

## **HISTORY OF EATING DISORDERS IN HUNGARY**

**Ferenc Túry, Bernadett Babusa, Márta Varga**

Institute of Behavioural Sciences,  
Semmelweis University, Budapest, Hungary

**Abstract:** Authors review the early Hungarian descriptions of eating disorders. Among medieval fasting saints the ascetic eating disorder of Princess Margaret of Hungary is presented from the 13<sup>th</sup> century as well as the anorectic features of the Austro-Hungarian Empress Elisabeth from the 19<sup>th</sup> century. The phenomena of anorexia and bulimia are mentioned in publications at the turn of the century. Among early data mental causes of the emaciation are generally discussed, supposing mostly hysterical state. The first case report of an anorectic woman was published by internists in 1955 without mentioning the role of mental factors. In the '50s and '60s somatic treatment and electroconvulsive therapy were used in anorexia. The first epidemiological studies on eating disorders were performed in 1988, while the first articles about bulimia nervosa as a new disease entity were published only in 1989.

**Key words:** *eating disorders, anorexia, bulimia, Hungary, history*

## **Introduction**

The overwhelming majority of eating disorder literature comes from Western countries, giving the impression that eating disorders are culture-bound problems of Western civilization. In the last two decades an increasing interest in eating disorders can be observed in Central and Eastern Europe. This is due to the relatively high prevalence and incidence of anorexia nervosa (AN) and bulimia nervosa (BN) in some countries of this region.

The first East-European epidemiological study on eating disorders was performed in Hungary in 1988 (before the rapid social change in 1989). The prevalence of the DSM-III-R BN was 1.3% among female university students, and 0.8% among males [1]. This is comparable to Western data. Another epidemiological study was conducted in 1989 comparing Austria, the former German Democratic Republic and Hungary [2]. The prevalence rate of BN was the highest in Hungary (1%). The first Hungarian epidemiological study of eating disorders in a representative sample of young women was performed by [3]. The point prevalence of AN was 0.03%, and that of BN 0.41%.

In the '90s some other epidemiological studies were published from other Central and Eastern-European countries, e.g. Czech Republic [4,5], Romania [6], Slovenia [7]. These corroborated that the eating disorders became important also in this region of Europe.

It is important to know whether the morbidity rates of eating disorders can be regarded only as the consequences of recent social and political changes, or has its roots in the distant past. In this respect the historical approach can provide essential help. In the present study we try to overview the most interesting antecedents of AN and BN in Hungary. We assume that some similarities can be found in other Central-Eastern European countries as well.

The former historical and political situation of Hungary has to be emphasised: Hungary was part of the Austro-Hungarian Monarchy until the end of the First World War. After the Second World War Hungary became part of the Eastern-European communist block until the dramatic political changes in 1989.

### **A famous Hungarian fasting saint: Princess Margaret**

Princess Margaret (1242-1271) was the daughter of King Béla IV, and cousin of Saint Elisabeth of Hungary. Eating disorder literature cites her story as one of the first famous fasting saints [8,9]. Margaret was canonized only in 1943. In 1241 Hungary suffered a serious Tartar invasion, and after surviving it King Béla dedicated his daughter to the service of the Lord. When she was three years old, her parents sent her to a Dominican monastery, and later she lived on an island of the Danube River, now an island within Budapest bearing her name. Her life was extremely ascetic with fast-

ing, hyperactivity, sleep deprivation, self punishing methods. She regularly prayed instead of eating. After extreme emaciation she died at the age of 28.

Princess Margaret's ascetic life is a good example of the self-starvation of medieval fasting saints, who sacrificed the body for the soul.

### **The anorectic life of Empress Elisabeth (1837-1898)**

Another well-known personality of the Austro-Hungarian history was Empress Elisabeth (Sisi), wife of Emperor Franz Joseph. She was a model personality at the time, and was regarded as the most beautiful woman of Europe. Her life demonstrated many features of AN [9,10]. Her height was 172 cm, and her maximal body weight was only 50 kilograms. She was preoccupied with her slenderness and fitness, regularly went on milk-diet, and sometimes suffered from edema as a consequence of severe starvation. She was very hyperactive performing excessive walking and riding. She appreciated and valued beauty. The care of her extremely long hair took hours every day. She also used a special corset which was common at the time, and her waist was only 50 cm.

