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Zhurnal Mikrobiologii Epidemiologii i Immunobiologii, No 6, 1953,

GECOND ALL-RUSSIAN CONFERENCE OF DISINFECTION SERVICE WORKERS

M. I. Lyulyayev

The Second All-Russian Conference of Disinfection Service Workers took place in Moscow, 17-19 November 1952. About 400 persons took part in the conference: the principal officials of the republic, kray, oblast, and city sanitary-epidemiological stations, the heads of the disinfection divisions and prophylactic disinfection departments of these stations, and the chief physicians of the city disinfection stations.

Eighteen reports were presented at the conference. The first report, on the status and current tasks of disinfection work in the RSFSR, was given by Ogloblina, chief of the Main Sanitary-Epidemiological Administration, Ministry of Public Health RSFSR.

In her report, Ogloblina pointed out that (1) the unification and reorganization of the sanitary-antiepidemic service have made possible the strengthening and development of disinfection work in the RSFSR, and (2) the extension of the network of disinfection institutions within the system of sanitaryepidemiological stations has improved medical supervision of local disinfection work. At present, the disinfection service network of the RSFSR includes disinfection stations; disinfection divisions of the republic, kray, oblast, and city sanitary-epidemiological stations, and the cost-accounting departments of prophylactic disinfection at the latter.

The number of workers in the disinfection service has increased by eight times since 1940. The turnover in the medical cadres has been sharply curtailed. Medical cadres of prophylactic disinfection departments have been reinforced to a significant degree. Finally, considerable work has been done to raise the qualifications for physicians engaged in disinfection work.

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Nevertheless, substantial deficiencies exist in the work of the disinfection service. A fundamental defect is that some leaders of public health organizations underestimate the enormous importance of the disinfection service in the over-all complex of antiepidemic measures, and thus that these leaders do not have a proper concern for the selection, placement, and training of cadres. In the Stalingrad and Ul'yanovsk oblast sanitary-eipdemiological stations, the present heads of disinfection divisions have had no medical education; end in the Kuybyshev, Chelyabinsk, Kalinin, and Bryansk oblast stations, the heads of the prophylactic disinfection departments are not physicians. Furthermore, not all the positions for disinfection workers are filled. Thus ir Kaluga, Kursk, Ul'yanovsk, and Vladimir oblasts only one out of 3-4 official physicians' positions are filled, while some rural medical districts have no disinfectors at all, i.e., in Arkangel'sk, Kemerovo, and Ul'yanovsk oblasts; the Buryat-Mongol, Yakut, and Udmurt ASSRs; and Krasnodar Kray.

The leadership has not given proper attention to the preparation of local cadres. In Stalingrad, Kuybyshev, Molotov, and Sverdlovsk oblasts, assignments to institutes for advanced training of physicians have not been utilized. Vologda Oblast and the North Osetian ASSR, fel'dshers and not physicians were sent to these institutes.

The problems of training intermediate workers in the disinfection service still have not been decisively resolved. A great number of disinfectors and disinfection instructors have had no specialized preparation. An inquiry into the qualifications of such workers in some oblasts causes serious alarm. Thus, 25% of the disinfectors in Kurgan Oblast and 42% of the disinfectors in Tambov Oblast have had no specialized training; in the Udmurt ASSR none of the disinfection instructors has attended courses; and in the Dagestan ASSR there has been no preparation whatsoever for disinfectors and disinfection instructors for the past 2 years. As a result of the inadequate qualification of intermediate disinfection workers, work instructions have sometimes been contravened, for example, in connection with the application of hexachlorane preparations.

The quality of disinfection work in cases of infectious illnesses has not reached the desired level. In most oblasts, [disinfection] treatment is applied after the deadlines specified by the Ministry of Public Health USSR. Thus, in Yaroslav and Irkutsk oblasts treatment is applied within the first 3 hours only in 50% of cases and, in the Yakut ASSR, only in 27% of cases. In the Mariy ASSR, a thorough disinfection at the time of the patient's hospitalization was carried out in only 9% of the cases; in 21% of the cases, disinfection was performed the Chuvash ASSR, chamber disinfection is not adequately applied in cases of intestinal and air-borne droplet infections or tuberculosis even when the material and technical means are available.

