ORIGINAL PAPER

Józef Dietl (1804–1878) and "his" crisis: Eponyms of a political physician and the culture of remembrance in Polish and Austrian urology and medicine

Friedrich H. Moll[1,2], Piotr Chlosta[3], Shahrokh F. Shariat[4,5,6,7,8,9,10]

[1]*Institute for the History, Philosophy, and Ethics of Medicine, Heinrich-Heine University, Duesseldorf, Germany*
[2]*Department of Urology, Cologne Med. Ctr. at Holweide Hospital, branch at Merheim, Cologne, Germany*
[3]*Department of Urology, Jagiellonian University Medical College, Krakow, Poland*
[4]*Department of Urology, Comprehensive Cancer Center, Medical University of Vienna, Austria*
[5]*Department of Urology, University of Texas Southwestern Medical Center, Dallas, Texas, USA*
[6]*Department of Urology, Weill Cornell Medical College, New York, NY, USA*
[7]*Department of Urology, Second Faculty of Medicine, Charles University, Prague, Czechia*
[8]*Hourani Center for Applied Scientific Research, Al-Ahliyya Amman University, Jordan*
[9]*Karl Landsteiner Institute of Urology and Andrology, Vienna, Austria*
[10]*Research Center for Evidence Medicine, Urology Department, Tabriz University of Medical Sciences, Iran*

Citation: Moll FH, Chlosta P, Shariat SF. Józef Dietl (1804–1878) and "his" crisis: Eponyms of a political physician and the culture of remembrance in Polish and Austrian urology and medicine. Cent European J Urol. 2025; doi: 10.5173/ceju.2025.0230

Article history
Submitted: Sep. 24, 2025
Accepted: Sep. 25, 2025
Published online: Nov. 15, 2025

Corresponding author
Shahrokh F. Shariat
Department of Urology, Comprehensive Cancer Center, Medical University of Vienna,
Vienna, Austria
shahrokh.shariat@meduniwien.ac.at

Introduction Medical eponyms remain widely used in clinical practice despite ongoing debate about their accuracy, ethical implications, and relevance. Józef Dietl (1804–1878), an influential physician of the Polish-Austrian medical sphere, is best known in urology for the symptom complex later termed "Dietl's crisis," describing intermittent ureteropelvic junction obstruction associated with nephroptosis. The persistence of this eponym illustrates the intersection of historical memory and modern urological practice. This study analyzes the historical development, dissemination, and contemporary significance of "Dietl's crisis," and situates it within Dietl's broader scientific and public health legacy.

Material and methods A narrative historical review was performed using primary publications by Dietl, archival documents, and secondary historical sources. A non-systematic analysis of major English-language urology and pediatric urology textbooks was conducted in collaboration with the W.P. Didusch Center for Urologic History to identify references to "Dietl's crisis." Additional examination of urological case literature and ICD-10 classifications provided further evidence of the eponym's persistence.

Results The term "Dietl's crisis" appears variably but repeatedly across major urology textbooks from the late 19th century to the present. Although its frequency declined after the 1960s, the eponym remains in use, particularly in pediatric urology and case-based reports. Historically, its prominence paralleled the evolution of nephropexy and the broader discussion of nephroptosis in the late 19th and early 20th centuries. Dietl's scientific work, encompassing early evidence-based reasoning, critique of harmful therapies, and public health reform, further reinforced his standing in medical memory.

Conclusions "Dietl's crisis" remains an enduring and clinically meaningful eponym. Its continued use, free of problematic historical associations, supports the selective preservation of established eponyms as part of the cultural and scientific heritage of urology.

Key Words: Josef Dietl ‹› eponyms ‹› culture of remembrance ‹› collective knowledge in medicine and urology ‹› history of urology ‹› history of science ‹› nephropexy

INTRODUCTION

"Dietl's crisis" continues to be prominently featured in numerous medical papers and textbooks, particularly in the fields of urology and pediatric urology. Notably, the eponym appears to be experiencing a renaissance in recent years [1–10]. Additionally, there has been a steady output of articles by medical historians and physicians exploring various aspects of Józef Dietl's research or his life and legacy. Many of these publications frequently originate from Polish authors, underscoring
Dietl's enduring significance in his home country's medical and scientific heritage [11–27].

EPONYMS IN MEDICINE

Eponyms are pervasive in medicine and represent a significant portion of the specialized terminology used by medical professionals [28, 29]. They typically commemorate individuals whose discoveries, inventions, or contributions have significantly advanced knowledge in their respective fields. Over time, eponyms have become enduring historical markers, preserved in medical dictionaries and textbooks. However, a debate has emerged in the 21st century under the banner "Should eponyms be abandoned?" This discussion is particularly pertinent when eponyms are associated with individuals linked to the Nazi regime or other atrocities [29–38]. Despite their historical significance, the role of eponyms in the culture of remembrance within science and medicine, especially in urology, has not been extensively explored.
In a brief, non-systematic review of widely used urological textbooks, we analyzed the use of the eponym "Dietl's crisis". This evaluation was conducted in collaboration with the WP Didusch Center for Urologic History and the Museum, Library, and Archives of the German Urological Association. The analysis included English-language textbooks commonly referenced in European universities, such as *Campbell's Urology* [39], *The Textbook of Gillenwater* [40], and the pediatric urology reference book *Kelalis, King, and Belman* [41]. This study aimed to shed light on the persistence and representation of "Dietl's crisis" in these authoritative texts.
Furthermore, the term "Dietl's crisis" is frequently encountered in texts addressing specialized topics in urology and nephrology. Its continued presence highlights its relevance not only in historical contexts but also in discussions of specific clinical and scientific subjects within these fields [6, 7, 42–46].
Our analysis reveals that during the last quarter of the 20th century and the first two decades of the 21st century, the use of the eponym "Dietl's crisis" has been inconsistent yet remained in general use within English-language textbooks and publications. This variability underscores its enduring, albeit fluctuating, presence in the medical literature.
By examining the historical context, lifespan, and circumstances surrounding the introduction of the eponym "Dietl's crisis", we argue that its usage remains prevalent not only in pediatric and general urology but also across broader medical disciplines. Furthermore, the eponym holds significant value within the culture of remembrance in urology and general medicine, serving as a key reference point for historical and scientific continuity [47, 48]. This serves as a compelling argument for preserving well-established eponyms in medicine and urology, particularly those unconnected to the Holocaust or other atrocities. Such eponyms not only simplify the communication of complex symptoms through concise terminology but also offer valuable historical insights into the challenges faced by our predecessors. They form a part of our unique medical heritage, one that deserves to be preserved, studied, and thoughtfully passed on to future generations.