In the family of Empress Elisabeth other psychiatric illnesses also occurred, e.g. her son, Crown Prince Rudolph supposedly suffered from depression. Sisi also was very depressive so her eating disorder may have been closely related to depression. As the new syndrome of AN was not well-known in the second half of the 19<sup>th</sup> century, it is not surprising that her complaints were considered signs of lung disease.

### **Food phobia (1883)**

A very interesting booklet was published in 1883 by a professor of internal medicine, Lipót Hetényi, under the title "Food phobia of insanes and artificial feeding through nasal cavity". There is no mentioning of AN described ten years ago in the 99 pages long review. The author summarizes the following causes of eating phobia: delusions, changes of sensory organs, smelling, taste, depression and self-accusation, hallucinations, religious exaggerations, foolishness. He presents four case examples, three women and one man suffering from melancholia, but he also describes the delusion of poisoning in one patient [11].

Another interesting source is the psychiatric textbook of Jakab Salgó (1890), chapter 7 entitled "Abstinence" [12]. This means refusal of eating and drinking, and can be observed in melancholia, dementia, hysteria. Sometimes intensive vomiting can also be a symptom. These hysterical states are quite close to AN. The author offers artificial feeding for treatment.

Bertalan (Berthold) Stiller, who was a professor of surgery and internal medicine in Budapest, and published in German, wrote an overview about nervous gastric diseases, gastric neurosis, but did not discuss AN [13].

### **First appearances of anorexia and bulimia**

Although AN became an accepted nosological entity after the description of Lasègue and Gull in 1873, the first mentioning of anorexia and bulimia appeared only in 1897 in a psychiatric textbook written by a famous Hungarian psychiatrist, Professor Ernő Emil Moravcsik. Here anorexia and bulimia are mentioned only as a symptom, not a disease entity, the former being related to hysteria. As he wrote in the chapter of disorders of alimentary instinct: „The stubborn opposition to eating, lack of appetite (anorexia) of hysterics is caused in part by hypochondriac delusions, in part by hypersensitivity of sensory nerves of the stomach and intestinal tube, and nausea, disgust, vomiting and difficulty in swallowing as a consequence of rapid and spastic contraction of the gorge and the stomach after only a slight impact”. Moravcsik (1897) defines bulimia as “hunger excitation rising to painfulness” [14].

### **Eating disorders at the turn of the century**

At the turn of the century (from 1905 to 1913) the Hungarian Medical Journal (*Orvosi Hetilap*) published some short reviews from German journals, which evaluated the emaciation, or the phenomenon of anorexia, or “dyspeptic phthisis” as the consequence of latent carcinoma or tuberculosis, or insufficient contraction of the stomach. In this period only somatic causes and components of emaciation were taken into consideration.

In 1913 a short review was published by Goldberger about the treatment of loss of hunger, with special regard to nervous forms [15]. An integrative and complex approach can be read in the article: “...the treatment of loss of hunger will be effective only on a causal basis and if both somatic and psychic factors are regarded... the material object of the treatment should not be the loss of hunger but the man suffering from it”.

### **Eating disorders in the first half of the 20<sup>th</sup> century**

After the above mentioned descriptions anorexia or bulimia were discussed briefly in psychiatric textbooks, but only as a symptom, the disorder of the eating instinct. A connection is stressed to depression (*melancholia*).

In this period the famous psychoanalytic school in Budapest has to be mentioned as well. Sándor Ferenczi regarded the loss of hunger as a form of neurosis and linked it to the instinct of sexuality, while overeating was considered a sign of periodic feast neurosis [16].

Buday (1943) overviewing the causes of emaciation in a textbook of medical typology, discussed also anorexia mentalis, “nervous loss of hunger”. In the treatment he underlined the importance of doctor-patient relationship, and “psychic treatment” [17]. After the predominance of somatic thinking this summary was a new approach.

### **First case report of an anorectic woman (1955)**

The first Hungarian case report of AN was published in 1955. It is a strange phenomenon characterizing the actual situation of psychiatry and medical thinking that the authors were internists [18]. The title is also very interesting: chronic inanition ending in death. They mention the possibility of AN only in a footnote at the end of the paper. Mainly the pathological-endocrinological changes are discussed. At the beginning of her illness, a 29-year old woman had bulimic episodes, and amenorrhoea all through her illness. She gradually lost weight to the extent of extreme cachexia with only 20 kilograms (with a height of 160 cm) at her death. She was treated for 14 months. After the death of the patient the authors had the suspicion of Simmonds disease, confessing that “we could not reveal the basic illness”.