A significant improvement is likewise needed in day-to-day disinfection work. In a number of ASSRs, krays, and oblasts, a close scrutiny of the disinfection systems in hospitals for contagious diseases and tuberculosis institutions reveals gross negligence in carrying out continuous disinfection. For example, in Kuybyshev Oblast disinfection is completely entrusted to junior personnel, and the physicians and medical nurses of the departments exercise no guidance or control. The chief physicians of several sanitary-epidemiological stations (those of Irkutsk and Vladimir oblasts and of the Dagestan and Udmurut ASSRs) have assigned day-to-day disinfection to their own workers, whereas such disinfection would seem to be the direct responsibility of the workers in the medical proph actic network. As a result, the methodical guidance and control of the epidemiological system in hospitals for contagious diseases and tuberculosis institutions have been weakened. Furthermore, laboratory control over the quality of disinfection procedures is poor.

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In his report, Kudrinskiy, chief physician of the Moscow City Disinfection Station, discussed the organization of thorough disinfection and control of the effectiveness of disinfection procedures. The characteristic of the work of the Moscow City Disinfection Station is that final disinfection is carried out by the brigade method (two disinfectors under the direction of a physician or disinfection instructor). Furthermore, for all infectious illness:s except dysentery, chamber disinfection is used. In the case of dysentery, chamber disinfection is applied only when bedclothes and objects which cannot be disinfected on the spot by soaking have been soiled by matter eliminated by the sick person. In practice, the city disinfection station makes wide use of activated solutions of chloramine.

Ignat'yev, chief physician of the Voronezh City Disinfection Station, gave an account of the organization of the disinfection service in Voronezh. A whole complex of antiepidemic measures is applied in Voronezh: timely hospitalization of the ill, disinfection, and the isolation and obligatory treatment of carriers until they are harmless from the standpoint of contagion. The collective of the station is working out scientific problems of great practical significance. Important work has already been done in the search for new disinfection agents. The production of pure hexachlorane, possessing high insecticidal properties, has become well known. The station has become an instruction base for training intermediate medical personnel and a genuine consultation center in the oblast where the latest methods may be learned.

Skvortsov, director of the Fryanovo Medical District of Shchelkovo Rayon of Moscow Oblast, reported that all the conditions necessary for the timely liquidation of infectious illnesses and for the carrying out of wide-scale prophylactic disinfection work have been established. The hospital has two disinfection chambers (formalin combined with steam and dry heat), portable pumptype disinfectant sprayers, disinfection apparatus, and a permanent reserve of disinfection materials. Also, the bathhouse has a dry-heat disinfection chamber. A sanitation unit of 118 men has been breated to help the medical workers carry out extensive prophylactic measures.

In a report on the role of the isolation ward in the general complex of antiepidemic measures, Grigor'yeva, chief physician of the Leningrad City Disinfection Station, analyzed the work done by this ward over a period of years. The function of the ward changed in accordance with the epidemiological situation. In recent years, the ward has been used for treating diphtheria carriers and those recovering from scarlet fever and dysentery until they are no longer a threat. The physicians at the station, in conjunction with the scientific workers of the institutes, are studying the effectiveness of new methods and means for treating carriers.

Chief physicians Kushnikova, of the Tula Sanitary-Epidemiological Station, and Mikheyeva. of the Sochi City Station, recounted their experiences in the organization of antifly work. Planned antifly measures have been carried out in Sochi and populated points in Tula Oblast since 1949. The treatment has utilized preparations of DDT and hexachlorane. Breeding places were treated with black carbolic acid. Special attention was given to removing both solid and liquid refuse from inhabited places. As a result of these measures, the number of flies decreased sharply, and thus the number of cases of acute intestinal infections decreased.

Ivanova, chief physician of the Saratov City Disinfection Station, reported on the organization of a rat-elimination program on a continuous basis. A special resolution of the Executive Committee of the city soviet requires all organizations, enterprises, and institutions to enter into contracts for rat elimination, or to carry it out themselves, using the forces of the departmental disinfection service. The interdepartmental committees play a large part in this work. The public sector has embraced the rat-elimination measures 100%; the private sector 80%. The work is carried out mainly by means of poisoned food bait and mechanical methods. As a result, 61.6% of the objectives have

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been rid of rodents, and the degree of infestation of the remaining objectives has declined sharply.

In his report on the basic trends in scientific-investigative work, Prof. Vashkov, deputy director of the Central Scientific Research Disinfection Institute, Ministry of Public Health USSR, discussed in detail the successful search for new disinfection preparations and means of applying them in the oblasts. Thus, in 1950 the Moscow City Disinfection Station worked out and put into practice a method of applying a hexach rane preparation to destroy fly larvae in the cesspools of toilets without plumbing. The Moscow and Leningrad stations have developed a method of controlling the effectiveness of disinfection in instances of intestinal infection by the detection of B. coli. The Voronezh station is working on the problem of personal hygiene for medical worked on at the Moscow station, lie at the Leningrad station, and 18 at the Voronezh station. However, far from all the disinfection stations were involved in this work, and the results of completed work are only slowly introduced into wide practice.