TIME AND LIFESPAN OF JÓZEF DIETL: A SHORT BIOGRAPHICAL SKETCH

Józef Dietl (German spelling of the time: Joseph Dietl) was born in 1804 in the small village of Podbuż, located in Galicia – a crown land (Kronland[1]) of the Austro-Hungarian Empire, which is now part of modern-day Poland and Ukraine. His father served as an official in the Austro-Hungarian administration, while his mother came from the impoverished Polish nobility.
Although Dietl initially aspired to a military career, his mother discouraged this path, prompting him to pursue medicine instead. He began his academic studies in Lemberg (now Lwów), the Austrian capital of Galicia since 1772, where he first enrolled in philosophy. He later transitioned to studying medicine in Vienna, marking the beginning of his influential medical career [49].
In 1829, Józef Dietl earned his medical degree from the University of Vienna, completing his dissertation titled *Quaedam circa medicinae securitatem*. A German version of his thesis, *Einige Worte über die Zuverlässigkeit der Heilwissenschaft zur beson-*

1 Crown land mean within the Austro Hungarian Empire a special district directly under control of the Emperor but with historic parts of own regulations, remaining of the feudalistic system.

deren Beherzigung für Nichtärzte ("Some Words About the Reliability of Health Science, Especially Worth Remembering for Non-Physicians"), was also published separately. This work underscored Dietl's early commitment to both the scientific rigor of medicine and its accessibility to a broader audience [21, 50–52]. Dietl's thesis was unconventional for its time, as the 25-year-old medical graduate primarily addressed non-medical readers. In his work, he boldly acknowledged societal criticism of physicians, noting that their treatments often yielded no tangible results. This perspective demonstrated an early inclination toward critical self-reflection within the medical profession, challenging traditional norms and inviting broader discourse on the efficacy and reliability of medical science [26].

Dietl emphasized that recovery from illness was primarily driven by the natural forces of the body, rather than miraculous interventions by physicians. He argued that the role of the physician was to support and stimulate these inherent healing processes. Furthermore, Dietl was critical of many contemporary medical treatments, asserting that they were often ineffective and, in some cases, harmful. His thesis reflected a progressive and pragmatic view of medicine, advocating for a more evidence-based and nature-aligned approach to patient care.

Later, Józef Dietl became an assistant physician (senior house officer) at the university, specializing in *Spezielle Naturgeschichte* ("Special Natural History"). This role marked an important step in his academic and professional development, bridging his medical expertise with a broader interest in natural sciences, a field that often intersected with medical knowledge during that era [53].

THE SITUATION AT THE VIENNA MEDICAL SCHOOL AROUND 1830

An intriguing account from 1831, written by Wilhelm von Horn (1803–1871), a physician and future director of the Berlin Charité Hospital, provides detailed insights into the state of the Vienna General Hospital during this period.

In the surgical department, urology-related cases were predominant, including "lithiasis" (kidney or bladder stones), "cirrhus testis" (testicular cancer or hardening), "condylomata" (genital warts), "ulcera syphilitica" (syphilitic ulcers), and "buboes" (swollen lymph nodes, often associated with venereal disease). Notably, Joseph von Wattman (1789–1866), a prominent surgeon of the time, was portrayed as a "bloody physician" with a poor reputation within Vienna's city limits.

In the medical clinic, which was conducted in Latin, cases of "scrophulus" (scrofula, a form of tuberculosis affecting the lymph nodes) and "fever" were most prevalent. In contrast, lectures for surgeons were delivered in German. Teaching at both the medical and surgical "clinics" – a term then used to describe instructional hospital settings – was limited to two rooms, each containing only 12 beds, reflecting the constrained resources available for medical education at the time.

This account highlights the challenges, limitations, and focus of medical practice and education at the Vienna Medical School during the early 19th century, a period that would later see significant advances in medical science and teaching methods [54, 55].

In 1841, Józef Dietl was appointed as the unpaid chief physician (*Primararzt*) and director of the

Table 1. *Analysis of urologic textbooks**

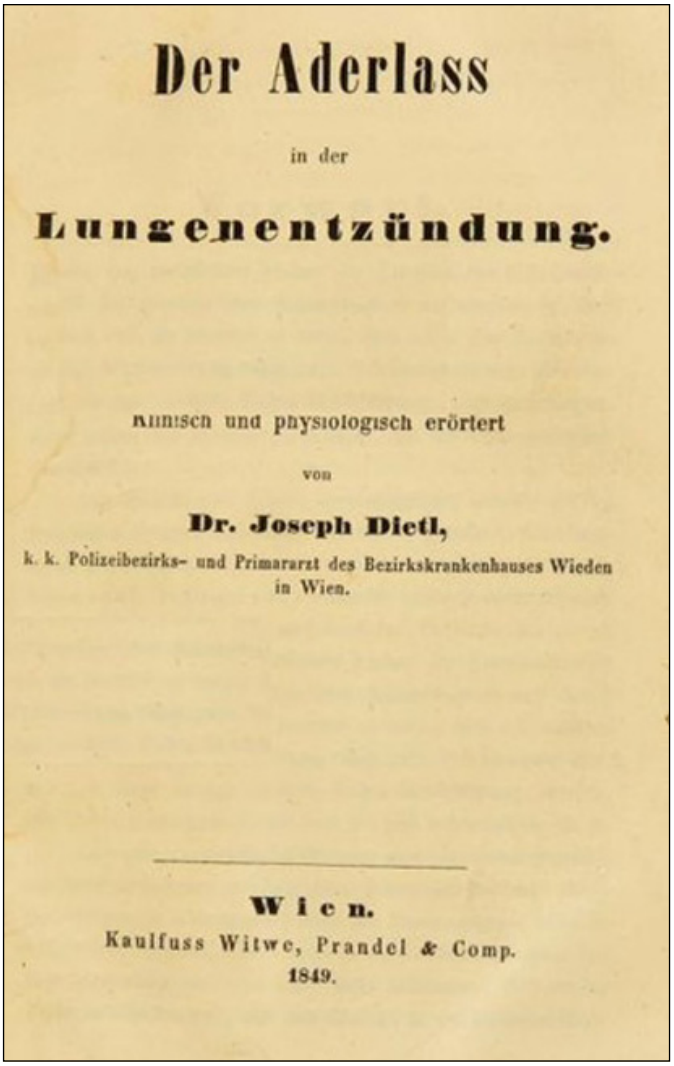
Textbook	Edition	Year	
Campbell & Harrison	3rd	1970	Zero
Campbell's Urology	4th	1979	Zero
Campbell's Urology	5th	1986	Zero
Campbell's Urology	6th	1992	One-time page 2578
Campbell's Urology	8th	2002	Zero
Campbell-Walsh Urology		2007	One-time page 1776
Gillenwater et al. Adult and Pediatric Urology		1987	One-time page 1555
Gillenwater et al. Adult and Pediatric Urology	2nd	1991	Zero
Gillenwater et al. Adult and Pediatric Urology	3rd	1996	One-time page 2180
Kelalis, King, and Belman Textbook of Clinical Pediatric Urology	1st		Zero
Kelalis, King, and Belman Textbook of Clinical Pediatric Urology	2nd		Zero

