallpox epidemic was extinguished in Wrocław in September 1963, the local party authorities put forward several proposals, which, however, were not implemented in several important points, including the construction of a modern infectious disease's hospital in Wrocław³.

Table 1. Number of cases of smallpox in Poland in 1963

The area of the smallpox epidemic	Number of total smallpox cases by data			
	Central Statistical Office	Central Committee of the Polish United Workers' Party in Wrocław	Sanitary and Epidemic Station of the City of Wrocław	"Słowo Polskie" from August 1963
City Wrocław	80	90	80	88
Voivodship Wrocław	11		11	10
The remaining area of Poland		9	–	15

Source: G. Trzaskowska, *Smallpox epidemic in Wrocław in 1963*, Wrocław 2008, p. 16.

Spatial development of smallpox epidemics

Before the authorities in Wrocław took complex anti-epidemic measures, the dangerous plague had already managed to cross the city borders. Smallpox virus was transmitted not only to Lower Silesia, but also to Opole, Gdańsk and Wierszów in the province of Łódź⁴. Until July 24, 1963, two cases of smallpox were reported in the Wrocław province – one in Legnica and one in Oława. On 19 July 1963 in Opole a person who had contact with B. Jedynak during his illness.

³ G. Trzaskowska, *Polish epidemics – the natural pox epidemic in Wrocław in 1963*, <<https://www.ap.wroc.pl/wystawy/epidemie-polskie-epidemia-ospy-naturalnej-we-wroclawiu-w-1963-r.>>, access: 27.12.2021.

⁴ G. Trzaskowska, *Smallpox epidemic in Wrocław in 1963*, Wrocław 2008, p. 15.

The patient was initially diagnosed with chickenpox. The correct diagnosis was not made until five days later. By that time, the patient had already infected two other people.

As emphasized by G. Trzaskowska, the smallpox virus was transmitted to Gdańsk by a person who stayed in Wrocław and contacted the patient the day before she fell ill. In Wieruszów, in the province of Łódź, symptoms of smallpox occurred in a former patient of the Rydygier Hospital (she stayed there from July 3 to 8, 1963). As a result of the disease, the woman died at the end of July 1963. This was the only death due to smallpox in 1963 reported outside Wrocław. The highest number of cases was reported in Wrocław and Wrocław Province – together almost 100, in Opole Province – 9, in Łódź Province – 5 and in Gdańsk Province – 1⁵.

Antiepidemic action and media information

According to J. Kostrzewski and W. Magdzik, the epidemic began in Wrocław, in June 1963. It was then that the initial anti-epidemic plan was developed⁶. M. Skotnicka-Palka notes that as early as the day the smallpox epidemic was detected, the Epidemiological Council was assembled to develop a statute, directive, and scheme of action. The building of the Presidium of the National Council in Wrocław on Gabriela Zapolska Street housed the headquarters of the Anti-epidemic Council⁷.

The state of emergency in Wrocław was declared on July 15, 1963. Initially, this fact was kept secret. The inhabitants of the city, including most medical personnel, did not learn about smallpox in Wrocław until July 17, 1963, from the first laconic announcement of the Department of Health and Social Welfare of the Presidium of the National Council of the City of Wrocław, published on the last page of the daily newspaper "Słowo Polskie". In a few sentences it informed about the probability of smallpox in Wrocław: "during the last several days five cases of disease have been registered and received hospital treatment in Wrocław, in which the course so far does not exclude smallpox". In fact, about twenty people were already sick with smallpox at that time. The information campaign for the citizens of Wrocław was launched with considerable delay and inadequately to the serious threat to the city⁸.

The government's policy regarding "smallpox" was initially cautious, as it was feared that industrial plants would have to be shut down and panic would set in, threatening disastrous economic consequences for the country's underperforming economy. This situation was described by the words spoken

⁵ Ibidem, p. 16.

⁶ J. Kostrzewski, W. Magdzik, *Smallpox epidemics in Poland in 1953–1963*, „Epidemiological Review” 18(1964), p. 142.

⁷ M. Skotnicka-Palka, *97 days of horror. Smallpox epidemic in Wrocław*, „Memory and Future Quarterly” 13(2013), p. 22.

