UNIVERSITÀ
DEGLI STUDI DI MILANO-BICOCCA

COURSE SYLLABUS

Medical and Public Health History

2526-2-H4101D254-H4101D171M

Aims

The course aims to provide students with:

- knowledge and understanding of the historical, epistemological, and social evolution of medicine, with particular focus on the cultural and political contexts in which the medical profession developed;
- the ability to apply acquired knowledge to critically interpret the role of medicine and physicians in both past and present, including the organization of healthcare systems and models of care;
- independent judgment in evaluating how concepts such as health, disease, therapy, and the physician-patient relationship have changed over time;
- communication skills to clearly and coherently present the major stages of the history of medicine, using appropriate scientific language;
- learning skills to independently connect historical content to contemporary medical training, developing critical thinking and professional awareness.

Contents

This course offers a historical and epistemological journey through the evolution of medical knowledge, practices, and institutions, with a focus on the social, cultural, and political environments in which medicine has operated over the centuries. Students will explore key transformations in medical thought, from ancient traditions to modern scientific revolutions, and analyze the development of contemporary healthcare systems. The study of medical history is proposed as a tool to better understand the current medical profession, its relationship with society, and the challenges of the present day.

Detailed program

Origins and development of diseases throughout history. The concept of pathocenosis. Instinctive medicine, rational (regular) medicine, and theurgic medicine. Medicine in Mesopotamia, Pharaonic Egypt, Etruscan and Nuragic medicine, pre-Hippocratic Greek medicine. Hippocrates, Hellenistic medicine, medicine in ancient Rome, Galen, Byzantine medicine. Medicine in the Early Middle Ages, the birth of hospitals, monastic medicine, Islamic medicine, the Salernitan Medical School, hospitals and universities in the Late Middle Ages, the Black Death of 1348 and the crisis of the medieval health system. The Renaissance health reform. Humanism in medicine, pre-Renaissance anatomy, Vesalius, post-Vesalian anatomy, botanical gardens, Renaissance epidemics (syphilis, typhus), Paré and modern surgery and traumatology. “Reformed and reforming” physicians. Baroque medicine. Galileo’s experimental method in medicine. William Harvey and the circulation of the blood, Marcello Malpighi and microscopic anatomy, the use of the microscope in medicine, medicine in scientific academies (iatrochemistry, iatrophysics, and neo-Hippocratism), seventeenth-century physiology. Theories of systems, Giovanni Battista Morgagni and the birth of pathological anatomy, social medicine (Ramazzini, Percival Pott), Johann Peter Frank’s “medical police,” medicine in the years of the French Revolution. Mesmerism, homeopathy, and phrenology. Vaccination. Hospital medicine, the emergence of specialist hospitals and medical specialties, the development of semiotics, biochemistry, pathology (Schwann, Virchow), and physiology (Claude Bernard), the discovery of anesthetic gases, antisepsis (Semmelweis, Lister), and the development of surgery. The germ theory, microbe hunters, the birth and development of epidemiology, medical etiquette, positivism in medicine (heredity, brain studies), the birth of the pharmaceutical industry, new diagnostic tools (X-rays). Immunology and antimicrobial chemotherapy, serum therapy, early chemotherapeutics, sulfonamides, antibiotics, the scientific advances of the early twentieth century (viruses, psychoanalysis), medicine during World War I, the interwar period (Fascist Italy), medicine during World War II, eugenics and Nazi experiments, the Nuremberg Code and the Declaration of Helsinki on human experimentation, the birth of the British Welfare State, postwar medical revolutions (malaria eradication campaigns, psychotropic drugs, genes, DNA and molecular biology, vaccinology, the first organ transplants), the evolution of the Italian healthcare system and its major reforms, the optimistic medicine of the 1990s, and the cultural revolution of the 2000s. Current issues, crises, and challenges in medicine.

Prerequisites

As stated in the general syllabus of the Degree Program.

Teaching form

Lectures with moments of collective discussion. Students are encouraged to reflect on the social role of the physician and the evolution of health and the physician-patient relationship.

All lectures are delivered in person, in a lecture-based format, with 12 sessions of 2 hours each.

Language of instruction: Italian.

Textbook and teaching resource

Cesana G, Riva MA. Medicina e Società. Firenze: Società Editrice Fiorentina, 2017

Additional materials will be provided by the teacher.

Semester

year 2, semester 1

Assessment method

The final examination is written and consists of:

- 18 multiple-choice questions (single correct answer), aimed at verifying knowledge of the core course content;
- 2 short open-ended questions, designed to assess the student’s ability to understand, analyze, and critically rework the topics covered.

Scoring system:

- 0.5 points for each correct multiple-choice answer
- 2 points for each open-ended question

Office hours

By appointment, writing to michele.riva@unimib.it

Sustainable Development Goals

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