* We extend our gratitude to Ronald Rabinowitz, former Historian of the American Urological Association, and Tupper Stevens of the W.P. Didusch Center for Urologic History, Linthicum, for their invaluable assistance in analyzing all editions of the textbooks. Their support greatly enriched the depth and scope of our research.

newly established Wieden Hospital in Vienna. During his tenure, he established professional relationships with two prominent figures of Viennese medicine, Karl von Rokitansky (1804–1878) and Josef Škoda (1805–1881). These interactions placed Dietl at the forefront of a burgeoning medical reform movement, as Rokitansky and Škoda were central figures in the development of the Vienna Medical School, renowned for advancing evidence-based medicine and clinical-pathological correlation. This period marked a significant phase in Dietl's career, as he contributed to and benefited from the intellectual environment fostered by these influential contemporaries [56]. Together, Józef Dietl, Karl von Rokitansky, and Josef Škoda became the leading representatives of the so-called "New Vienna School of Medicine". This movement aimed to transform medicine into a rational and scientifically grounded discipline, emphasizing the importance of evidence-based research before implementing therapies. Their collaborative efforts played a pivotal role in shifting medical practice away from traditional, often speculative approaches toward a more empirical and systematic methodology, laying the foundation for modern clinical medicine [57]. From this point, Józef Dietl's prolific research career began to flourish. In 1849, he published one of his most influential works, *Der Aderlass in der Lungenentzündung. Klinisch und physiologisch erörtert* ("On Bloodletting in Pneumonia from a Clinical and Physiological Point of View"). This publication, originally in German and later translated into Polish, critically examined the then-prevalent practice of bloodletting in the treatment of pneumonia. Dietl's analysis combined clinical observations with physiological reasoning, challenging traditional medical practices and advocating for a more evidence-based approach to treatment. This work solidified his reputation as a pioneer in rational and scientific medicine (Figure 1)

Using methods that would today be recognized as "evidence-based medicine", Dietl analyzed statistical data to demonstrate higher mortality rates among patients treated with bloodletting – a practice that had been standard since the time of Hippocrates. His groundbreaking findings challenged the efficacy of this long-standing therapy, leading to its decline in medical practice. This work earned Dietl widespread recognition within the scientific community of Austria-Hungary as a prominent advocate of therapeutic nihilism, emphasizing skepticism toward traditional treatments lacking empirical support [58, 22, 59]. From this point onward, Dietl sought to establish a new foundation for medicine within the framework of the scientific paradigm. During this period, his publications primarily focused on the general theory of medicine, addressing its principles and methodologies. He aimed to redefine medical practice as a discipline rooted in empirical evidence and rational inquiry, moving away from speculative traditions and toward a more systematic and scientific approach [52]. In this context another publication during that time deserves mention. In 1845 he presented his "Practical observations based on the results on the previous years's epidemic in Wieden" (*Praktische Wahrnehmungen nach den Ergebnissen der vorjährigen Epidemie im Wiener Polizeibezirke Wieden*) [60].

In 1851, Józef Dietl was appointed head of the Medical Department at the Jagiellonian Univer-


Der Aderlass

in der

Lungenentzündung.

klinisch und physiologisch erörtert

von

Dr. Joseph Dietl,

k. k. Polizeibezirks- und Primararzt des Bezirkskrankenhauses Wieden in Wien.

Wien.

Kaulfuss Witwe, Prandel & Comp.

1849.

Figure 1. *From Dietl's textbook "On Bloodletting in Pneumonia from a Clinical and Physiological Point of View" (1849). Reproduction courtesy of Moll-Keyn, Museum, Library, and Archives, German Urologic Association, Düsseldorf-Berlin. Used with permission.*

sity in Kraków. In this role, he oversaw a 12-bed medical ward, two isolation units, as well as the university's chemical and microscopical laboratories. This position allowed him to integrate his evidence-based approach into both clinical practice and medical education, further advancing the scientific foundations of medicine in the region (Figure 2) [61, 49].

Here, he emphasized the physical examination and held special classes on percussion and auscultation. Józef Dietl also authored the first work on hospital hygiene ever published in German, a seminal contribution that remains highly regarded by experts in the field to this day. During this period, he also addressed and ultimately dispelled the widespread belief in the supposed health benefits of the *kołtun* – a Polish term referring to a mass of tangled, matted hair (elflock). This condition, characterized by hair hanging in dense, unwashed tangles often reaching down the back or even to the waist, emitted a foul odor and was frequently infested with vermin. Dietl's efforts helped to eliminate this harmful superstition, promoting better hygiene and public health practices (Figure 3) [63–64].

