

HEALTH ACTIVITIES IN RUSSIA TO BE SURVEYED IN A FORTHCOMING BOOK

“**W**HEN a Russian becomes ill the Government does something about it . . . for Soviet Russia has decided that the health of the individual is the concern of society as a whole. Indeed, the Soviet Union is the only nation in the world which has undertaken to set up and operate a complete organization designed to provide preventive and curative medical care for every man, woman, and child within its borders. . . . It may be added that we plead no cause; our only aim is to give a faithful account of what we have seen.” With these challenging statements, Sir Arthur Newsholme and John A. Kingsbury preface the joint report of their survey of socialized medicine under the Communist régime. The results of the inquiry will be published in November by Doubleday, Doran and Company, under the title, *RED MEDICINE: SOCIALIZED HEALTH IN SOVIET RUSSIA*. The volume is over 300 pages in length and has a complete index. The illustrations in this issue of the *Bulletin* are taken from the book.

The investigation was undertaken in 1932 and forms a supplementary chapter in the series of studies on the relation between the private and official practice of medicine in the countries of Western Europe which Sir Arthur Newsholme completed in 1931 and which have been published in three volumes.¹ In a fourth volume², Sir Arthur discussed critically the problems involved in the various points of contact be-

¹Newsholme, Sir Arthur: *International Studies on the Relation Between the Private and Official Practice of Medicine, with Special Reference to the Prevention of Disease*. (Three volumes.) London, George Allen and Unwin; and Baltimore, The Williams and Wilkins Company, 1931.

²Newsholme, Sir Arthur: *Medicine and the State*. London, George Allen and Unwin; and Baltimore, The Williams and Wilkins Company, 1932.

tween private and public medicine in the countries he studied and drew certain definite conclusions as to future steps to be taken to insure the advance of preventive medicine. Russia was not included in these investigations since there seemed to be no evidence that the Russian experience extending over so comparatively brief a period was likely to give important guidance in pointing the direction and character of advances and reforms needed in American or European communities having a long history of advanced and widely diffused medical and social work. Various readers and reviewers of these earlier volumes, however, questioned the exclusion of Russia, and it was decided to institute a supplementary study of the health activities in the Soviet Republics.

The book is divided into three sections, the first presenting a chronological account of the authors' 9,000-mile journey within the country in making their medical survey, including their general observations about living conditions in modern Russia.

Since any discussion of Russian medical organization is necessarily related to the Soviet political philosophy, the second part of the volume is concerned with the history and evolution of the Soviet Republics, including the physical character of the country; the population; the steps leading to the introduction of Communism; present-day government in the Union of Soviet Socialist Republics; industrial conditions and health; agriculture and agricultural workers; religious and civil liberty; home life; contemporary recreational centers and education; the present status of women under Communism, including the questions of marriage and divorce; and the care of children and youths in Soviet Russia.

While the authors discuss some phases of medical activities in this second section, the final chapters treat in detail the curative and preventive activities, which are all centered

under the government. The subjects discussed include prenatal and postnatal care; abortions and their prevalence; social insurance; public health administration; Russian medical history; medical education; the current medical care of the sick and the characteristics of medical practice in Russia; treatment of illness in nonresidential and residential institutions; the care of tuberculosis; and the treatment and prevention of venereal diseases. The final two chapters present briefly the authors' conception of the basic requirements for a nation-wide health service and contrast this ideal with their evaluation of Russian activities in these fields as influenced by the Soviet type of government.

Sir Arthur and Mr. Kingsbury caution the reader that their description of the Russian accomplishments in medical administration may easily be regarded as giving a distorted and too favorable view of medico-social developments in the country, but point out that while they were undoubtedly shown the best phases of the activities in Russia, the same criticism would hold good of any report by a foreign visitor with influential introductions who had inspected medical and public health work in England or in the United States. They state that they realize fully that they were seeing the best, but add, "when this best was seen repeated in many cities visited by us, and when it was everywhere frankly stated that their arrangements were not yet complete, that the dearth of doctors made more adequate provisions difficult for a few years; and when we were told openly of the great difficulties which were being experienced in extending the medical provisions of cities to the vast rural communities of Russia, and of the only partial success hitherto achieved in overcoming these difficulties, we were forced to the conclusion that we were not being victimized by a 'window-dressing' display; and that, indeed, a marvelous reformed and extended

