

# State Medicine\*

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**T**HE medical profession in Canada stands at the crossroads. There have been established in many other countries systems of medicine to meet the special conditions and needs of the people. Thus, in England and Germany Health Insurance has become a valuable method of bringing medical care to the masses of the workmen and in some cases to their dependants.

The system of Health Insurance, or one might better say, Insurance against Sickness is well known to all, but State Medicine is possibly not so well known.

The Canadian Medical Association put itself on record as favoring some scheme of health insurance, and undoubtedly it is a matter of time only before Canada adopts some such system.

This article is not an attempt to extol or advocate State Medicine as a desirable system for adoption in this country. Rather, it seeks to present a scheme of medical administration which is actually in practice, and which may serve as a comparison with other systems of medicine.

State Medicine has been practised in the Soviet Union since its inception in 1917, and it is the system there that I wish to present since it is the only country where such a form of medicine is practised today.

Obviously, though State Medicine may be eminently suited to the U.S.S.R., it does not follow that such a system would be found suitable in this country. In Canada, where the principle of freedom is so deeply ingrained in its citizens, where the state is considered to exist for the individual rather than the individual for the state, it may well be that State Medicine would be entirely unsuitable. However, our training has taught us to collect all evidence relative to a "case" and then after thoughtful consideration to give a "diagnosis." Similarly, we must not condemn, without a hearing, a system, even though it emanates from a country where regimentation of the individual in the interests of the state is practised.

## HISTORY OF RUSSIAN MEDICINE

As a background to State Medicine it is necessary to review briefly the medical organization in Russia under the Czarist regime. It was a "history of plagues, famines and a few brilliant achievements." Russian medicine was essentially a primitive medicine, a combination of empirical knowledge and of magic rites and religious beliefs. At the time of the Revolution there were many areas where the peasantry had never seen a physician. In certain areas medicine-men and witch-doctors performed cures by supernatural means among the lower classes. The story of Rasputin and the Royal Family is evidence that belief in such cures was not confined to peasant population.

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\* [Editor's Note: This is the first of a series of articles by the writer on systems of medicine in foreign countries.]

Epidemics of small-pox, typhus and plague spread over the country periodically, and aided by famine resulted in death to millions. The ruling classes imported physicians from Western Europe, particularly England and Germany. One of the earliest of these doctors was a Venetian, Leo, who failing to cure the Grand Duke's son, was decapitated.

In 1864, the Zemstvo or local government was given the power to "organize, finance and administer the health service in the provinces and districts." Under this direction two systems of medicine arose, namely a Touring System and a Stationary System. Under the Touring System a doctor called at a village, saw the sick which had accumulated since the previous visit and prescribed treatment. He then went on to the next village. This system was unsatisfactory. The Stationary System was better but more expensive. Under this system medical stations were established over the country with physicians and personnel in charge and each peasant came to the nearest station for treatment. Thus, as time went on, this system was adopted in some areas and in others a combination of both was in vogue.

Zemstvo had therefore produced by 1914 a system of medical organization, medical stations and dispensaries, and had accustomed the people to the idea that medicine was a public service to which every citizen was entitled.

### THE ORGANIZATION OF SOVIET MEDICINE

The basis of Soviet Medicine is:

1. That the condition of health of the individual is a matter of concern of the State and as such is the responsibility of the State.
2. That prevention of disease is in the foreground of all health activities.
3. That medical service is free and available to all.
4. That the entire system be directed by central bodies, the Peoples' Commissariats of Health.

The U. S. S. R. consists of seven constituent republics and to each is given the control of health and medical service within its borders. Each administers preventive medicine, medical care, pharmacy, medical training, hospitals, sanatoria and certain health resorts not under the direct control of Health Insurance. The health service of the Army, Navy and Transportation Workers is administered by authorities of the Union as a whole.