⁸ G. Trzaskowska, *Smallpox epidemic in Wrocław in 1963*, p. 10.

in July 1963 at a meeting of the Central Committee of the Polish United Workers' Party in Wrocław. It seems that in this way an attempt was made to justify the hitherto overcautious policy towards the epidemic: "The smallpox outbreak in Wrocław caused panic in the rather timid Wrocław society, resulting from a misunderstanding of many things. So far, the probability of getting smallpox in Wrocław is lower than the probability of getting into a street accident, and yet the fear of smallpox is disproportionately higher for psychological reasons than the fear of walking on the street. This panic in Wrocław society and in the country is causing several additional difficulties. Unreasonable regulations are being issued in individual institutions and plants, people from Wrocław are being boycotted on holidays and on [trains], recently, Wrocław suppliers have had difficulties in business contacts, which causes production difficulties in some plants"⁹. For questions: "...why the authorities did not close cinemas, cafes, restaurants" it was answered that: "...such a decision would also entail other [disadvantages], i.e., stopping public transport, consequently factories and stopping production"¹⁰. This was feared most, more than the progress of the black plague. The same was true in late July 1963, when it was decided to broadcast short messages on the radio about the progress of the epidemic. However, after considering the opinion of the secretary of the Polish United Workers' Party City Committee in Wrocław, who stated that they were too alarmist, it was decided to soften their tone. From then on, their content was to be consulted with Iwaszkiewicz¹¹.

Organization of medical services and handling of smallpox patients during an epidemic

As G. Trzaskowska points out, the difficult epidemiological situation was aggravated by the lack of trained medical staff that would know the methods of fighting the deadly disease and the unpreparedness of the state administration in this regard. There was no proper law on combating epidemics in Poland (the one in force from 1935 did not meet the requirements), and no detailed regulations were prepared, including regulations and instructions on the organization of epidemiological hospitals, isolation rooms, and the procedure of dealing with the sick and people who had contact with them¹².

As it turned out, after the smallpox emergency was announced in Wrocław in July 1963, there were only three doctors in the city who knew smallpox

⁹ Idem, *On the second line. The smallpox epidemic in Poland in 1963 in the light of the documents of the Security Service*, „Silesian Historical Quarterly Sobótka” 2(2014), p. 5.

¹⁰ K. Kąkolewski, *Black Lady*, „World” 37(1963), p. 216.

¹¹ IPN Warszawa, IPN BU 329/39, *Report from the meeting with the chairman of the PRN of Wrocław*, B. Iwaszkiewicz, on July 25, 1963, p. 19.

¹² G. Trzaskowska, *Polish epidemics – the natural pox epidemic in Wrocław in 1963*, <<https://www.ap.wroc.pl/wystawy/epidemie-polskie-epidemia-ospy-naturalnej-we-wroclawiu-w-1963-r.>>, access: 27.12.2021.

from their own experience (yet their knowledge was not used at this point). This situation was confirmed by the information from the Administrative Department of the Central Committee of the Polish United Workers' Party in Wrocław from December 1963, which openly stated: "Late diagnosis of smallpox was caused first by lack of knowledge of the clinical picture of smallpox by physicians in Wrocław and by lack of knowledge and even underestimation of the principles of antiepidemic management"¹³. It is worth noting, however, that cyclical trainings for physicians on smallpox control were initiated. As a result, 50 Polish and two Hungarian physicians were trained¹⁴.

Diagnosis and treatment of smallpox in hospitals and other health care facilities

G. Trzaskowska points out that each case of suspected smallpox had to be first examined by a specialist. These physicians were appointed by a resolution of the Health Department of the Commune of Wrocław on 16 July 1963. These doctors were appointed by a resolution of the Department of Health of the Commune of the City of Wrocław dated July 16, 1963. The team was originally to consist of at least three people, but due to growing needs, it expanded to ten people by early August 1963. The composition of the team was variable. It was made up of doctors, among others: Arendzikowski, Popkow, Smoleńska, Nowak and Gajda from Gdańsk. The doctors operated in Wrocław and the Wrocław province. For this reason, waiting time for consultation could be even several hours¹⁵.

It is also worth mentioning the symptoms of the disease itself. T. Gałwiaczek emphasizes that the characteristic feature of the patients was a maculopapular rash, localized mainly on the face and limbs. After a few days the papules developed into vesicles. These, in turn, turned into pustules and then into scabs, which spontaneously fell off, leaving disfiguring scars. Smallpox was usually mild in vaccinated people. If there were no complications, the patient gradually recovered. However, there have been cases when the disease became violent, making it impossible for doctors to help the patient effectively¹⁶. T. Gałwiaczek pointed out that the incubation period of smallpox was usually seven to seventeen days. Its first symptoms were similar to those of influenza, which included chills, high fever, sacro-lumbar pain, vomiting, upper respiratory tract catarrh¹⁷.