In her report, Timonich, Candidate of Medical Sciences, discussed the problem of laboratory control of the quality of disinfection. She pointed out that the method of laboratory control of the effectiveness of disinfection measures worked out in 1949 by the Central Scientific Research Disinfection Institute Ministry of Public Health USSR, and since put into practice, has a number of failings, i.e., there is a large percentage of negative results even when the disinfection is performed carefully. Furthermore, the absence of a sudden turning point is also a disadvantage. She concluded by saying that it would be necessary to work out a new, more nearly perfect method.

Polezhayev, Candidate of Biological Sciences, explained the basic practical tasks encountered by the city disinfection service in carrying out the continuous rat-elimination program. In his report, he devoted a great deal of attention to organizational matters: the formulation of a plan for continuous rat elimination, the preparation of resolutions to be passed by local soviets, and the creation of interdepartmental committees. Also, he discussed in detail, the organization and execution of practical measures under operating conditions.

The conference participants who took part in the discussions remarked that the disinfection service of the RSFSR was still not fully provided with disinfection materials, apparatus, equipment, and transportation. They noted that the Main Pharmacy Administration, Ministry of Public Health RSFSR, and its local departments do not satisfactorily fulfill their obligations in regard to supplies for local public-health organs, and that the local public-health officials do not allot the necessary appropriations.

The participants likewise pointed out that, in some oblasts, the sale of disinfection materials to the public through the pharmaceutical network is not adequately organized, so that the public is deprived of the possibility of participating in mass prophylactic disinfection measures. They brought out the fact that some of the sanitary-antiepidemic and disinfection institutions are located in unsuitable quarters. They emphasized the necessity of raising the level of training for cadres of intermediate medical workers in the disinfection service. Finally, they pointed out the insufficient participation of the therapeutic-prophylactic [medical] network in carrying out sanitary-antiepidemic measures.

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The following men took part in the discussion of the problems enumerated above: Vyatkin, from the Gor'kly Oblast Sanitary-Epidemiological Station; Osokina, Epidemiological Station; Tret'yakov, Ryazan' Oblast Sanitary-Epidemiological Station; Tret'yakov, Ryazan' Oblast Sanitary-Epidemiological Station; Trofimova, Sverdlovsk City Disinfection Station; Nikayenko, Krasnodar Kray Sanitary-Epidemiological Station; Arfemov, Leningrad Oblast Sanitary-Epidemiological Station; and Ignat'ev, Voronezh City Disinfection Station.

The inadequate performance of the Central Scientific Research Disinfection Institute, Ministry of Public Health USSR, in working out scientific problems which have actual significance for practical antiepidemic work was discussed by Sokolovskiy of the Moscow City Sanitary-Epidemiological Station, Boyarinov of the Leningrad City Sanitary-Epidemiological Station, Voronin of the Gor'kiy City Disinfection Station, and Tylyudina of the Chuvash ASSR Sanitary-Epidemiological Station.

It was noted that methods for laboratory control of the quality of disinfection, and work on the writing of instruction bulletins on methods to be used in the continuous rat-elimination program are being developed extremely slowly. The work plans of the institute make no mention of methods of disinfection for such diseases as rabies, trachoma, or helminthiases. Apparatus and equipment are being perfected too slowly and new types are not being developed fast enough.

The Disinfection Division, Ministry of Public Health RSFSR, was subjected to justified criticism. Murav'yev, deputy chief of the Main Sanitary-Antiepidemic Administration, Ministry of Public Health USSR, emphasized that the sanitary-antiepidemic organizations, in order to carry out the important tasks assigned to them by the party and the government in regard to the prevention of infectious diseases, will need to change the direction and style of their work, and will have to shift from "fire-extinguishing" methods to well planned work.

In regard to training cadres, which is one of the most important measures for improving the quality of disinfection work, Murav'yev pointed out that an order of the Ministry of Public Health USSR will help to systematize the training and advancement of physicians specializing in the sanitary-antiepidemic field.

Murav'yev emphasized that there is still no clear-cut structure in the organization of prophylactic disinfection work and that there is discord between the disinfection divisions and the prophylactic disinfection departments. Murav'yev stated that the chief physicians of the sanitation-epidemiological stations have not taken control of disinfection work.

In regard to the importance of developing scientific work on subjects pertaining to disinfection, Murav'yev remarked that there is still no satisfactory connection between theory and practice. The Central Scientific Research Disinfection Institute, Ministry of Public Health USSR, he said, must soon make public new methods and issue a single instruction plan for control.

The conference proposed a series of measures concerning the strengthening and development of the disinfection service of the RSFSR.

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