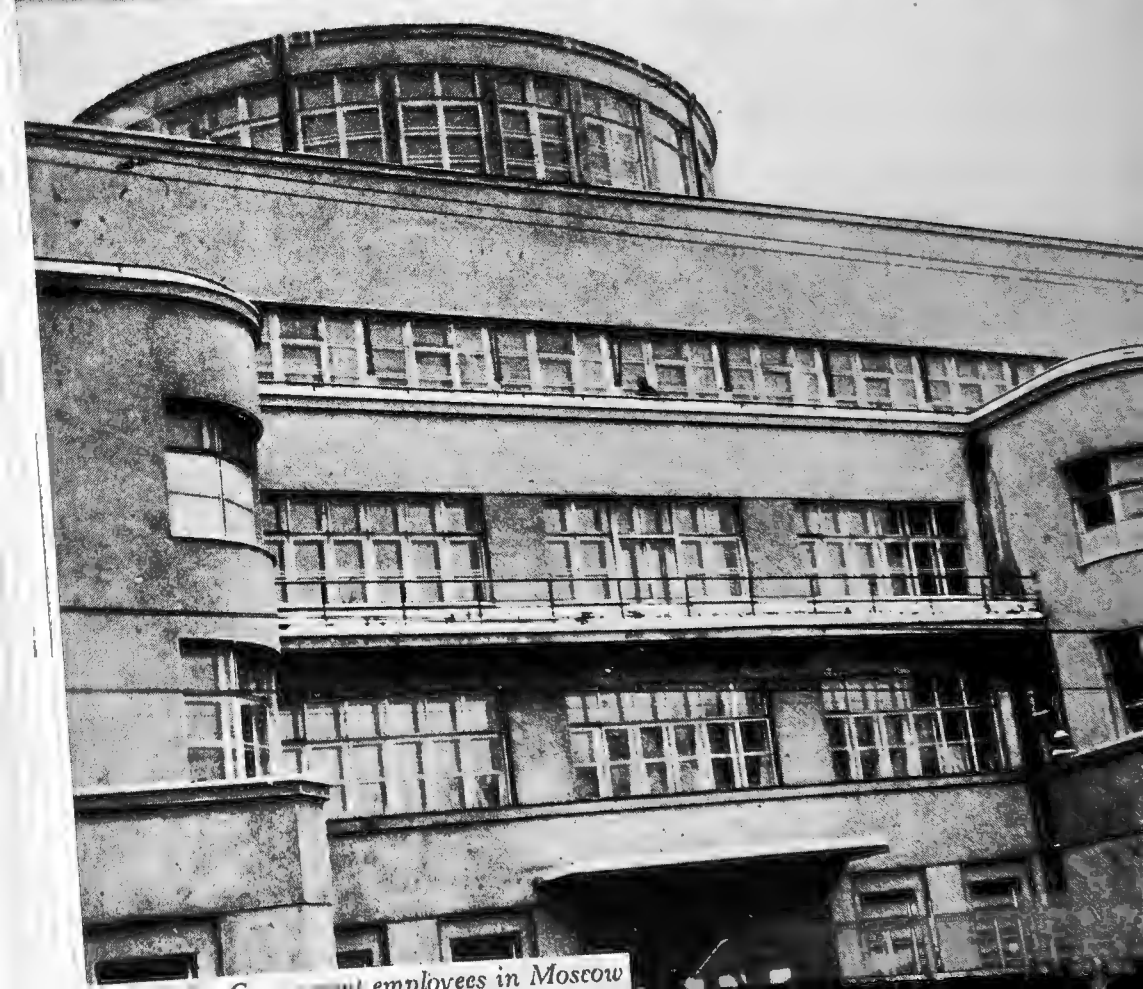


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Margaret Bourke-White



Third Labor Polyclinic in Kharkov, Capital of the Ukrainian Socialist Soviet Republic