G. Trzaskowska states that the headquarters of the team of specialists was first the Station on Składowa Street, where smallpox reports were registered, and then the nurses' school on Krakowska Street. Doctors were on duty from

¹³ G. Trzaskowska, *Smallpox epidemic in Wrocław in 1963*, p. 9.

¹⁴ J. Czubacki, *Smallpox epidemic in Wrocław in 1963. History forgotten and less known*, <<https://historiamniejznanaizapomniana.wordpress.com/2021/07/15/epidemia-ospy-we-wroclawiu-w-1963-roku/>>, access: 29.12.2021.

¹⁵ G. Trzaskowska, *Smallpox epidemic in Wrocław in 1963*, p. 23.

¹⁶ T. Gałwiaczek, *Death toll*, „Bulletin of the Institute of National Remembrance” 7(2012), p. 36.

¹⁷ Ibidem.

8 am to 9 pm, and one of them was also on night duty. When leaving for consultations, one had to take with him the prescribed protective outfit, which had to be disinfected upon return. This consisted of an apron, cap and mask, rubber gloves, wellingtons, glasses, tweezers, and a spatula. Upon arrival, the physician assessed the patient's condition, deciding on the next course of action¹⁸.

G. Trzaskowska states that the rapid spread of the smallpox epidemic in Wrocław made it necessary to organize smallpox hospitals, where the sick could be isolated under strict sanitary conditions. Such requirements were not met by the Infectious Diseases Hospital on Piwna Street in Wrocław, which initially performed this function. The employees of the Sanitary-Epidemiological Station in Wrocław assessed the situation as follows: "The city to date does not have a proper building suitable for an infectious disease hospital. The situation is aggravated by the fact that the infectious wards are fragmented in several buildings in different districts of the city. All infectious wards do not have facilities for sewage treatment and disinfection. The Municipal Hospital for Infectious Diseases in Piwna Street absolutely does not meet the needs of an infectious disease's hospital. It is located in an old building, not suitable for adaptation"¹⁹.

According to the authorities, a branch of this hospital in Szczodrze (a hepatitis treatment center) near Wrocław in Oleśnica County was more suitable for this purpose. The evacuation of Ward II of the hospital on Piwna Street began on July 17, 1963, in the late evening hours. The smallpox patients, the Ward staff and the doctors who had direct contact with the patients were transferred to Szczodry. The hospital had forty beds. On July 19, 1963, there were nineteen people diagnosed with smallpox and one person under observation. The existing patients of the hospital in Szczodry were taken over by the Regional Hospital in Będków in the Trzebnik district. However, people with infectious diseases other than smallpox from the Wrocław area were to be hospitalized in the Regional Hospital for Infectious Diseases in Wiązów, in the Strzelin district²⁰.

The facility in Szczodrze was an isolation hospital. On 22 July 1963 the vice-minister J. Kostrzewski decided to make the hospital in Szczodrze independent. Its management was entrusted to Alicja Surowiec. Cases from the observation hospital in Psie Pole and those found by consultants were referred there. These were patients with a clear typical clinical picture of the disease, those with a less characteristic clinical picture but with a definite epidemiological background, and those in whom smallpox was confirmed by virological tests, with a clinical picture that was not typical. At the peak of the illnesses, the hospital's occupancy rate was so high that there were only four vacancies on July 29. It was decided to reserve them for the most serious cases. The others were to be sent to Prząśnik. The hospital had an ambulance "Warszawa", which was stationed in Szczodrom²¹.

¹⁸ G. Trzaskowska, *Smallpox epidemic in Wrocław in 1963*, p. 23.

¹⁹ *Ibidem*, p. 25.

²⁰ *Ibidem*, pp. 25–26.

²¹ *Ibidem*, p. 26.

Vaccinations

G. Trzaskowska points out that on July 16, 1963, the Department of Health and Social Welfare of the presidencies of national councils in Wrocław sent a telegram to subordinate offices and district clinics, which stressed the necessity of organizing preventive vaccination points in the city. In addition, health care personnel were required to keep records of those vaccinated, check for signs of vaccine acceptance, and issue appropriate certificates²².

