

HISTORY OF EMERGENCY MEDICAL SERVICES IN UZBEKISTAN FROM 1925 TO 1991 YY

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Abstract

This article analyzes the formation, development, and functioning of emergency medical services (EMS) in Uzbekistan from 1925 to 1991 based on historical sources and scientific literature. It provides a detailed examination of issues related to staffing, the activities and specialization of ambulance stations, training programs, and improvements in service quality. Additionally, the impact of the country's socio-political and economic conditions on the emergency medical services sector is also highlighted.

Keywords: Emergency medical services, ambulance station, doctor, paramedic, training, specialization.

Introduction

Emergency medical services (EMS) represent a system designed to provide rapid and qualified medical assistance to patients in urgent and emergency situations, and their development holds significant importance in the healthcare system. In Uzbekistan, EMS was first established in 1918 in Tashkent city, and subsequently developed rapidly, becoming an independent ambulance station by 1926. During that period, special attention was given to the quality and speed of service delivery.

From 1925 onwards, EMS in Uzbekistan began to develop systematically. The Soviet government set a high-level state policy direction in healthcare and prioritized the establishment and development of EMS. During this period, ambulance stations mainly operated in large cities such as Tashkent, Samarkand, and Bukhara.

Great emphasis was placed on the training of medical personnel: in the 1930s, the Tashkent Medical Institute was established, where specialists in emergency medical services began to be trained. Ambulance points were opened in some regions, which allowed expanding the territorial coverage of these services.

During World War II, although EMS was directed towards the needs of the front, it did not cease to provide services to the population. Many doctors and paramedics were conscripted to the front, but local ambulance stations and points remained active in delivering emergency medical care to civilians. Despite the difficult wartime conditions, the system played an important role in fulfilling its duties.

After the war, EMS was restored and developed further. The number of ambulance vehicles increased, and new points were opened in both rural and urban areas. In the late 1950s, processes of centralizing ambulance stations began, which helped to improve the efficiency of services.

During this period, ambulance brigades moved to a stage of specialization: groups were established for cardiology, pediatrics, surgery, and other directions. This improved service quality and allowed adaptation to the diverse needs of patients. In cities such as Tashkent, Fergana, Namangan, and Andijan, EMS services were strengthened. Telephone communication systems expanded, and special phone numbers for ambulance requests were introduced (service number 03).

Vehicles were technically improved — new ambulance cars such as ZIL and UAZ models were put into use. Specialized ambulance brigades — cardiological, resuscitation, pediatric, and neurological — were established. These services significantly enhanced the quality of emergency medical care.

By the late 1980s, due to population growth and increasing demand for medical services, particular attention was given to increasing the number and qualifications of EMS personnel. Training programs were intensified, and highly qualified specialists were involved.

In 1988, during the Spitak earthquake in Armenia, EMS teams from Uzbekistan were dispatched, demonstrating their preparedness and high professional skills.

By 1991, EMS in Uzbekistan was ready to form a national model and laid a solid foundation for post-independence reforms.

Conclusion

The development of emergency medical services in Uzbekistan during 1925–1991 can be summarized as follows:

1925–1940: Ambulance stations mainly operated in large cities (Tashkent, Samarkand, Bukhara). Due to a lack of technical equipment, assistance was often provided using simple vehicles.

1946–1960: After the war, the system was restored and the number of technical devices increased. The process of centralizing ambulance stations began in the late 1950s.

1960–1970: EMS services were strengthened in cities like Tashkent, Fergana, Namangan, and Andijan. Telephone communication systems expanded, and special ambulance phone numbers (03 service) were introduced.

1980–1991: Due to population growth and increased demand for medical services, special attention was paid to increasing the number and qualifications of EMS personnel. Training programs were intensified, and highly qualified specialists were involved.

During 1925–1940, emphasis was placed on training medical personnel: the Tashkent Medical Institute was established in the 1930s, and specialists in EMS began to be trained. From 1946 to 1960, the system was restored after the war, and particular attention was given to staff training. Specialists were trained through medical higher education institutions and vocational colleges.

In the 1960s and 1970s, specialized ambulance brigades — cardiological, resuscitation, pediatric, and neurological — were created. These services significantly improved the quality of EMS. From 1980 to 1991, training programs were intensified, highly qualified specialists were involved, and service quality, responsiveness, and territorial coverage expanded.

Between 1925 and 1991, EMS in Uzbekistan developed rapidly and steadily. The system became centralized, specialized, and a comprehensive free service for citizens. The experience and methodology of the Soviet period served as a strong foundation for healthcare reforms after independence.

The emergency medical service today has become an essential and inseparable part of public health. It provides prompt and professional medical assistance to patients or injured individuals in emergency situations, playing a crucial role in saving lives and reducing complications. Emergency medical services are central to ensuring public health, responding quickly in emergencies, and improving the efficiency of medical care.

The history shows how the emergency medical service was formed, what challenges it faced, and how those challenges were overcome. This serves as an important foundation for improving the service in the future. By understanding the stages of the system's development, it is possible to identify the best and most effective methods.

Knowing the history is important for specialists in the field because it helps them better understand their work and improve it. Historical knowledge also aids in preserving public health and enhancing the overall functioning of the healthcare system in society.

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