This first case report suggests that almost a century after the first description of AN it was not obvious in the Hungarian medical public opinion that psychological factors may cause severe, life-threatening emaciation. This illustrates even the situation of psychiatry at that time. During the communist era psychological sciences were on the brink of prohibition.

### **Anorexia nervosa after 1958**

A famous Hungarian professor of psychiatry, Gyula Nyíró published a case report of a 21 year old anorectic girl [19]. She was successfully treated with electroconvulsive therapy (ECT). Two photos illustrate the dramatic improvement: the first one was made in a cachectic state, the second after recovery. The authors were of the opinion that “anorexia nervosa is a syndrome, which may occur in psychotic and neurotic patients”. They stress in a multidimensional point of view that it is the consequence of a constellation of several etiological factors. In the treatment psychotherapy and severe isolation are proposed, while hormone substitution, insulin is recommended for treating the symptoms.

At that time ECT was very frequently used in a great variety of pathological states. Nyíró was one of the fathers of this treatment in Hungary, who used ECT sometimes without sufficient consideration. In 1964 it was also Nyíró et al. who published a report of 16 anorectic women. They were treated successfully with transcerebral electric stimulation [20].

These articles illustrate an “ECT-age” in the Hungarian history of AN. After this period – mainly from the '70s – each year or every other year different reviews or case reports were published about AN, discussing psychotherapeutical methods, somatic complications, as well as other aspects of the illness. Some general overviews also appeared. From this period on AN was generally accepted in the medical public opinion.

In the '60's case studies were published about eating related problems among children (both girls and boys). These disorders were linked to psychological problems e.g. personality disorders and problems of the family.

### **Appearance of bulimia nervosa**

The first descriptions of BN as a common form of disturbed eating behaviour were published in 1989 [21,22,23]. In the next decade several articles were published about this new eating disorder, dealing with epidemiological research, psychotherapy and pharmacological treatment.

### **Treatment of eating disorders in Hungary**

It is interesting to mention that the first Central-Eastern European eating disorder unit was established in Prague [24]. The first Hungarian eating disorder unit was established in Miskolc in 1990 and had four inpatient beds. The treatment of patients based on an integrative approach [25]. The unit was closed in 2001 when a severe decrease of psychiatric hospital beds started in Hungary, and the psychiatric care system almost collapsed.

At present three specialized inpatient units can be found in Hungary, all of them in Budapest. One of them operates in a hospital of child psychiatry (Vadaskert Child Psychiatry Hospital and Outpatient Clinic), another one in the Department of Pediatrics at the Semmelweis University, and the third one – for adult patients – in the Department of Psychiatry and Psychotherapy also at the Semmelweis University. There is also an outpatient treatment facility for eating disordered patients set up in the Institute of Behavioural Sciences at Semmelweis University.

To increase the collaboration of experts interested in eating disorders and to establish a treatment network for the therapy of eating disordered patients, the Section of Eating Disorders was founded in the framework of the Hungarian Psychiatric Association in 2005. This section includes 30 members and it has grown into a wide network with therapeutic and research aims.

In the last two decades the treatment of eating disorders in Hungary has been based on an eclectic and multidisciplinary approach and psychotherapy plays an important role. The pharmacotherapy is used mainly in the treatment of BN (antidepressants). As for the psychotherapy, several articles were published to demonstrate the role of the cognitive behavioural therapy, psychodynamic therapy, family therapy, hypnotherapy, and group therapy [26].

### **Research activity in eating disorders**

The first monograph on eating disorders was published in 2000 [27], followed by another one in 2008. [26] The first self-help guide for eating disordered patients and their families was published in the recent years [28].

In the last two decades some newer forms of eating and body image disorders were described. Some of these syndromes appeared also in Hungary. The muscle dysmorphia was firstly described by Pope et al in 1993 [29]. It is a pathological preoccupation with muscularity, formerly called reverse AN. This new syndrome was published in Hungary as a case report. [30] The first Hungarian epidemiological study on muscle dysmorphia was

conducted among 140 male body builders [31]. According to the results 9.3% used anabolic steroids, and 4.3% fulfilled the criteria of muscle dysmorphia. The data show that muscle dysmorphia is a frequent and hidden disorder in the bodybuilding population.