As noted by M. Skotnicka-Palka, an artificial strain of the virus that was cultured on cows was used for theosopspice vaccination. It was performed by applying the bovine strain to a defatted arm fragment and applying 30–40 compressions with a needle or scarifier. After vaccination, it was necessary to check whether the vaccine had taken (after 4–5 days). If there was no reaction after three attempts, a certificate was issued. Vaccination was introduced as soon as the epidemic was recognized, and on July 20, the Ministry of Health decided to vaccinate the entire country²³. As a result of vaccination also of persons with contraindications to vaccination with live vaccines, 9 deaths were recorded, adverse reactions were registered in about one thousand vaccinated persons²⁴.

A. Kraska-Lewalski points out that during the smallpox epidemic it was possible to leave the city only by showing a proper document, which confirmed that one had been vaccinated. A similar situation took place in the case of entering Wrocław. Special information boards and militia posts were erected on the city's corners to control around the clock all vehicles entering and leaving the city. This document was issued in vaccination points, which were located all over the city, mostly in health centers, but also at the main railway station²⁵.

Antiepidemic plan

The plan to fight the pandemic was to organize an epidemic hospital, to detect further infections, to detect and isolate healthy people who had contact with the sick, to create an isolatorium for them and to start mass inoculations of the population of Wrocław²⁶. As a result of the late but mostly correct identification of the virus (an epidemiological alert was not declared until July 15, almost a month and a half after the arrival of the vector in the country, which occurred on May 22), 7 people died, most of whom were direct members of the epidemiological

²² Ibidem, pp. 18, 19.

²³ M. Skotnicka-Palka, *97 days of horror. Smallpox epidemic in Wrocław*, p. 3.

²⁴ A. Pająk, B. Królak-Olejnik, *Polish Calendar of Protective Vaccinations – yesterday, today and tomorrow*, „Nursing and Public Health” 5(2015), p. 94.

²⁵ A. Kraska-Lewalski, „Black Lady in Wrocław ...” *Smallpox epidemic in 1963. In the archive and lens of Józef Bakalarski, the operator of the Polish film chronicle*, „Journal of the National Institute Ossoliński” 30(2020), p. 158.

²⁶ J. Kostrzewski, W. Magdzik, *Smallpox epidemics in Poland in 1953–1963*, p. 144.

chain. A total of 99 people were diagnosed with the disease²⁷. Within three days and three nights, the tasks set out in the preliminary counter-epidemic plan were undertaken. On July 19, the entire anti-epidemic system was in place in Wrocław, and the epidemic situation had been identified. The epidemic began to assume large proportions and spread beyond the city limits of Wrocław²⁸.

Quarantine matters during the smallpox epidemic in Wrocław were handled by a five-person team led by Wanda Kocielska. This group operated in the city of Wrocław, with particular emphasis on hospitals under quarantine. These individuals responded immediately after the consultant physician team identified a case of smallpox (reports were checked hourly). The message was then to be forwarded to the sanitation department according to the following rules: case from the city area – district sanitary-epidemiological stations, case from the area of Wrocław voivodeship – Voivodship Sanitary and Epidemiological Station in Wrocław, domestic case – on the slogan “to the rescue” the appropriate sanitary-epidemiological station was notified.

Rules and regulations developed by the management and coordination team had to be followed while the quarantine was in effect. In these facilities, all windows facing neighboring streets had to be shielded in such a way as to prevent any direct contact between patients and staff and outsiders. It was also necessary to secure the entrances to the building and the breaches in the walls leading outside the hospital. These buildings were guarded by militiamen. Deliveries of food, medicines, underwear, etc. were organized in a relay system, observing sanitary rules²⁹.

G. Trzaskowska pointed out that isolatoria were places of isolation for healthy people who had contact with smallpox patients (first level contacts). They were established almost simultaneously with the announcement of epidemiological threat in Wrocław. The decision to establish an isolation center in Pracze Odrzańskie was taken as early as July 16, 1963, during one of the first meetings of the authorities to combat the smallpox epidemic. On July 18, 1963, by virtue of an order issued by the Presidium of the National Council in Wrocław, classes on the training course for agricultural mechanization technicians held at the Agricultural Mechanization Technical School in Pracze Odrzańskie were discontinued. The students of the course were ordered to be inoculated against smallpox and sent home, while an isolation center for about two hundred people was set up in the school building. Jerzy Wolański became its first director. Two cars “Warszawa” and “Nysa” were given to the isolatorium³⁰.

A. Lisiecki (2016) points out that to isolate the suspects, special isolation rooms were also created, e.g., in Szczodre, in Prząśnik and the largest one – in the Engine Construction Technical School in Psie Pole in Wrocław. Due to cases of attempted escapes from the isolators, the facilities were fenced with

²⁷ A. Lisiecki, *Prevention of epidemiological threats through the ages*, „Scientific Journals of the State Higher Vocational School Witelon in Legnica” 18(2016), p. 48.