Government employees in Moscow



One of eight new polyclinics in Leningrad





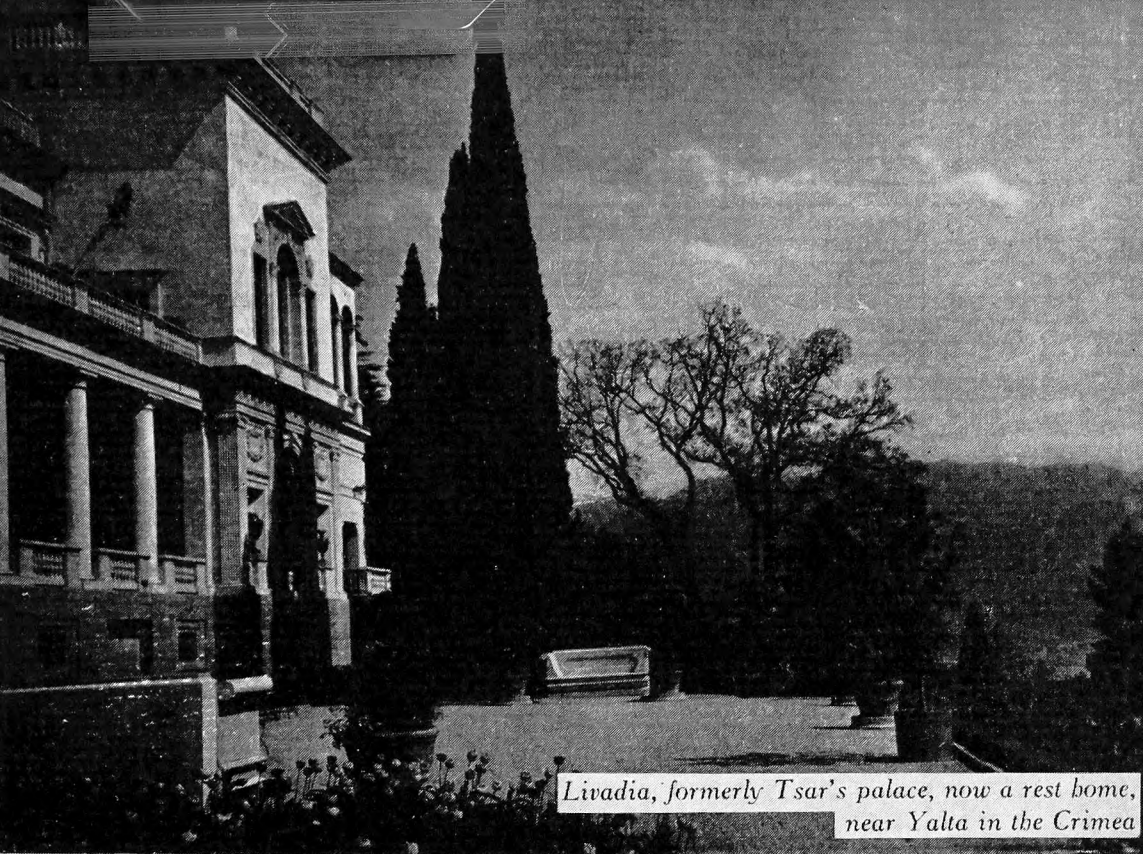




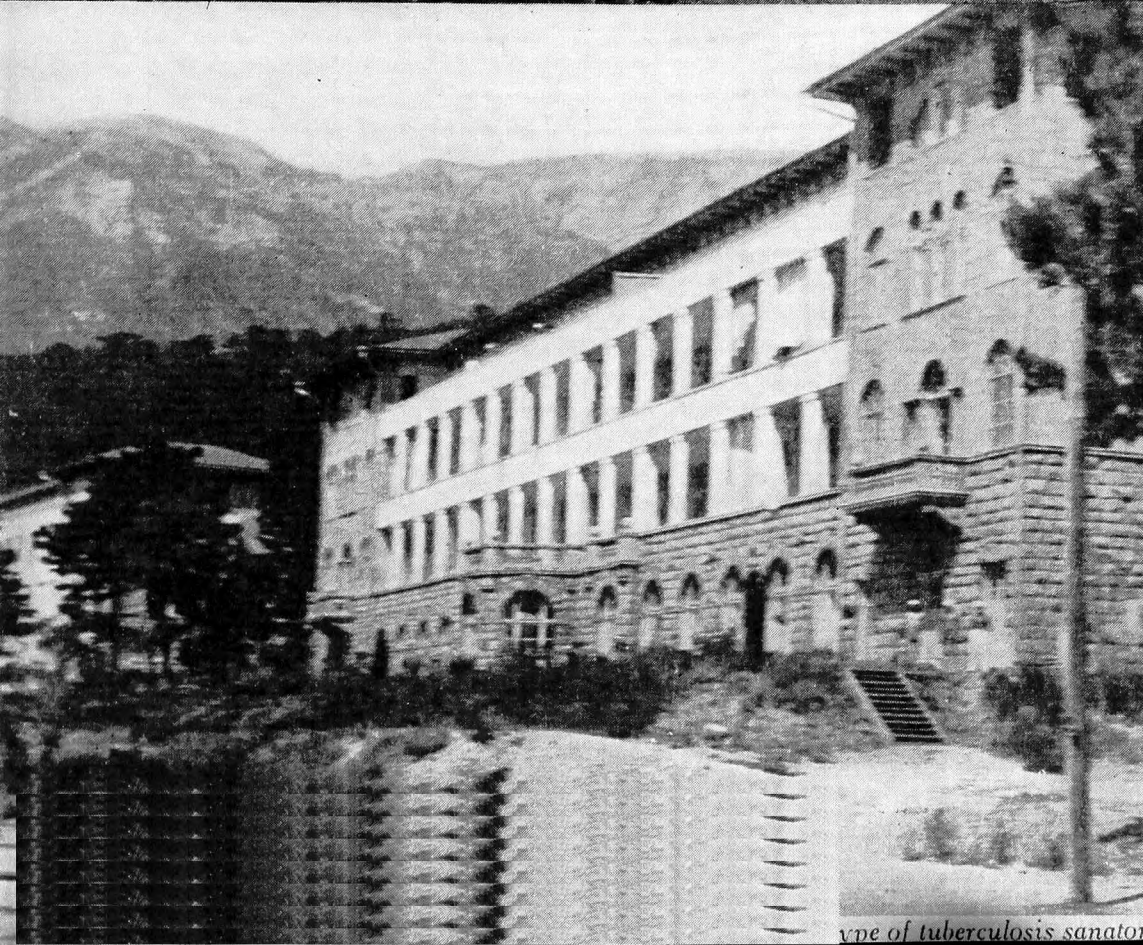
Cardiac sanatorium near Borzhom in the Soviet Socialist Republic of Georgia