A case report of a patient suffering from the so-called „eating disorder, bodybuilder type”, or body fat phobia [32] was first described in Hungary in 2007 [33]. The disorder has to be differentiated from muscle dysmorphia, where the focus of pathological concern is the mass of the musculature, not the body fat.

The orthorexia nervosa (i.e. dependence on healthy food) was first published by Bratman in 1997 [34]. The first Hungarian description of the syndrome with two case reports appeared in [35].

The present research activity in eating disorders involves studies in epidemiology, muscle dysmorphia, orthorexia nervosa, and the efficacy of psychotherapy. Several papers discuss pragmatic knowledge about different psychotherapeutical modalities used in eating disorders. Since 2006 the Section of Eating Disorders of the Hungarian Psychiatric Association has been organizing biennial events on eating disorders, the third congress scheduled for 2010.

### **Discussion**

Only very few articles were published about eating disorders in English, German, or French from Central and Eastern Europe. However, more papers appeared in the language of these countries, which reflects a certain language isolation. In the last decade more psychiatrists and psychologists from Central and Eastern Europe have attended conferences on eating disorders, however, written publications are few. Former descriptions from Hungary underline the fact that eating disorders were existing problems for decades (or centuries, if we regard fasting saints as well), but perhaps not so common and widespread than that in Western countries. As Dolan [36] states “It is too early to really know if eating disorders are increasing in Central and Eastern Europe or if they have always existed to the same degree, but with less exposure and awareness than in the West”. The role of dramatic political and social changes of the late '80s may also suggest that eating disorders are mainly the consequences of a certain cultural change (as culture change syndromes). The above mentioned Hungarian epidemiological data do not support this assumption because they come from the data collection of 1988, before major changes took place in 1989. Hungarian sources demonstrate that anorectic eating problems existed long ago, although they may have been less frequent. This can be due in part to the situation of psychiatry in this century. Another important fact is that BN, a relatively new disease entity, also existed one or two decades ago. In our practice we have treated some women with definite bulimic symptoms persisting since the '70s. In

these countries eating disorders may be more hidden than in Western countries. This can be partly the consequence of the low psychological culture during the communist era: psychiatric problems or such “strange habits” seemed to be a cause for shame, not an acceptable human problem.

The role of historical traditions has to be taken into consideration as well. Formerly, the Austro-Hungarian Monarchy was part of Central Europe with great political and cultural impact. As the story of Empress Elisabeth demonstrates, in the 19<sup>th</sup> century the same cultural ideals influenced female slenderness and beauty also in Hungary, as the actual European standards. The sociocultural pressure of the slimness ideal is a well-known risk factor of eating disorders. In the era of globalisation the body ideals are similar in different countries and cultures, leading to a certain “westernization”.

On the basis of early Hungarian sources eating disorders in Central and Eastern Europe are more complex problems than previously supposed. The simplifying Eastern-Western dichotomy is not sufficient in the understanding of all the aspects of these phenomena.



## **ISTORIJAT POREMEĆAJA ISHRANE U MAĐARSKOJ**

**Ferenc Túry, Bernadett Babusa, Márta Varga**

Institut za bihevioralne nauke,  
Univerzitet "Semmelweis", Budimpešta, Mađarska

**Apstrakt:** Autori daju prikaz opisa poremećaja ishrane u ranoj mađarskoj državi. Pored srednjovekovnih svetaca isposnika, prikazan je i asketski poremećaj ishrane mađarske princeze Margarete iz 13. veka, kao i obeležja anoreksije prisutna kod austrougarske carice Elizabete iz 19. veka. Fenomeni anoreksije i bulimije pominju se u publikacijama na prelazu vekova. Rani prikazi uglavnom govore o psihičkim uzrocima ispijenosti, pre svega navodeći kao mogući uzrok stanje hysterije. Prvi prikaz slučaja anoreksije kod jedne pacijentkinje objavili su lekari interne medicine 1955. godine, bez pominjanja uloge psihičkih činilaca. Pedesetih i šezdesetih godina, anoreksija je lečena kao somatsko oboljenje i uz pomoć elektrokonvulzivne terapije. Prve epidemiološke studije poremećaja ishrane izvršene su 1988. god, dok su prvi članci o bulimia nervosa kao novom entitetu bolesti objavljeni tek 1989. godine.