In 1864, Józef Dietl published a work titled *Wandernde Nieren und deren Einklemmung* ("Movable Kidneys and Their Incarceration"), in which he explored the phenomenon of nephroptosis. This contribution further cemented his legacy in medical history, particularly in urology, as he provided a detailed analysis of the condition and its clinical implications, highlighting its significance in the diagnostic and therapeutic practices of his time [65, 66]. In this article, Dietl provided one of the earliest descriptions of the symptoms of hydronephrosis and intermittent ureteropelvic junction obstruction. He detailed five out of nine patients whose symptoms he attributed to a kink in the ureter or renal vessels caused by the descent of a mobile kidney. This resulted in sudden episodes of abdominal pain, nausea, and vomiting – a condition that later became known as "Dietl's crisis".

Interestingly, a few years earlier, Dietl had also reported on the phenomenon of a moving spleen in a child, demonstrating his broader interest in and contributions to the study of anatomical mobility and its clinical implications [67].

Pierre Rayer (1793–1864) of Paris was the first to report symptoms of nephroptosis in 1841. He described clinical manifestations such as pain, visceroptosis (the downward displacement of abdominal organs), and hypochondria. Rayer's observations laid the groundwork for understanding the condition, which would later be expanded upon by Józef Dietl and others, contributing to the evolving knowledge of nephroptosis and its associated symptoms (Figure 4) [68].

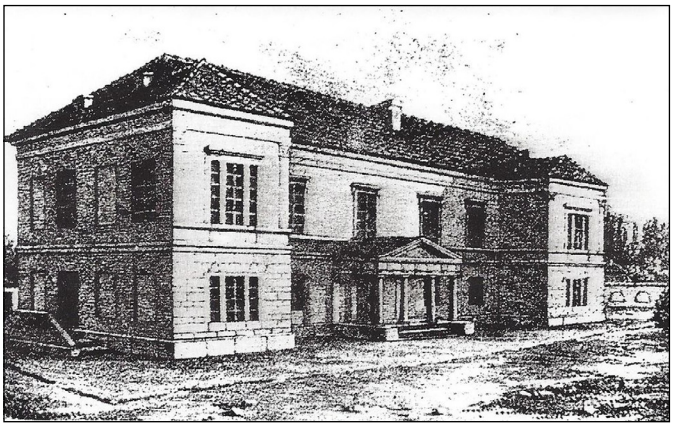


Figure 2. *Department of Medicine, from W. Szumowski 1948 Joseph Dietl und die Unterrichtssprache an der Universität Krakau. In: Festschrift für Max Neuburger. Maudrich-Fachverlag, Vienna.*

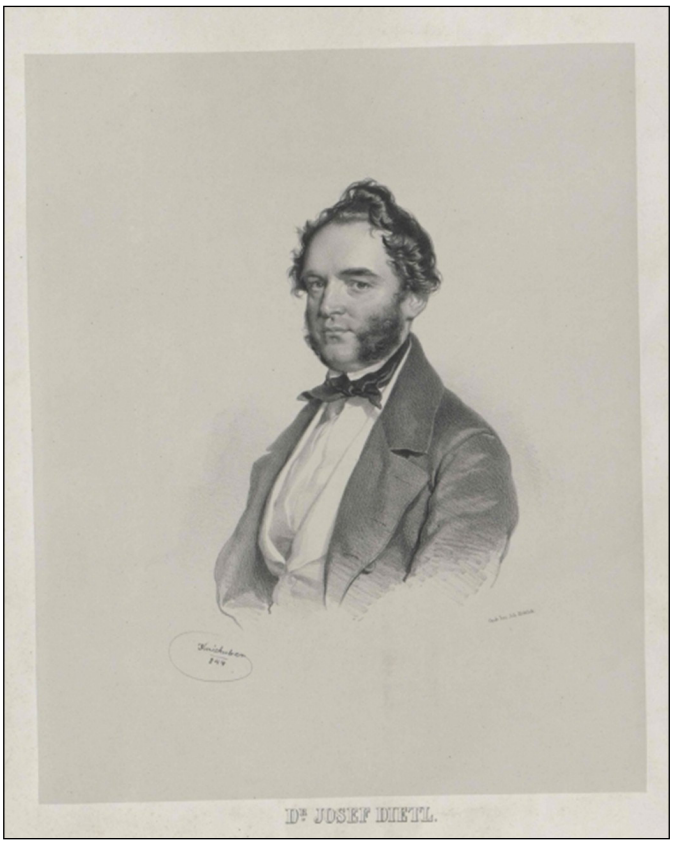


Figure 3. *Józef Dietl (1804–1878), engraving by Josef Kriehuber (1800–1876), Vienna 1844. From the collections of the Museum, Library, and Archives, German Urologic Association, Düsseldorf-Berlin. Another copy is preserved at the Austrian National Library.*

Józef Dietl passed away in 1878, following a distinguished career that included serving as the Mayor of Kraków after his retirement from medicine. Highly decorated and honored by his contemporaries, he left a lasting legacy as a pioneer in evidence-based medicine, an advocate for public health, and a respected figure in both the medical and civic spheres [69, 70, 71].

After 1881, Eugen Hahn (1841–1902) [72], a proto-urologist from Berlin, advocated for an invasive surgical approach to treating nephroptosis, marking a shift from the previously common practice of manual kidney repositioning. At that time, kidney surgery was not well-established, and non-surgical methods were the norm [73]. However, in 1882, Eduardo Bassini (1844–1924) in Italy introduced the use of fascial sutures through the renal capsule to fixate ptotic kidneys [74]. This method quickly gained recognition and was brought to the United States [75] in the same year by Robert Fulton Weir (1838–1927) of New York [76].

In the 1890s, George M. Edebohls (1853–1908) published extensively on the topic, further advancing the surgical management of nephroptosis [77, 78, 79]. Carl Beck (1856–1911), also of New York, a native from Germany and early member of AUA and DGU, contributed to the field within his work published in 1909 [80]. These surgical interventions became particularly popular for treating neurasthenia [81] – a "modern" illness of the late 19th and early 20th centuries – and other psychiatric conditions believed to have a somatic origin [82, 83]. This evolution in treatment reflects the intersection of growing urology, surgery, and psychiatry during a time of rapid medical advancement.

