Alessandro Seppilli is one of the main protagonists for the planning and establishment of the Italian National Health Service [1]. As Chairman of the Commission for the study of health reform in the Italian Consiglio Superiore di Sanità (Higher Council of Health). As a lecturer and researcher he promoted and led several important lines of research, always ahead of its time and with great foresight. His curiosity led him to be involved in a variety of Public Health disciplines: water and sanitation, safe milk distribution, as well as demonstrating, through research, the influence of atmospheric electrical changes on biological phenomena in respect to the vital effects of electric fields changes. He also conducted pioneering research into the study of anticaries fluoride and the carcinogenic effects of active and passive cigarette smoke. Last but not least he studied the use of low temperatures for food storage, investigated the distribution of drinking water by alternative systems and undertook studies on environmental carcinogenesis.

Alessandro Seppilli is also well known in Italy as a pioneer in health education [2]. In 1954 he was one of the founders of the internationally recognised Centre for Health Education and a board member of the International Union for Health Education.

The Centre established a School for Health Education and in 1958 started to offer short courses, expanding its curriculum to include specialized courses by 1979 and a MA in 1994. It was in the Center for Health Education that many of the legislative processes related to regional and national Italian health policy were first formulated.

Along with an intensive teaching schedule, Alessandro Seppilli always maintained a commitment to research and the dissemination of results, this legacy lives on in the journal “Educazione Sanitaria e Promozione della Salute (Health Education and Promotion)”, which he founded.

He presided in the 70's over the Italian Institute of Social Medicine, guiding their activities in promoting health education. Finally Alessandro Seppilli founded the “Angelo Celli Foundation for a Culture of Health”, leading a cultural revolution with respect to the prevention and management of public health.

The young Alessandro Seppilli was inspired by Angelo Celli (1857-1914) who was the consummate hygienist, bringing together his skills as a laboratory scientist, teacher, journalist and politician to fight for better public health policies for the population.

Angelo Celli is probably most known for his major contributions in the study of malaria, leading the way for the eradication of malaria from the Roman wetlands [3]. Seppilli’s admiration for Angelo Celli led him in 1988 to bequest funds to establish the Angelo Celli Foundation, a non-profit research organization.

His early research (1929-32 period) mainly focused on the morphological changes of the typhoid bacillus and the mode of infection in shellfish S. Typhi. Afterwhich Seppilli studied the use of ozone for disinfecting water, appropriate materials to seal the joints of sewage sludge collectors as well as the use of
waxes for disinfecting floors.

Seppilli became Director of the Modena University Institute of Hygiene in 1935, and conducted extensive research on classical hygiene issues such as bottling milk in paper containers and the vitamin content of fruit juices.

At this point his career in Italy was interrupted. In October 1938, the Fascist Grand Council passed an intensive anti-Semitic campaign, which culminated in the signing of the King's decree which resulted in the exclusion of Italian citizens of Jewish religion and race from working and teaching [4]. For Jewish Italian academics emigration was the only solution. Italy lost many of its scientists, including some future Nobel Prize winners. Due to Alexander's reputation Seppilli's found refuge in Sao Paulo in Brazil, where he worked in the pharmacobiological industry. However all of this did not stop Seppilli's scientific endeavours. In the third International Congress of Microbiology (New York, 1939) he submitted two communications on the differentiation between pathogenic bacteria and the influence of atmospheric electric fields on bacterial growth.

In the II National Congress of hydroclimatology held in Rio de Janeiro in 1940, exiled Seppilli explained the importance of atmospheric electricity to human health. Finally in 1946 Seppilli returned to Italy where he was reinstated as chairman of the Institute of Hygiene in Perugia, where he was also Dean until his retirement (1977).

Seppilli's political position remained constant throughout his life. He became Mayor of Perugia from 1952 to 1964, for the Socialist party. Nevertheless he never implemented the system of choosing only employees who were male and close to him politically.

His name was also given to the Seppilli's Experimental Center for health education, due to his personal interest in health education systems. This centre is primarily sponsored by The World Health Organization European Regional Office and conducts among other things summer health education courses which are open to doctors, teachers, health and social care workers. For example, Psychologists and sociologists as part of interdisciplinary teams would prepare audio-visual materials to be presented and discussed. One of the more interesting mediums to be used perhaps were perhaps flannelgraphs. Flannelgraphs (sometimes called a flannel boards) is a storytelling system that uses a board covered with flannel fabric, usually resting on an easel. They can be used as a visual aid during presentations, allowing the speaker to display and remove charts and graphs as needed (in fact, in Central Italy, "making flannel" means "making out" between two sweethearts) [4].