**Ključne reči:** *poremećaji ishrane, anoreksija, bulimija, Mađarska, istorija*

## Literatura

1. Szabó P, Túry F. The prevalence of bulimia nervosa in a Hungarian college and secondary school population. *Psychother Psychosom* 1991;56:43-7.
2. Rathner G, Túry F, Szabó P, Geyer M, Rumpold G, Forgács A et al. Prevalence of eating disorders and minor psychiatric morbidity in Central Europe before the political changes in 1989: a cross-cultural study. *Psychol Med* 1995;25:1027-35.
3. Szumska I, Túry F, Csoboth Cs, Réthelyi J, Purebl Gy, Hajnal Á. The prevalence of eating disorders and weight-control methods among young women: a Hungarian representative study. *Eur Eat Disord Rev* 2005;13:278-84.
4. Krch FD. Épidémiologie des troubles des conduites alimentaires en Tchécoslovaquie. *Neuropsychiatrie de l'Enfance* 1991;39:311-22.
5. Krch D, Drábková H. Prevalence mentální anorexie a bulimie v populaci české mládeže. *Česko-Slov Psychiatr* 1996;92:237-47.
6. Túry F, Birț MA, Antal I. Az evészavarok epidemiológiai vizsgálata romániai egyetemista populációban (Epidemiology of eating disorders in a Roumanian university population [Hungarian]). *Psychiatria Hungarica* 1998;13:18-27.
7. Tomori M, Rus-Makovec M. Eating behavior, depression, and self-esteem in high school students. *J Adolesc Health* 2000; 26:361-67.
8. Halmi K. Princess Margaret of Hungary, 1242-1271. *Am J Psychiat* 1994;151:1216.
9. Vandereycken W, van Deth R. From fasting saints to anorexic girls. The history of self-starvation. London: The Athlone Press; 1994.
10. Vandereycken W, Van Deth R, Túry F. A karcsúság császári kultúrája: Erzsébet királyné (1837-1898) anorexiás élete (An imperial culture of slenderness: The anorexic life of Empress Elisabeth of Austria (1837-1898) [Hungarian]). *Psychiatria Hungarica* 1994;9:241-8.
11. Hetényi L. Az elmebetegek étiszonya és műtetése az orrüregen keresztül (Food phobia of insanes and artificial feeding through nasal cavity [Hungarian]). Budapest: Athenaum; 1883.
12. Salgó J. Az elmekórtan tankönyve orvosok, bírák és ügyvédek számára (Textbook of psychiatry for doctors, judges and lawyers [Hungarian]). Budapest: Franklin-Társulat; 1890
13. Stiller B. Die nervösen Magenkrankheiten. Stuttgart: Ferdinand Enke Verlag; 1884.
14. Moravcsik EE. Gyakorlati elmekórtan (Practical psychiatry [Hungarian]). Budapest: Magyar Orvosi Könyvkiadó Társulat; 1897.
15. Goldberger M. Az étvágytalanság kezeléséről, különös tekintettel az ideges formákra (About the treatment of loss of hunger, with special regard to nervous forms [Hungarian]). *Orvosi Hetilap* 1913;57:835.
16. Ferenczi S. A pszichoanalízis haladása (Development of psychoanalysis [Hungarian]). Budapest: Dick Manó; 1919.
17. Buday L. Orvosi alkattan (Medical typology [Hungarian]). Budapest: Magyar Orvosi Könyvkiadó Társulat; 1943.
18. Iványi J, Kovács K. Halállal végződő tartós inanitio, különös tekintettel az endokrin vonatkozásokra (Chronic inanition ending in death, with special regard to endocrinological relations [Hungarian]). *Orvosi Hetilap* 1955;96:1224-8.