In every factory, on every collective farm, wherever people work there are established health committees composed of workers. These groups cooperate with the physician to improve the medical service available to the workers. They control the hygienic conditions of the plant or farm, the nurseries, the kindergartens and the care given to school children. They have a voice in deciding which worker shall go to the rest homes, sanatoria or health resorts. They organize health lectures and exhibits so that a continual health campaign is going forward all over the Union. It represents an attempt to enlist every citizen in the fight against disease and filth which are so prevalent in Russia.

Each Soviet State has at the head of the health department a

People's Commissariat of Public Health, headed by a People's Commissar. Under this leadership are District and Regional Commissariats and Special Commissariats for cities. Heads of District and Regional Divisions are nominated by District Committees or by the Commissar of Health for the Republic. Under the District and Regional Commissariats is the field staff of doctors and nurses and the varied personnel required to administer pharmacies, dispensaries, hospitals and sanatoria.

The chief departments are:

1. Therapeutics.
2. Medical work in institutions.
3. Care of mothers and children.
4. Industrial hygiene, factory doctors.
5. School hygiene and the betterment of children's health.
6. Sanitary conditions of life.
7. Scientific research.
8. Popular sanitary education.
9. Rationalization—the department by which problems are given to universities for study and remedial measures.
10. Planning department, including finance and statistics.
11. Supply department for foods.
12. Division for plans of buildings.

Such a comprehensive scheme completely under government supervision requires large sums of money for its prosecution. This need is met in three ways:

1. Local taxes used for supporting local institutions.
2. Central funds for support of medical and other staff.
3. Insurance funds.

This last is the greatest source of support.

### HEALTH INSURANCE

State Medicine and Health Insurance are so closely bound together in Russia that a brief survey of the latter is necessary.

Health Insurance in the Soviet Union is unique in that the worker does not contribute from his wage to maintain the benefits.

Each factory has a Social Insurance Bank where contributions from industry are made. These are worked out on a per capita basis according to wages paid, and the cost falls on the state, the cooperative body or the private employer.

All workers and their dependents are included in the benefits except the "deprived" classes. These include former landlords, bourgeoisie, nobles, Czarist officials, merchants, Kulaks (rich farmers), and Czarist army officers. The scheme does not include the peasants but they are exempted from certain taxes as a consequence.

Under the Insurance Plan are benefits for:

1. Sickness.
2. Permanent incapacity.
3. Maternity.

4. Unemployment.
5. Old Age.
6. Burial.

Full wages are paid during absence due to illness, during quarantine, and while nursing a sick member of the family. Sick leave of over ten days requires a consultation between the doctor and the medical referee. Medical services are free and are administered by the Commissariat of Health.

Permanent incapacity carries a pension ranging from 30% to 70% of salary depending on the extent of disability.

Women engaged in work are given eight weeks free from work prior to confinement and a similar length of time after parturition. There is also a bonus for infants' clothing and for nine months a nursing benefit of  $\frac{1}{4}$  of the mother's wage.

Funeral expenses are paid for all people under Health Insurance and each person is retired at 60 years of age on pension. This figure is lowered to 50 in dangerous trades.

It is evident that Health Insurance and State Medicine are bound closely together. The Insurance scheme assures that the worker is safeguarded against calamity and State Medicine represents a recognition that his illness is a concern of the whole community.

### THE TRAINING OF DOCTORS

After the Revolution the Soviets socialized all doctors. Due to famine and pestilence in the years after the Revolution the casualties among them were terrific and in some areas 70% died of typhus and relapsing fever.

Doors of the Universities were thrown open and thousands of men and women entered medicine. Formal examinations and didactic lectures were abandoned, and teaching was done by seminary and laboratory discussions. Students worked in teams of four or five and were assigned a project, for example, health conditions in a certain district. The task was to be divided into parts and a joint report was to be submitted. For a time, the medical graduate lacked adequate training. Necessity for doctors was great and quality suffered so that quantity might be attained. This is being remedied by making courses more thorough and by introduction of formal examinations again. Also, the State has established a system of post-graduate courses whereby the physician, every 3 years, is given the opportunity to acquaint himself with up-to-date methods. During the course his salary continues and his expenses are paid. Medical students, too, during their training period, are paid by the Government, for it is considered that by such preparation they are working for the State.