A significant number of influential European figures in kidney surgery during this period, including Joaquín Albarrán (1860–1912), James Israel

Samstag den 3. September Nr. 36. Vierzehnter Jahrgang 1864.

Wiener

Medizinische Wochenschrift.

Wandernde Nieren und deren Einklemmung *).

Von Professor Dr. Dietl in Krakau.

Es ist nicht lange her, dass wandernde Nieren zu den pathologischen Merkwürdigkeiten gehörten. Einmal an das Tageslicht der Diagnostik gezogen, werden sie nun häufiger beobachtet und dürfte auch ihre pathologische Bedeutung immer mehr ins Klare kommen. Wenn wir von den höchst seltenen Fällen abstrahiren in denen eine Lagerung der Nieren in grossen Bauchbrüchen beobachtet wurde: so sind es Brochin, Oppolzer und Haro, welche zunächst die Aufmerksamkeit der Aerzte auf diesen Gegenstand lenkten und die klinische Diagnose beweglicher Nieren sicher stellten. Rokitansky giebt in seinem Lehrbuche der pathologischen Anatomie an, dass man zuweilen eine auffallende Beweglichkeit oder Verschiebbarkeit der rechten Niere beobachtet, so dass diese in der Gegend des unteren Leberrandes hervortritt. Ich habe während meiner 13jährigen klinischen Wirksamkeit in Krakau so viele und so prägnante Fälle von beweglichen Nieren zu beobachten Gelegenheit gehabt, dass ich mich berechtigt fühle einige ergänzende Thatsachen und Bemerkungen zu dem bereits Bekannten hinzuzufügen. Meinen Erfahrungen zu Folge ist eine bewegliche Niere bei weitem nicht als eine einfache, blos durch lokale Verhältnisse bedingte Anomalie der Lage zu betrachten, häufig ist sie Folge eines Allgemeinleidens und eben so häufig bedingt sie Folgezustände eigenthümlicher Art, die unsere volle Beachtung verdienen, und ein entschiedenes therapeutisches Verfahren erheischen. Diese

*) Gleichzeitig in polnischer Sprache erschienen.

Die Red.

Figure 4. *Dietl's publication Wandernde Nieren und deren Einklemmung ("Movable Kidneys and Their Incarceration") in the renowned Wiener Medizinische Wochenschrift (Vienna Medical Weekly), 1864. It is mentioned that Dietl published it in German and Polish. At that time German was the most influential scientific language besides English.*

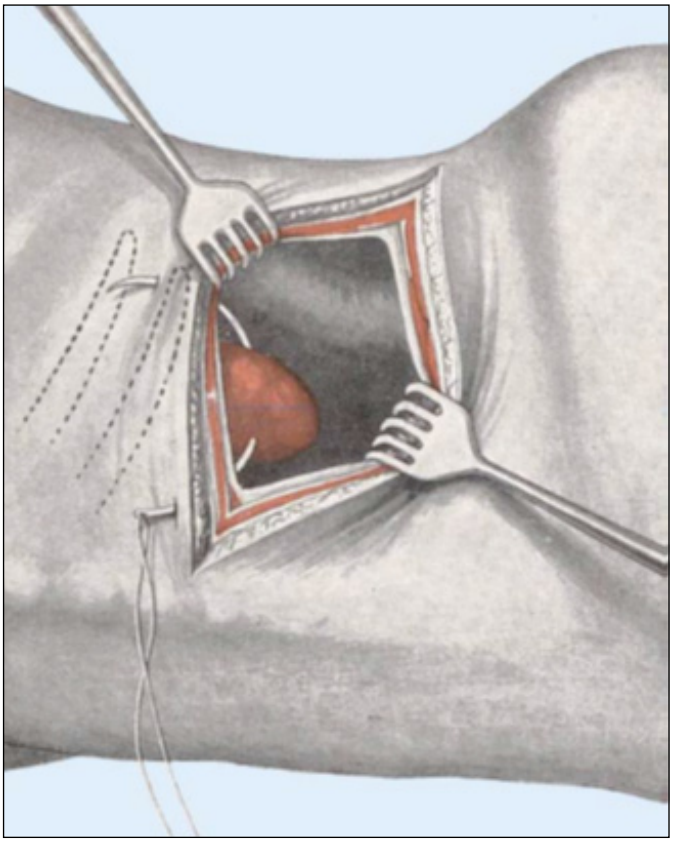


Figure 5. *Procedure of Ernst Rehn (1849–1930), Frankfurt, adopted from: Hatzinger M, Langbein S, De La Rosette J, Sohn M, Alken P. Die Nephropexie im Wandel der Zeit. Urologe. 2007; 46, 166-169.*

(1848–1926), and Henry Morris (1844–1926), contributed extensively to the literature on nephroptosis and its surgical management. Their work highlighted the growing interest and advancements in addressing this condition [84–87].

As early as 1914 an author focused on the surgical treatment of nephroptosis, underscoring the widespread attention and debate surrounding the condition and its operative solutions during that era (Figures 5–7) [88].

Over time, the operation for nephroptosis, nephropexy, became a topic of considerable debate within the medical community. William F. Braasch (1878–1975) captured the contentious nature of the discussion in his 1948 paper, remarking pointedly that, "A listless meeting of urologists can be suddenly animated by the simple word 'nephropexy'." This statement highlights the starkly divided opinions among urologists regarding the procedure, reflecting ongoing questions about its indications, efficacy, and long-term outcomes [89].

