
tence. Patients are seldom assigned to the same doctor on return visits to the hospital, and the doctors know that the patients and paychecks will keep coming no matter what they do. Physicians can be fired for gross errors, but medical malpractice suits and the payment of damages to patients are unheard of. And although the Soviets repeat *ad infinitum* that socialized medicine has removed the capitalistic "cash nexus" between doctor and patient, it is not uncommon for patients to purchase a bit of special care—a ruble or two to a nurse to ensure a regular change of sheets, much more to convince a superior specialist to take one's case.

Despite it all, patients seldom question the judgment of doctors. To do so would be *nekul'turno*, an act of arrogance. Naturally, physicians encourage that attitude—as any bureaucrat would—to make their work easier.

Mud Baths and Mare's Milk

Bureaucratic arteriosclerosis poses some peculiar hazards. Strictly enforced regulations dating from the days when it was believed that most infectious organisms were brought into hospitals from the outside require visitors to shed their coats at the hospital door. Inside, however, hygiene is slackly maintained.

William A. Knaus, a young Washington, D.C., internist, is one of the few American physicians to have spent a great deal of time in Soviet hospitals. In *Inside Russian Medicine* (1981), he tells of an American named David who was hospitalized for chronic gastritis in Moscow's Botkin Hospital. Because Westerners are sometimes brought there, the Botkin, a compound of pre-revolutionary and newer buildings, is probably above average. On David's floor, there were three toilets for 76 men. "These had no seats," Knaus writes, "and, unless one brought a morning copy of *Pravda*, no toilet paper." To make matters worse, Soviet nurses dispense enemas as freely as their American counterparts give back rubs. The toilets at the Botkin constantly overflowed onto the bathroom floor.

More than negligence is involved. The Soviets lack the disposable syringes, needles, and other implements that Western doctors take for granted. Transfusions, for example, are typically performed with steel needles and red rubber tubing, which are then rinsed and reused. Knaus also witnessed intravenous solutions being poured from open jars and doctors performing a minor operation without surgical gowns or masks. As a result of such lax enforcement of sterility, the incidence of postoperative infections is very high, affecting almost one-third of all surgery

patients—roughly equivalent to the rate that prevails in Afghanistan, according to Knaus.

Shortages, which plague the lowliest rural polyclinic and the best Moscow hospitals, also affect the quality of care. Not only do doctors occasionally run out of certain antibiotics, insulin, glycerine (for heart patients), and other drugs, but even bandages, absorbent cotton, thermometers, and iodine can be difficult to procure at times. The pattern extends to basic equipment. Last year, a West German company began construction of the first wheelchair factory in the Soviet Union; today, patients who cannot walk are carried about on stretchers. A female physician told Knaus, "With a stethoscope like [yours], I could become the best doctor in Siberia." Sometimes even the black market cannot compensate for the legal economy's shortcomings. "Like many other foreign residents in Moscow," notes *New York Times* correspondent Hedrick Smith, "I was frequently approached by Russian friends with urgent pleas for help in obtaining critically needed medicines, unavailable at any price in Moscow."

Perhaps the brightest spot in the Soviet health care system is the sanatorium. There are about 2,280 of these scattered around the country, most of them devoted to the treatment of particular ailments (arthritis, diabetes, hypertension) that do not require regular hospitalization. Here the average citizen can get the kind of individualized care in relatively pleasant surroundings that is lacking elsewhere. A typical stay lasts 24 days, marked by a doctor's visit every fourth day, mud baths and mineral water baths on alternating days, sound wave and heat treatments, regular exercise, and generous portions of food (including *kumys*, or mare's milk, which is believed to have strong curative powers).

A Fundamental Illness

Access to the sanatoriums is controlled by labor unions, which distribute tickets as rewards to productive workers in lieu of raises, or to those workers who require special treatment. The sanatoriums serve some eight million Soviets annually. Tickets are highly prized. Often, a long wait, a bit of negotiation, and perhaps a few well-placed gifts are necessary to secure the privilege of a visit. Nobody knows if the sanatoriums' rather unorthodox treatments are effective, but patients seem to leave feeling happier. As one sanatorium doctor told Knaus, "A person's emotional reaction to disease is very important." In a way, these sanatoriums function as the Soviet Union's sugar pills.