After graduation the young doctor goes to rural areas for two years. Here he belongs to a rural medical station and assists the experienced senior doctor. He may then choose to return to the city or to remain in the country. Others, who show aptitude, become "research fellows" and join scientific institutes for three-year periods. If successful they are then kept on the permanent staff.

The argument is often advanced that the doctor will tend to neglect his work, and be satisfied with partial investigation of a case if the incentive of competition is removed. Such, they maintain, is the condition in Russia under State Medicine. No longer does it matter if the patient leaves the doctor, (as they may do in Russia if they wish), for the doctor's salary will continue just the same.

It is pointed out, as an answer, that the doctor works only 6 to 6½ hours daily, and that every fifth day is a holiday. This gives the practitioner sufficient time to study and improve his powers of diagnosis. Further, post-graduate courses are popular though not yet compulsory. Again, each doctor knows that with increasing experience and skill his salary will increase and valuable posts are given on a basis of experience and ability to assume responsibility; salaries range from 300 to 900 rubles monthly, a rouble being equivalent to 20 cents.

In addition to the administrative set-up and the doctors there is also the "middle medical personnel." It is the group which includes midwife, medical nurse, nursery nurse, laboratory technician, dentist and pharmacist. Like other workers of the Soviet Union they are paid by the Government.

The Research Laboratories have been mentioned before but a point of interest lies in the fact that research is maintained by State funds and so valuable work does not suffer from lack of financial support.

Lastly, in mentioning the medical workers there is an important voluntary group called The Red Cross and its Mohammedan counterpart The Red Crescent. The Soviet Red Cross and Red Crescent have been members of the International Red Cross since 1924. There were 5,000,000 members in these two organizations in 1934. These two units have done much work coordinating and integrating with the Government's medical service.

### THE CARE OF THE SICK

For ordinary illness the treatment is undertaken:

1. At home.
2. At the factory or institution where the patient is working.
3. In dispensaries and polyclinics.

If the illness is of a more serious nature treatment is given in hospitals and for those who are convalescing rest-homes are provided.

Domiciliary practice is limited in extent because of crowding and unsanitary housing conditions. All ambulant patients are treated at residential institutions and polyclinics.

Each factory has a special doctor who gives first aid, supervises hygiene of the workers, and keeps records of workers receiving treatment. Periodical examinations are made and early cases are picked up. These are removed to more favorable surroundings for treatment.

The Dispensary and Polyclinic is an institution through which the individual doctor is never an isolated practitioner but is in systematic touch with every branch of medicine. In this connection the claim is made that supervision of the health of the whole community is attained. When the patient comes to the Clinic he is exhaustively overhauled and treatment



instituted. At the same time a nurse is sent to his home to study conditions and to arrange steps needed for their improvement.

Next are the Hospitals which are being built in increasing numbers every year. Here patients are brought from the farm, factory or office for treatment if they are too ill for treatment at the polyclinic.

After hospitalization is over the patient is sent to a Sanatorium or Rest Home to completely recover before going to work again.

An American teacher became ill while working in Russia. He had an attack of tonsillitis which was followed by acute rheumatism and pleurisy. He was attended at home by the local doctor. His progress was unsatisfactory so he was sent into hospital. Here he found the treatment satisfactory but the food of poor quality. Nursing was good. He stayed in hospital six weeks and during that time had consultations on his case. After leaving hospital he was under the doctor's care for a month. He was then sent for a protracted stay to a sanatorium in the Russian Riviera where the charge was 220 rubles. He was, however, paid half salary all the time he was ill. Had he been a Union member he would have received full salary and his expenses at the Riviera would have been paid. He stated that his treatment was similar to that of ordinary Russian workers.