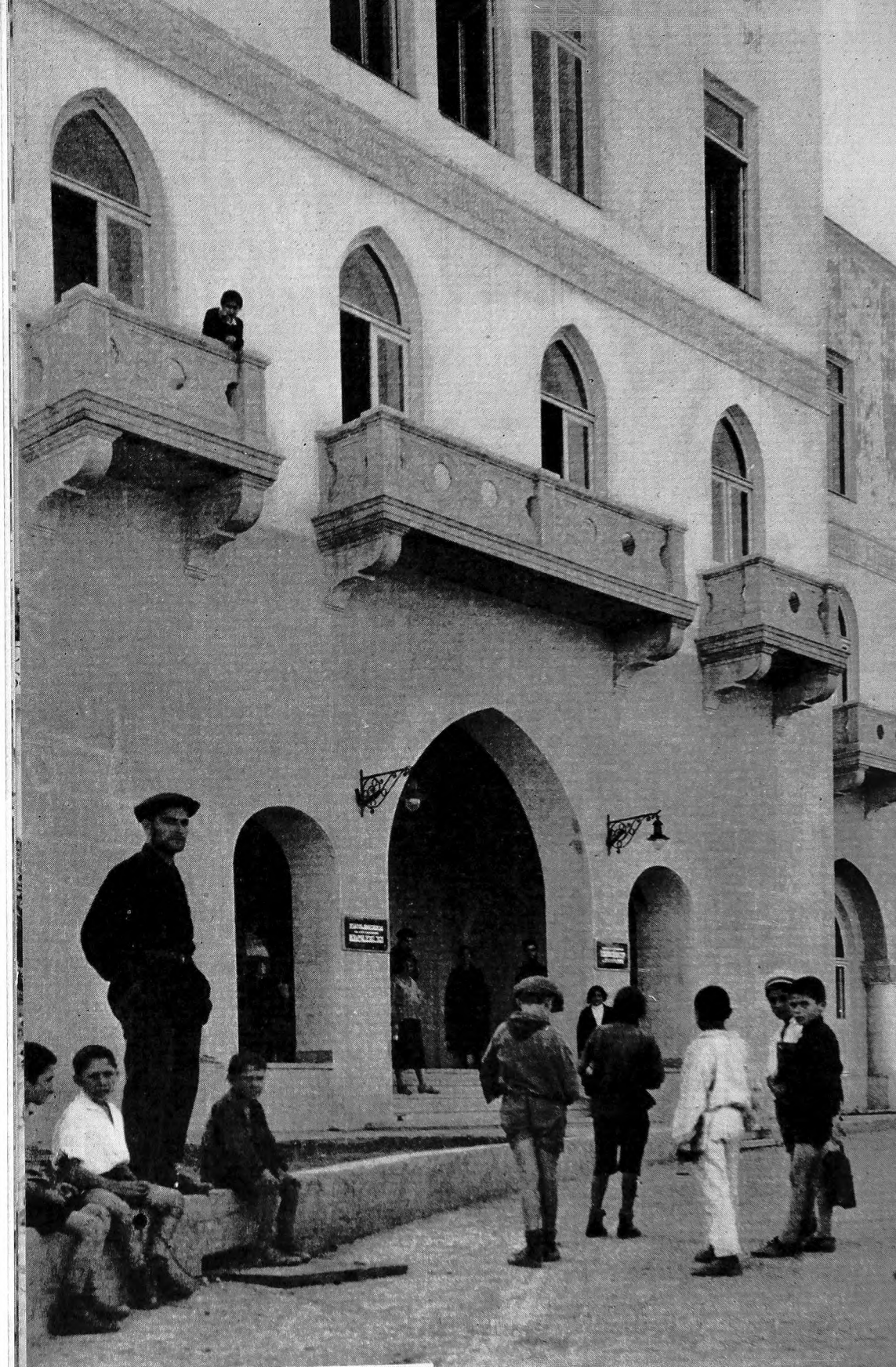
Cardiac patients near Borzhom



*Livadia, formerly Tsar's palace, now a rest home,
near Yalta in the Crimea*



type of tuberculosis sanatorium



*Tuberculosis Institute at Tiflis, Capital of the
Soviet Socialist Republic of Georgia*

medical service had been organized in Russia, the methods and procedures of which the rest of the world would do well to study."

The authors emphasize the fact that the entire practice of medicine, institutional and domiciliary, having been socialized, is supervised and controlled by the public health organization in each of the seven constituent republics. In this respect, there is no separation between clinical and preventive medicine. Each doctor is expected to consider the health of his patient, not merely as a patient, but as a member of the community, whose efficiency, if possible, must be increased.

Every doctor is a state official, and in most instances exclusively so, although there is no legal restriction against private practice. A few doctors, especially older doctors or physicians who have acquired special reputations still retain some private individual practice; but their number is diminishing, and practically all the younger doctors are exclusively officials of the State, largely, in the opinion of officials, because the element of profit has been almost entirely eliminated from national and private affairs.

Next in significance to the fact that every doctor in Soviet Russia is a State official, the authors believe, is the concentration of medical practice in dispensaries, polyclinics, and hospitals, in which the individual doctor is never an isolated unit, but is in systematic touch with every branch of medicine. In this unified medical organization the next link after the home doctor and the factory doctor is constituted by dispensaries and polyclinics. It is claimed by the health officials, the authors state, that, by the partial and almost complete "dispensarization" of medical practice, supervision is being exercised over the healthy as well as the sick persons in each district, including not only workers and their families,