During these regular meetings a real community that fostered thoughts and actions was formed. Simple systems were introduced to demonstrate a variety of mechanisms. For example, in order to demonstrate how smoke damages the respiratory system a laboratory flask, fitted with a tube, was partially filled with water. Air from a lit cigarette passed down the tube and into the water turning it brownish in the same way that smoke is deposited in the lungs. Of course this is a natural sciences laboratory trick but the direct experience of seeing this effectively conferred the message to the students [4].

The documents on health education were sometimes associated with films. The social experience of the film center of Trieste was particularly useful in this regard. The film centre, founded in 1945 was established as a communication aid for the Allied Military Government of Zone A in Trieste to support its activities. The Centre would have probably disappeared after the war when Trieste was placed under Italian sovereignty had it not been for one of those random combinations time and place. It was with the return of a provincial medical officer from Trieste, Dr Enrico Scerrino, from a one-year advanced training course in public health education in the USA, that the Centre was able to remain opened and continue its activities including
summer courses in Perugia Trieste, discussion groups and establishing itself as part of the local community.

Meanwhile, the Institute of Hygiene of Perugia not only continued to run courses and publications but also continued a series of studies on chilling and freezing food, and introduced UHT milk, after having demonstrated its effectiveness in terms of hygienic and qualitative properties.

The holistic concepts of public health can be found repeatedly within the multifaceted activities of Alexander Seppilli, along with his resolute belief in the provincial network of doctors and health officials.

Even during the period before Seppilli’s exile he worked at addressing both medical and social issues and in 1935 had contributed to the foundation of the journal Difesa Sociale (Social Defense), published by the Institute of Social Medicine, a quasi-public agency controlled by the Ministry of Labour. His candidacy for president of the Institute (1972) was naturally welcomed. The good relationship between Seppilli and the French Committee for Health Education led to articles from French Journals being published in the new Italian magazine La Salute Umana (The Human Health). This magazine was founded by Seppilli and published jointly by the Institute and the Centre for Experimental Health Education (1973) and included not only the translation of French scientific literature and articles, but also reviews by the WHO and other international health organizations [4].

As a member of the Scientific Council of the Istituto Superiore di Sanità (Higher Institute of Health) he participated actively in the Italian health care reform, a very complex process.

Alessandro Seppilli is also famous in Italy for his definition of Health Education, almost obsessively repeated in many manuals and publications on Italian Hygiene, "Health education is a social intervention aimed at the conscious and permanent change in attitudes relating to health". At the time there was a great need for health education in Italy. There had been in fact about 70 episodes that Giovanni Berlinguer called "miseducation health facts" during 1973 when there were two cases of cholera in Naples and Puglia. They were examples of real social panic due to misinformation: passenger cars with registration plates from Naples were not accepted in hotels in the north of Italy; a train from Naples that was used to host a dinner during which veterans contracted simple food poisoning was subjected to various quarantine measures.

These facts undoubtedly contributed to the specific Seppilli’s citation in article 2 of the objectives of the Italian SSN (NHS): "Creation of a modern health consciousness on the basis of proper health education of the citizen and the community." The same is true for the introduction of art 10 (local organization) of "basic health districts, are to be functional technical structures for the provision of services and first level of intervention."

Seppilli’s publications anticipated the same issues reported by WHO at the Alma Ata Congress (1978) about the priority of basic health services and the necessity for health organisations to prioritize their services in order to address the population’s real health needs.

Until the last, Seppilli was faithful to these basic concepts: the difference between health insurance and health care; the coexistence between public and private, that should not be competitive but rather complementary; a healthy mistrust of any institution that bases the provision of healthcare solely on the advice of health economists.

In recent decades we have been faced with an avalanche of counter-reforms, a situation that would have certainly made the last years of Alessandro Seppilli less that peaceful.

It’s is good to remember Alessandro Seppilli’s style: he was completely alien to rhetoric, responded politely to criticism, did not enter into any controversy that had been deliberately created, understood the complexity of
administrative problems based on his own experience.

His work has strongly influenced the birth of the national health system that still exists in Italy today; a system that the many Italian scientists and practitioners wish to defend from neo-liberal ideology because health must not be not seen as a way to make money. Public Health is not a burden on the finances of the states and an obstacle to economic growth. In closing, we should remember one final fundamental principle of Alessandro Seppilli that, as a doctor and as a politician, he was always committed to exposing and correcting social inequalities. Scarce economic resources must not be a discriminating factor in determining their health status.

References