Until the 1960s, nephropexy was commonly performed as a routine operation to treat nephroptosis, reflecting its established role in managing the condition during that period. With the advent of laparoscopy, the procedure experienced a resurgence, emerging once again as a valid surgical treatment option. The minimally invasive nature of laparo-

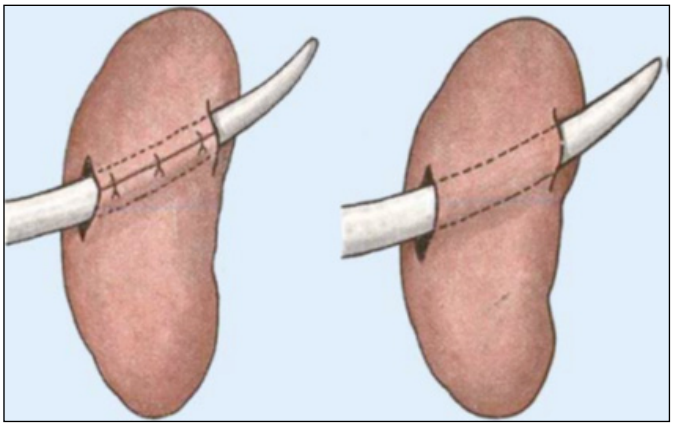


Figure 6. *Procedure of Albert Narath (1864–1924), Heidelberg. Taken from: Kümmell H. Operationen an den Nieren und Nierenbecken. In: Voelcker F, Wossidlo H. Urologische Operationslehre, Georg Thieme, Leipzig 1921; 421.*

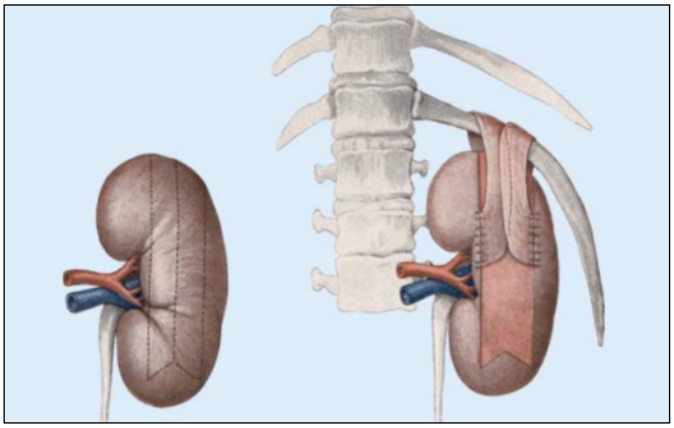
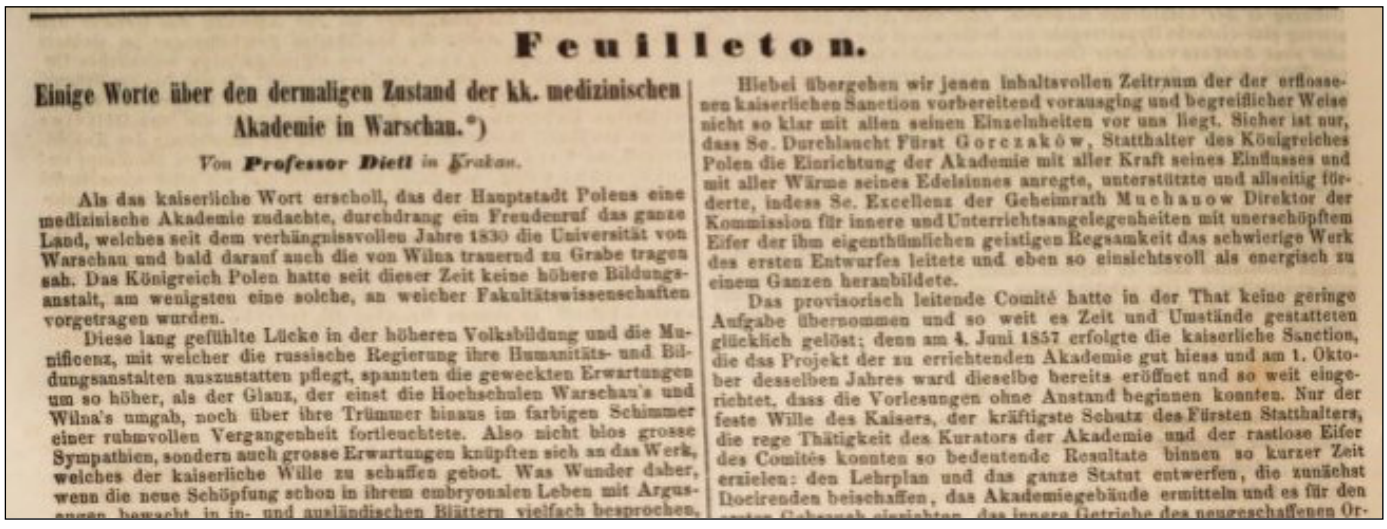


Figure 7. *Procedure of Vogel, Dortmund. Taken from: Kümmell H. Operationen an den Nieren und Nierenbecken. In: Voelcker F., Wossidlo H. Urologische Operationslehre. Georg Thieme, Leipzig 1921; 421.*



Feuilleton.

Einige Worte über den dermaligen Zustand der kk. medizinischen Akademie in Warschau.*)

Von Professor Dietl in Krakau.

Als das kaiserliche Wort erscholl, das der Hauptstadt Polens eine medizinische Akademie zudachte, durchdrang ein Freudenruf das ganze Land, welches seit dem verhängnissvollen Jahre 1830 die Universität von Warschau und bald darauf auch die von Wilna trauernd zu Grabe tragen sah. Das Königreich Polen hatte seit dieser Zeit keine höhere Bildungsanstalt, am wenigsten eine solche, an welcher Fakultätswissenschaften vorgetragen wurden.

Diese lang gefühlte Lücke in der höheren Volksbildung und die Munificenz, mit welcher die russische Regierung ihre Humanitäts- und Bildungsanstalten auszustatten pflegt, spannten die geweckten Erwartungen um so höher, als der Glanz, der einst die Hochschulen Warschau's und Wilna's umgab, noch über ihre Trümmer hinaus im farbigen Schimmer einer ruhmvollen Vergangenheit fortleuchtete. Also nicht blos grosse Sympathien, sondern auch grosse Erwartungen knüpften sich an das Werk, welches der kaiserliche Wille zu schaffen gebot. Was Wunder daher, wenn die neue Schöpfung schon in ihrem embryonalen Leben mit Argus-

Hiebei übergehen wir jenen inhaltsvollen Zeitraum der der erflossenen kaiserlichen Sanction vorbereitend vorausging und begreiflicher Weise nicht so klar mit allen seinen Einzelnheiten vor uns liegt. Sicher ist nur, dass Se. Durchlaucht Fürst Gorczakow, Statthalter des Königreiches Polen die Einrichtung der Akademie mit aller Kraft seines Einflusses und mit aller Wärme seines Edelsinnes anregte, unterstützte und allseitig förderte, indess Se. Excellenz der Geheimrath Muchanow Direktor der Kommission für innere und Unterrichtsangelegenheiten mit unerschöpftem Eifer der ihm eigenthümlichen geistigen Regsamkeit das schwierige Werk des ersten Entwurfes leitete und eben so einsichtsvoll als energisch zu einem Ganzen heranbildete.