but the entire population; and that there is an almost complete integration of both preventive and curative medicine with little redundance or deficiency of service, and with exact linking up of domiciliary and institutional, including expert, services. To quote but one of the numerous descriptions of the work in the dispensaries, cited by the authors:

“The best example of polyclinic organization and equipment was seen in Rostov-on-Don, at the Unitary Dispensary. The institution so-called is the chief polyclinic in the city, admirably equipped in all special departments of medicine, and with a staff in each department which includes the university professors of medicine. Medical students are trained here and are required also to attend at ambulatoria.

“There are four dispensaries or ambulatoria attached to the polyclinic, in which ordinary cases are treated. There are also night sanatoria for patients with stomachic diseases, where the patients sleep, are given appropriate food, and from which they go to their daily work. There is a similar institution for nervous cases.

“There is a special venereal disease centre for treatment, with a branch at the polyclinic.

“Recently a department has been opened for the treatment of alcoholics, with arrangements for anti-alcoholic addresses.

“At this polyclinic about 1,800 patients are treated daily. All diseases are treated, including formerly tuberculosis; but for this disease it has been found more convenient to use the tuberculosis sections of the clinic chiefly for consultation in difficult cases sent from other institutions.

“All the documents relating to the patient are collected and kept. Thus a tuberculous patient is treated with complete medical knowledge of his condition. During the last three years, we were told, a Tuberculosis Care Committee had been meeting every ten days. In this committee are included the patient’s doctor at the polyclinic, and the doctor

from the ambulatorium who knows the conditions of his daily work. The future conditions of his patient's working are determined, the deficiency in his wage created by his partial inability being paid by the insurance bureau. He remains under the supervision of the ambulatorium doctor and of the doctor at the factory where he works. Workers take great interest in this branch of health work and the committees of workmen concerned with it.