²⁸ J. Kostrzewski, W. Magdzik, *Smallpox epidemics in Poland in 1953–1963*, pp. 144, 146.

²⁹ G. Trzaskowska, *Smallpox epidemic in Wrocław in 1963*, p. 38.

³⁰ *Ibidem*, p. 32.

barbed wire and constantly guarded by the militia. The smallpox epidemic in Wrocław was the last to occur in Europe. According to a study by the World Health Organization, smallpox was declared eradicated in 1980³¹.

Analysis of non-medical activities

Given the state of the Polish economy in the 1960s, one had to reckon with enormous difficulties in organizing transportation, limitations in access to telecommunications, disinfectants, and personal protection for health care workers. Above all, adequate reserves of smallpox vaccine, the main and most effective tool in the fight against the epidemic, were not secured³². At the end of July 1963, a central Disinfection, Pest Control and Deratization Group was organized at the Sanitary and Epidemiological Station in Wrocław. Permanent disinfection points existed in the isolation center in Pracze Odrzańskie, in the Emergency Room and in the smallpox hospital in Szczodrom. Disinfection included all matters to prevent the spread of smallpox germs, especially secondary infections. Preventive disinfection, smallpox outbreak disinfection, and final disinfection were performed. These activities referred to body surfaces, clothing, personal and household items, automobiles, equipment, rooms, secretions, excretions, feces, waste, soil, air, and corpses.

Various methods were used to carry out such extensive work, such as decontamination in disinfection chambers (provided by the military), using germicidal lamps, chloramine, and chlorinated lime solution, etc. Preventive disinfection was carried out in isolation rooms, quarantined hospitals, and other health care facilities (e.g., physicians' and surgeons' offices, out-patient clinics) as well as in sanitary-epidemiological transport columns (ambulances were disinfected after each patient transport) as needed. Door handles, wrapped in gauze, were constantly moistened with chloramine solution.

Straw mats or sheets soaked in disinfectant liquid were laid out in front of the entrances to the buildings, and bowls of water with chloramine were placed in the corridors. Strict sanitary conditions were observed when washing dishes and cleaning rooms. For example, floors were disinfected twice daily. Focal disinfection was performed in facilities that housed smallpox patients and Level I contacts during the quarantine period held in a particularly infected sector³³.

On July 19, 1963, the Provincial and Municipal Committee for Physical Culture was ordered to suspend, until further notice, all sports events organized in Wrocław. Particularly burdensome for the citizens of the city in those hot days of July 1963 was the decision to close all bathing beaches and swimming pools

³¹ A. Lisiecki, *Prevention of epidemiological threats through the ages*, p. 48.

³² G. Trzaskowska, *Polish epidemics – the natural pox epidemic in Wrocław in 1963*, <<https://www.ap.wroc.pl/wystawy/epidemie-polskie-epidemia-ospy-naturalnej-we-wroclawiu-w-1963-r.>>, access: 27.12.2021.

³³ Idem, *Smallpox epidemic in Wrocław in 1963*, pp. 39–40.

(including the one at Teatralny Square). However, this was motivated not by the fact of the development of the plague, but by the prohibition of soaking the site of inoculation³⁴. Car and pedestrian traffic decreased in the city, parks, stores, and cinemas became deserted. However, there was no decrease in crime, but there was a clear increase in the consumption of alcoholic beverages, as there was a belief that alcohol prevents disease³⁵.

Conclusions

After analyzing the measures taken to counteract the smallpox epidemic in Poland in 1963, we can see that such countermeasures as placing the sick in smallpox hospitals, isolating people in direct contact with those infected with the virus in isolation rooms and introducing compulsory vaccinations and their control were of great importance in quickly controlling the epidemic in Wrocław and Lower Silesia. All the measures taken significantly prevented the creation of new epidemic outbreaks in the city. Assessing the course of all activities in Wrocław in 1963, one can conclude that the local authorities won the battle against the black plague. On the other hand, however, the smallpox epidemic resulted in many deaths from the disease and the number of victims who suffered in various ways from vaccine complications. In addition, based on the scholarly sources analyzed, one can observe an attempt to conceal from the city's residents the extent of the danger that threatened them, which in mid-July 1963 could all too easily have escaped the control of the sanitary-epidemiological authorities. In addition, service institutions also suffered various kinds of losses during this period. This was influenced by difficult contact with customers, people's reluctance to make important decisions during the period of immediate danger to life, etc. The organizational effort made in Wrocław during the epidemic was enormous. Here one can mention, for example, the unlimited availability of telephone lines, cars and even air transport (for provincial consultants) as well as buildings, equipment, and disinfectants, etc. In addition, the effective work of the health service brought positive results. The restrictions introduced during the pandemic, both in the medical and non-medical spheres, which were applied as part of the economic policy pursued by Poland during the pandemic, contributed to the rapid and effective fight against the pandemic.