Das provisorisch leitende Comité hatte in der That keine geringe Aufgabe übernommen und so weit es Zeit und Umstände gestatteten glücklich gelöst; denn am 4. Juni 1857 erfolgte die kaiserliche Sanction, die das Projekt der zu errichtenden Akademie gut hiess und am 1. Oktober desselben Jahres ward dieselbe bereits eröffnet und so weit eingerichtet, dass die Vorlesungen ohne Anstand beginnen konnten. Nur der feste Wille des Kaisers, der kräftigste Schutz des Fürsten Statthalters, die rege Thätigkeit des Kurators der Akademie und der rastlose Eifer des Comités konnten so bedeutende Resultate binnen so kurzer Zeit erzielen: den Lehrplan und das ganze Statut entwerfen, die zunächst Docirenden beischaffen, das Akademiegebäude ermitteln und es für den

Figure 8. *Dietl J 1859 Some words about the status of the k k academy of medicine at Warschau (Einige Worte über den dermaligen Zustand der k k medizinischen Akademie in Warschau) Wiener Med. W Schr 75-77-98-99, Repro Moll-Keyn, with permission. The article reveals Dietl's interest in administrative and organizational aspects of medicine and university organization in a very modern sense.*

scopic nephropexy offered reduced morbidity and faster recovery times, making it a more attractive approach in modern surgical practice. This revival underscores the evolution of surgical techniques and the enduring relevance of nephropexy in selected cases [19, 90].

USE OF THE EPONYM

The eponym "Dietl's crisis" gained significant prominence in the early 20th century, coinciding with advancements in the surgical treatment of movable kidneys through the procedures of Hahn, Bassini, Edebohls, and others. Its frequent appearance in papers and textbooks of the time reflects the widespread recognition of this condition.

The term first appeared in editions of Sir William Osler's (1849–1919) seminal textbook *Principles and Practice of Medicine*, published between 1892 and 1918 and translated into numerous languages, including French, German, Russian, Portuguese, Spanish, and Chinese [91]. In these editions, Osler described a syndrome characterized by acute abdominal pain, nausea, vomiting, fever, highly colored urine, and prostration – a condition he referred to as "Dietl's crisis" [22]. This inclusion in Osler's authoritative work further cemented the eponym's place in medical terminology and education.

After the 1960s, the use of the eponym "Dietl's crisis" gradually declined within English-language medical literature. During this period, however, the field of medical history saw the publication of several commemorative articles over the subsequent four decades. The advent of the World Wide Web facilitated easier access to historical books and papers, leading to a resurgence of interest in the eponym

Figure 9. *Josef Dietl during his time in Krakow. Archives Jagellonian University, with permission.*

Figure 10. *Józef Dietl, featured on a Polish postage stamp, circa 1957. Courtesy of Erwin W. Rugendorff +, San Diego (Rugendorff EW, Wilson T. The History of Urology on Postage Stamps and Cancellations. J Urol. 1997; 158: 1335-1339). The depiction of an individual on a postage stamp serves as a strong indicator of their presence within the collective memory of a nation, highlighting their cultural and historical significance. This recognition reflects Dietl's enduring legacy in Poland, particularly his contributions to public health and medicine.*

and its associated condition, particularly within urology and pediatric urology.

At the beginning of the 20th century, the expansion of surgical indications for nephropexy resulted in numerous disadvantages and complications, prompting a reevaluation of the procedure. In recent years, the symptom complex associated with "Dietl's crisis" and its therapeutic approaches have once again garnered attention from several authors, underscoring its continued relevance in discussions of historical and contemporary urological practice [3, 46, 92].

The International Classification of Diseases, 10th Revision (ICD-10), includes the symptom "Dietl's crisis" under code **N13.8** [93], which encompasses other specified obstructive uropathies. Additionally, the diagnosis of nephroptosis is classified under code **N28.83**, reflecting its recognition as a distinct medical condition within the global standard for diagnostic coding [94].

PUBLIC HEALTH CONTRIBUTIONS – THE POLITICAL PHYSICIAN

Despite Józef Dietl's wide-ranging accomplishments, he is most renowned within the culture of remembrance in urology and pediatric urology for his description of the symptoms of kidney ptosis, leading to hydronephrosis and intermittent uretero-pelvic junction obstruction – now recognized as "Dietl's crisis". Over his career, Dietl authored approximately 138 papers and books, many of which


KRITISCHE DARSTELLUNG

EUROPÆISCHER

KRANKENHÆUSER.

NACH

EIGENEN REISEBEOBACHTUNGEN

VON

D^R. JOSEPH DIETL,

PROFESSOR DER K. K. UNIVERSITÄT ZU KRAKAU.