19. Nyíró G, Fornádi F, Bartos V. Az anorexia nervosa halmozott elektroshokkal gyógyított esete (A case of anorexia nervosa cured with electroconvulsive therapy [Hungarian]). *Ideggyógyászati Szemle (Neurological Review)* 1958;11:99-102.
20. Nyíró G, Fornádi F, Bartos V, Kaffka K. Neuroendokrin szindrómák kezelése transcerebrális elektrostimulációval (Treatment of neuroendocrine syndromes with transcerebral electric stimulation [Hungarian]). *Ideggyógyászati Szemle (Neurological Review)* 1964;17:1-12.
21. Altomare Gy, Riskó Á. Anorexia és bulimia a mai pszichiátriai gyakorlatban (Anorexia and bulimia in the present psychiatric practice [Hungarian]). *Psychiatria Hungarica* 1989;4:187-99.
22. Tölgyes T, Simon L. A bulimia nervosa (The bulimia nervosa [Hungarian]). *Ideggyógyászati Szemle (Neurological Review)* 1989;42:397-407.
23. Túry F, Szabó P. A táplálkozási zavarok pszichoszomatikája, különös tekintettel a bulimia nervosára (Psychosomatics of eating disorders with special regard to bulimia nervosa [Hungarian]). Budapest: Publications of the Hungarian Psychiatric Association, Section on Psychosomatics; 1989.
24. Faltus F. Anorexia nervosa in Czechoslovakia. *Int J Eat Disord* 1986;5:581-5.
25. Túry F, Wildmann M. Integratív terápiás megközelítés a táplálkozási viselkedés zavarainak kezelésében – egyéves tapasztalataink (Integrative therapeutical approach in the treatment of eating disorders – our one-year experiences [Hungarian]). *Magyar Pszichológiai Szemle (Hungarian Psychological Review)* 1992/93;48/49:213-35.
26. Túry F, Pászthy B eds. *Évészhavarok és testképzavarok (Eating disorders and body image disorders [Hungarian])*. Budapest: Pro Die; 2008.
27. Túry F, Szabó P. *A táplálkozási magatartás zavarai: az anorexia nervosa és a bulimia nervosa (The disorders of eating behaviour: anorexia nervosa and bulimia nervosa [Hungarian])*. Budapest: Medicina; 2000.
28. Túry F. *Anorexia, bulimia. Önszempontú és családsegítő kalauz (Anorexia, bulimia. A self-help guide for families of anorectic and bulimic patients [Hungarian])*. Budapest: Print-X-Budavár; 2005.
29. Pope HG, Katz DL, Hudson JI. Anorexia nervosa and “reverse anorexia” among 108 male bodybuilders. *Compr Psychiatry* 1993;34:406-9.
30. Túry F, Gyenis M. Inverz anorexia nervosa: a férfiak speciális testképzavar (Reverse anorexia nervosa: special body image disorder of males [Hungarian]). *Psychiatria Hungarica* 1997;12:589-594.
31. Túry F, Kovács S, Gyenis M. Az izomdiszomorfia (inverz anorexia) hazai gyakorisága testépítők között (The prevalence of muscle dysmorphia [reverse anorexia] among body builders [Hungarian]). *Szenvedélybetegségek* 2001;9:326-30.
32. Gruber AJ, Pope HG Jr. Psychiatric and medical effects of anabolic-androgenic steroid use in women. *Psychother Psychosom* 2000;69:19-26.
33. Túry F, Gyányi A. “Testzsírfóbia”, a modern évészhavarok egyike: a testépítő típusú évészhavar (“Body fat phobia”, as a modern form of disordered eating: the eating disorder body builder type [Hungarian]). *Mentálhigiéné és Pszichoszomatika* 2007;8:203-10.
34. Bratman, S. Orthorexia nervosa. Original publication: *Yoga Journal*, 1997 October. Internetes változat: <http://www.orthorexia.com/index.php?page=essay>

35. Dudás K, Túry F. Orthorexia nervosa: az egészségesétel-függőség, mint a legújabb evészavarok egyike (Orthorexia nervosa: dependence on healthy food, as one of the newest eating disorders [Hungarian]). *Mentálhigiéné és Pszichoszomatika* 2008;9:125-37.
36. Dolan BM. Eating disorders: a Western 'epidemic' spreads East? *Eat Disord Rev* 1993;1:71-73.

---

**Prof. Ferenc TÚRY, MD, PhD**, Institute of Behavioural Sciences, Semmelweis University, Budapest, Hungary

**Prof. Dr Ferenc TÚRY, doktor nauka**, Institut za bihevioralne nauke, Univerzitet „Simmelweis“, Budimpešta, Mađarska

E-mail: tury@t-online.hu