#### CARE OF MOTHERS AND CHILDREN

In Soviet Russia equality of women with men is recognized and thousands of women have entered various trades and professions. Over 39% of all workers are women. Special regulations are made in the labor code to protect women from overwork. Under the Medical Service, the State has set up Woman's Consultation Bureaus which consist of three departments—one, for sexual hygiene; one, for pregnancy and childbirth; and a third, for gynecology. Instruction is given, free of charge, in any subject desired including birth control, and contraceptive devices are available for the patients at the Bureau.

A pregnant woman in Russia is given a special card which entitles her to special privileges. She no longer stands in line at stores and theatres and she receives preferential treatment everywhere she goes. She comes to the Bureau monthly for advice and treatment and her home is visited to see that everything is satisfactory there. As mentioned previously, she has a four-month rest period for the birth of her baby. She goes to a lying-in hospital for her confinement where she receives instruction in the care of infants. All care is free and in addition she receives insurance benefits as outlined above.

Nurseries are built in connection with factories where working mothers can leave their babies during the day and be assured of expert care. These nurseries are staffed with nurses and teachers specially trained in dealing with children. This does not represent, as is sometimes stated, an attempt to separate mother and child, but rather it permits mothers to have some time to themselves, and also serves as a medium of continued instruction to mothers in feeding, clothing and training of children.

Children are systematically examined during their growing years and,

in the cities, selections are made in February and March of children who are delicate. These are sent for 40 days during the summer to the country where special camps are established. As previously mentioned, widows and orphans are given pensions by the government to prevent destitution and suffering.

### CONTAGIOUS DISEASES

Tuberculosis, that disease of privation, filth, and unsanitary habits, is gradually being eliminated in Russia due to an active campaign under direction of the Health Department. Regular examination of workers in Soviet factories serves to pick up the early case. The patient is immediately removed from work and active treatment instituted. This consists of pneumothorax, rest cures in sanatoria, etc., but a more important phase, that of watching contacts, is carefully followed. Contacts, especially children, are checked every three months, x-ray and tuberculin tests being used. No charges are made and under Health Insurance pay goes on during illness.

Similarly, in regard to other contagious diseases a vigorous campaign is being prosecuted to reduce them to a minimum. The whole scheme is under unified direction, so that coordination of the various approaches is possible. Education plays a tremendous part, for the vast majority of Russians had never had the benefit of doctors' service before the Revolution.

The campaign against venereal disease forms an interesting chapter in Soviet Medicine. Syphilis was rampant in many areas before the Revolution. As soon as materials were available, free treatment was instituted for all. As in other countries, it was found that not all patients would return for continuation of treatment. Improved arrangements were made whereby the patient was treated in secrecy and by appointment so that there would be no delay. Educational campaigns were instituted to enlist the people in an active fight against this menace. However, it became necessary to make treatment a compulsory matter, and at present a person who refuses to take treatment voluntarily can be arrested.

This article does not touch on all phases of Soviet Medicine but in the material presented the trend is clear. State Medicine in Russia appears to be synonymous with free medicine. However, this does not signify charity medicine, for the workers are made to feel it is their right because of their contributions of labor to the State. It is also synonymous with preventive medicine primarily, and with methods of eliminating disease already present. Thirdly, Soviet Medicine signifies education of the masses in correct hygienic methods of living which is, of course, the basis of preventive medicine.

It is well recognized that information emanating from the Soviet Union, whether it be for or against the present regime, is likely to be colored by bias and preconceived ideas to such a degree that the true picture cannot be seen. The writer has simply recorded the picture as it appeared to him from the available material.

### REFERENCES

1. Newsholme, Sir Arthur and Kingsbury, John, 1934. Red Medicine.
2. Sigerist, H. E., 1937. Socialized Medicine in the Soviet Union.