³⁴ Ibidem, pp. 13–14.

³⁵ E. Sitek, *Black smallpox in Wrocław*, "Police Newspaper", <<https://gazeta.policja.pl/997/archiwum-1/2020/numer-183-czerwiec-2020/189956,Czarna-ospa-we-Wroclawiu.html>>, access: 29.12.2021.

BIBLIOGRAPHY

- Czubański J., *Smallpox epidemic in Wrocław in 1963. History forgotten and less known*, <<https://historiamniejznanaizapomniana.wordpress.com/2021/07/15/epidemia-ospy-we-wroclawiu-w-1963-roku/>>, access: 29.12.2021.
- Galwiazek T., *Death toll*, „Bulletin of the Institute of National Remembrance” 7(2012), pp. 35–39.
- IPN Warszawa, IPN BU 329/39, *Report from the meeting with the chairman of the PRN of Wrocław, B. Iwaszkiewicz, on July 25, 1963*, p. 19.
- Kienzler I., *Kronika PRL. Vol. 3: Scandals and scandals*, Warsaw 2015.
- Kostrzewski J., Magdzik W., *Smallpox epidemics in Poland in the years 1953–1956*, „Epidemiological Review” 18(1964), pp. 141–151.
- Kraska-Lewalski A., „*Black Lady in Wrocław ...*”. *Smallpox epidemic in 1963. In the archive and lens of Józef Bakalarski, the operator of the Polish film chronicle*, „Journal of the National Institute Ossoliński” 30(2020), pp. 153–170.
- Lisiecki A., *Prevention of epidemiological threats through the ages*, „Scientific Journals of the State Higher Vocational School Witelon in Legnica” 18(2016), pp. 45–51.
- Pająk A., Królak-Olejnik B., *Polish Calendar of Protective Vaccinations – yesterday, today and tomorrow*, „Nursing and Public Health” 5(2015), pp. 93–98.
- Sitek E., *Black smallpox in Wrocław*, “Police Newspaper”, <<https://gazeta.policja.pl/997/archiwum-1/2020/numer-183-czerwiec-2020/189956,Czarna-ospa-we-Wroclawiu.html>>, access: 29.12.2021.
- Skotnicka-Palka M., *97 days of horror. Smallpox epidemic in Wrocław*, „Memory and Future Quarterly” 13(2013), pp. 21–30.
- Trzaskowska G., *On the second line. The smallpox epidemic in Poland in 1963 in the light of the Security Service documents*, „Silesian Historical Quarterly Sobótka” 2(2014), pp. 1–18.
- Trzaskowska G., *Polish epidemics – the natural pox epidemic in Wrocław in 1963*, <<https://www.ap.wroc.pl/wystawy/epidemie-polskie-epidemia-ospy-naturalnej-we-wroclawiu-w-1963-r->>, access: 27.12.2021.
- Trzaskowska G., *Smallpox epidemic in Wrocław in 1963*, Wrocław 2008.

COUNTERACTING THE SMALLPOX EPIDEMIC IN POLAND IN 1963

SUMMARY

Great epidemics constituted one of the many important factors shaping the fate of human societies, from prehistory to modern times. Long-lasting pandemic epidemics, covering large areas and causing incalculable losses, were of great importance in history. They contributed to a previously unprecedented measurability, and thus a significant decrease in the population density. They left their mark on the political, economic, and economic structure of many cultures. It is worth noting that the most common diseases in epidemic form include syphilis, leprosy, bubonic plague, typhoid and spotted fever, smallpox, measles, influenza, tuberculosis, cholera, distemper, and dysentery. The vast majority of these came to light during the medieval and early modern periods, when hygiene and the general standard of living raised many concerns. The paper given was written to investigate the level of effectiveness of Polish health policy during the smallpox pandemic in Wrocław.

KEYWORDS: the natural smallpox, Polish health policy, vaccinations, quarantine, isolation