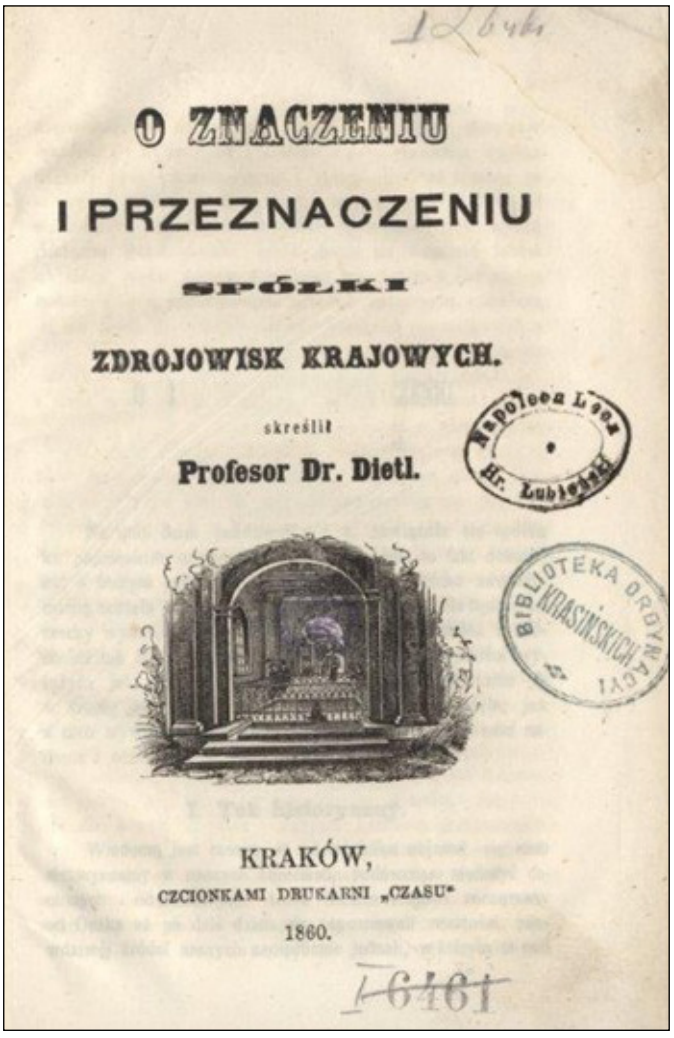
WIEN, 1853.

WILHELM BRAUMÜLLER,

K. K. Hofbuchhändler.

Figure 11. *Left: Frontispiece of Józef Dietl's textbook on European Hospitals, published by Braumüller Publishing House, Vienna, 1853. This publication was the first significant German-language work in the field of hospital hygiene. Right: Józef Dietl in the attire of the Rector Magnificus of the University of Kraków. Reproduction courtesy of J Moll-Keyn, used with permission.*

extended beyond clinical medicine [95]. His political and public health interests, akin in some ways to those of Rudolf Virchow (1821–1902), played a significant role in shaping his broader contributions. These interests were cultivated during his formative years in Vienna during the 1830s and 1840s, particularly influenced by the revolutionary events of 1848, which catalyzed reforms in the university system, including Thun's reform (Figure 8).


O ZNACZENIU

I PRZEZNACZENIU

SPÓŁKI

ZDROJOWISK KRAJOWYCH.

skreślił

Profesor Dr. Dietl.

KRAKÓW,

CZCIONKAMI DRUKARNI „CZASU"

1860.

Figure 12. *Józef Dietl, frontispiece of "Significance and Purpose of national spas", Krakow, 1860. In the period 1854–1858 Josef Konrad Dietl visited health resorts and spas in Europe; in 1857 alone, he visited 10 Polish health resorts. Along with Józef Majer (1808–1899) and Fryderyk Skobel (1806–1878), Dietl created the Balneology Association in 1857, whose members included doctors, chemists, physicists, geologists, and construction representatives. The goal was to promote and develop Polish national thermal water spas, quality assessment of thermal waters, policing their exploitation and correct bottling, and finally, observation of meteorologic factors on therapy efficacy.*

From 1866 to 1874, Dietl served as the Mayor of Kraków, during which time he implemented substantial reforms. He overhauled the local educational system, advanced public health initiatives, and spearheaded sanitation and city refurbishment projects (*Assanation of the city*). Additionally, Dietl championed the preservation of Kraków's cultural relics and actively promoted contemporary public health measures, leaving a lasting legacy in both civic and medical spheres. Dietl's term in office as Mayor of Krakow had an overriding aim to make Krakow a clean, healthy, and ornate city. One wonders whether the return of his young wife, Helena Zieterbarth (1823–1885), to the more sophisticated Vienna influenced Dietl's political axis. His endeavors resulted in significant melioration works including paved streets, better street lighting, and developments to the sewage system, leading to better water supply and a reduced risk of cholera (Figures 9, 10) [9, 96].

At Jagiellonian University at Krakow he was Professor (1851–1865), Dean (1856–1861), and Rector (1861–1862). Whilst there, Dietl was an outspoken advocate of educational reform and Polish nationalism. He campaigned for an increase in the number of schools, for improved circumstances of teachers, and was a fervent proponent of comprehensive education for girls. He also called for an end to the teaching of school children in German and initiated the translation of medical handbooks into Polish at the university. These were printed at the University and sold at very low prices [97].

Unfortunately, this patriotic but anti-Austrian activity did not bode well with the k k government, and on June 14, 1865, the Emperor Franz Joseph (1830–1916) (pol Franciszek Józef I) signed an order to retire Dietl from the Jagiellonian; no official reason was given. However, the following year saw the introduction of Galician autonomy, and the City Council of Krakow elected Dietl as the new Mayor, an office he held for eight years. In a happy ending to this, in 1869, Dietl organized a magnificent reception for Emperor Franz Joseph to thank him for restoring the Polish language to the Galician population in schools and in the civil service. In return, the Emperor appointed Dietl a life member of the Austrian Upper House.

Dietl received several Austro-Hungarian honors such as the Franz-Joseph-Orden (as professor), Orden der Eisernen Krone (as mayor), and the Gregoriusorden (from the catholic Nuntius in Krakau) [98].

Dietl's accomplishments in public health have been more prominently remembered in the collective memory of Poland and Eastern Europe (Figures 11, 12) than within the medical or public health scientific communities of Western Europe. In the field

of urology, however, his legacy endures through the eponym "Dietl's crisis", which remains in use, particularly in pediatric urology, as a reference to the symptoms and conditions he first described. This highlights the regional variations in the recognition and preservation of Dietl's contributions across different spheres of medicine and public health [99].

CONFLICTS OF INTEREST

The authors declare no conflict of interest.

FUNDING

This research received no external funding.

ETHICS APPROVAL STATEMENT

The ethical approval was not required.

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