"The polyclinic serves a section of the city having a population of some 25,000. Its area is divided into twelve sub-districts, each of which has a doctor allotted to it. He has charge of about 2,100 people. He may live where he likes, not necessarily in the district allotted to him. He is an employee of the dispensary of his district and spends part of each working day there. He may also be the school doctor for the school in his sub-district. He has sanitary supervision of those living in his area, and gives addresses on health problems to the people."

The authors review in some detail the provisions for the care of tuberculosis, describing institutions in Samara, Tiflis, Moscow, Kharkov, Leningrad, and Yalta. They were greatly impressed by the almost lavish provision of rest homes, convalescent homes, and sanatoria, largely for the care of tuberculous patients. "There are now 24 tuberculosis dispensaries in Moscow with 226 full-time physicians," they state. "In 1931, 776,000 patients were treated, 90,000 of whom came for the first time. Only 30,000 of the last-named number proved to be tuberculous. . . . In tuberculosis dispensaries various forms of special treatment are given, including the production of pneumothorax. . . . The first choice in securing institutional treatment is always given to workers. . . . Contacts are watched, especially children, and examinations made every three to six months; for children tuberculin tests and X-rays are employed."

They found that there is institutional treatment for approx-

imately 100 per cent of the "open" cases of tuberculosis in the towns, and that while before the Revolution there were but 350 beds for tuberculous patients in all Russia, there are now 35,000, and in addition there are some 12,000 beds in day sanatoria and night sanatoria. These sanatoria are usually attached to a dispensary, and make provision for many patients who may be working in one of the Soviet factories. No charge is made for treatment.

In a summarizing chapter, Sir Arthur and Mr. Kingsbury discuss the leading characteristics of Russian medicine. In this summary they reemphasize that much of their survey is concerned with the medical facilities provided in cities, and that they were repeatedly informed that there is an inadequate supply of doctors for the needs of both the city dwellers and the immense and widely scattered rural population, but that this deficiency is being rapidly overcome. They again state that the two outstanding characteristics are: "First, every doctor, with negligible exceptions, is an official of the State, and second, there is a remarkable concentration of medical practice in coordinated institutions, which ensures that every doctor has ready and daily access to expert and institutional help as it may be needed."

Another feature, perhaps the guiding principle, is that the new service is made available in a special degree to all industrial workers and the poorest of the peasants, and to their families. Workers are given priority of treatment at the various dispensaries and polyclinics and have the first call on hospital beds and on treatment in sanatoria and convalescent homes. But although priority is given to the workers, treatment is not withheld from those who do not come within the category of workers.

A further feature is that there is but one national system for the entire population in each republic. In the main, also,

the treatment of disease is entirely gratuitous to those receiving it. Its cost is defrayed by governmental funds, which are derived chiefly from the pursuit of its monopolistic industries.

In conclusion the authors say, "In some essential particulars, the Union of Soviet Socialist Republics has surpassed all other countries in its socialization of medicine. It has removed the doctor almost entirely from the field of monetary competition, and has thus abolished a chief source of inadequate medical service. It has made a gratuitous (that is, state-paid) medical service of an astonishingly complete character promptly available for the vast majority of urban populations, a service which is being rapidly extended to rural Russia; and it has given the whole of this service an admirable turn in the direction of social as well as medical preventive measures.

"It has constituted a single unit system of medical service for the population, freed from the complications, overlappings, and gaps of western medicine. However, the occurrence of gaps in the service for rural Russia is admitted.

"These are great achievements. The new arrangements are far from perfect; but perfection could not be expected after only a dozen years of strenuous organization. But other countries may well envy Soviet Russia's elaborately centralized government in this respect, in that it has been able to brush aside all past complexities and to initiate a nearly universal national medical service on unified lines, untrammelled by such complications as exist in western Europe and America. There are some advantages in starting, as Russia has done, almost from zero point; but the realization of unification and of universality of a satisfactory medical service, available for all who cannot now afford it, should not be beyond the reach of other countries.

"In every civilized country medicine has become more than

half socialized. There is more hospital and institutional treatment of illness (including insanity) than domiciliary treatment. Much domiciliary treatment is partially or entirely a state or municipal service, including the various sickness insurance schemes; and except in Britain and America nearly all hospital treatment is a state service. Even in these two countries it is to a very great extent a state service.

“What Russia has accomplished in its courageously original schemes for the health and social well-being of its people constitutes a challenge to other countries . . . a challenge which western civilization must accept and meet.”