

CENTRAL INTELLIGENCE AGENCY

INFORMATION REPORT

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(FOR KEY SEE REVERSE)

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SOURCE:

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1. I believe that the governmental body responsible for collection of vital health statistics in the USSR was the Ministry of Health. Collection of statistics was done through normal public health channels (the agencies concerned being, in ascending order, RayZdrav, GorZdrav, OblZdrav, the republic Ministry of Health, and the all-union Ministry of Health. I am inclined to believe that there were no public health statistics readily available in the USSR except for birth and mortality statistics published periodically in various Ministry of Health publications which were on sale in bookstores and sent to subscribers. These publications included Sovetskaya Meditsina, a weekly (?), and Meditinskiy Rabotnik, also a weekly (?). I consider such published statistical data, especially mortality rates, unreliable; I think the mortality rate in the USSR is much above the official figures.
2. The two diseases of national significance in the USSR were TB and VD. TB was more common in southern areas and VD in northern areas, especially among the minority groups and in large seaports, such as Arkhangelsk. Diseases of regional character were:
 - a. Botulism, in the Turkmen SSR
 - b. Trachoma, in Nanaysk National Okrug
 - c. Lupus (lupus ulcus, lupus vulgaris), in Irkutsk and Yakutsk oblasts
 - d. Ringworm, in Asiatic republics
 - e. Infantile paralysis, in Belorussian SSR and the western Ukraine

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3. Hamsters, Siberian marmots, and rats were carriers of bubonic plague. This disease still existed in southern Ukraine and the Siberian steppes. Extermination of hamsters and Siberian marmots was organized by regional fur procurement agencies (zagotpushnina), which at the same time utilized the furs of these animals. Extermination of rats was carried out by regional public health agencies (RayZdrav, GorZdrav, and OblZdrav). Such campaigns, however, were primitively organized, and the results were generally poor. Dogs and cats were carriers of various herpes, trichophytosis, and rabies (bolezni vodoboyazni). Horses were carriers of Siberian pest (sibirskaya yazva).

25X1A 4. The following types of immunization were given in the USSR on a national scale

- a. To all children: scarlet fever, measles, smallpox (repeated every seven years), and tuberculin vaccine (sic), which I believe was of either Swedish or Danish manufacture;
- b. Typhoid, paratyphoid (paratif), and cholera to adults. A vaccine called trivaktsina, containing immunization drugs against all three diseases, was used for this purpose;
- c. Tetanus, when required in individual cases. I never heard of any cases where inoculations given to the population were not effective. After World War II there were some rumors in Kherson that sometimes the doses of vaccine administered were too large, thus giving the disease to those vaccinated.

5. In general, the normal diet of a working man in the USSR was adequate neither in its caloric value nor variety. Although the workers' daily diet contained sufficient amounts of albumins, carbohydrates (uglevody), and starch, there was a constant lack of fats; this diet also included a great deal of bread (up to 800 - 1,000 gm), potatoes, cabbage, very little meat or fish, and still less fat. Butter, cheese, and milk were practically non-existent in the working-class diet. The bad effects of such an insufficient diet were clearly to be seen in rather widespread cases of anemia. Irregularity of meal-times was also detrimental to workers' health. Usually both husband and wife worked, and there was not enough time to prepare even a decent breakfast. Lunch, eaten at work, usually consisted of a crust of black bread with some margarine, or boiled potatoes. The only substantial meal was dinner, but even then there was not sufficient time to prepare it properly, since with so few canned goods cooking required time.

- a. Rationing of food products was discontinued in 1948, and since that time no foods were rationed.
- b. Sanitation inspectors (saninspektor), attached to rayon and city public health offices, saw to the purity and sanitary condition of foods. This control, however, especially in the rural regions and small urban communities, left much to be desired. Food inspection of stores and public markets was done in an ineffective, superficial way, if at all. Often the inspectors simply took their weekly fees (bribes) from stores and market traders, and let it go at that. I assume that, in the large urban centers like Moscow, Leningrad, and Kiev, sanitation control was much more thorough.

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6. National control of potency, production, distribution, and standardization of the quality of drugs was supervised by the Chief Pharmaceutical Directorate (Glavnoye Aptekopravleniye) of the Health Ministry

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- a. Although there was Soviet penicillin in the USSR, production could not satisfy requirements. Considerable quantities of penicillin were imported, [redacted] from East Germany, Hungary, and probably Czechoslovakia. In the years immediately following World War II, I saw a great deal of penicillin which had been manufactured in the US and England.
- b. I never saw streptomycin in the USSR but heard that this drug was also imported from the West.
- c. I believe that raw quinine was also imported, most probably from Indochina.
- d. All antibiotics were usually in short supply. The quality of Soviet-made manufactured drugs and medical supplies was quite adequate, although packaging was not always handy or attractive.

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7. I am inclined to believe that provisions for industrial hygiene in the USSR were taken seriously and that much was done in this respect. Several large medical institutes, such as those in Moscow, Leningrad, Kiev, Novosibirsk, and Sverdlovsk, in addition to medical schools, had special sanitation-hygiene schools (Sanitarno-Gigiyenicheskiy Fakul'tet) which prepared men who would be qualified in industrial sanitation, hygienic, and prophylactic service. Graduates of such schools were not granted the right to practice medicine in the USSR nor were they employed as physicians in hospitals, clinics, or sanatoriums; their activity was restricted to the enforcement of sanitary, hygienic, and safety measures in all kinds of industrial installations. Normally every large plant, factory, and industrial installation in the USSR, depending on its size, had a sanitation office headed by such a sanitation expert, who, in smaller plants, doubled as head of the plant's dispensary. In larger factories the dispensary was headed by a practicing physician (medical doctor).
8. As far as I know, the only non-governmental organization for health and welfare in the USSR was the Red Cross and Red Crescent Society. I think even this society received some subsidy from the government; its annual membership fee was 2.40 rubles. I believe the society's main task was the enlightenment of the population in regard to hygienic and sanitary rules, prevention of accidents, and the fight against TB. This was done by means of public lectures, popular publications, distribution of leaflets, and the preparation of posters. One practical help rendered in peacetime by this society consisted in administering tuberculin immunizations to children. The society also came to the aid of the population in regions affected by natural disasters such as floods or earthquakes; they would send medical personnel, medicines, food, and clothing to those in need. In wartime, the society's activity was on a much larger scale. I remember that during World War II it organized quite a large number of its own evacuation trains, hospitals, and sanatoriums for wounded and sick soldiers. I do not know the size of the Red Cross and Red Crescent Society, but I believe that in Kherson [4640N-3235E] 10 to 15% of the entire population were members. This same figure could be taken as average for the entire urban population of the USSR. In rural areas the membership was much lower, not exceeding five per cent.

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