The International Scene

An American Anesthesiologist in Moscow

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I spent the month of September 1966 in Moscow. My visit was sponsored by the United States-Soviet Health Exchange and its main purpose was to observe the postoperative analgesia method advocated by Petrovsky and Vefuni. The Russian Ministry of Health gave me unrestricted access to clinical and scientific medical institutions, an opportunity I put to use by working for periods of three or more days in several of the leading hospitals, as well as visiting libraries and research institutes. A little knowledge of Russian, together with fluency in French and German, enabled me to dispense with an official interpreter and to obtain an unusually intimate view of medical conditions and opinion.

I encountered much kindness, particularly when my American nationality was known, and gathered an impression of considerable friendliness to the United States, of cordiality verging on exasperation with China, and of indifference to the problems of emerging countries. Several acquaintances emphasized that things were much better than under Stalin, and younger people especially were explicitly more intent on bettering their own conditions than those of other nations. I saw not a single portrait of Stalin; his name has been erased from the map and is still recalled with fear, although many credit him with having "done some good things too."

Anesthesiology Training and Research in the U.S.S.R.

Earlier visits by American anesthesiologists are well remembered, but there have been many developments in the intervening five or six years. Considering that the decision to create the specialty and to train 15,000 anesthesiologists was taken only ten years ago, the Soviets have made substantial progress. There are now 2,000 members of the U.S.S.R. Society of Anesthesiologists, of whom 220 are in Moscow.

The training of these specialists is uneven. Those destined to practice in remote areas are sent for six months or a year to a hospital department in one of the big cities. Two-year, renewable appointments as "Ordinator" are available to those desiring a lengthier experience. Recognition as a specialist depends on such practical work: an examination or diploma in Anesthesiology does not exist. Speciality practice as such does not bring remuneration above that of a general practitioner, whose earnings amount to about $90 a month, increasing to $100 after five years, and $110 after ten years (officially, 1 ruble equals 1.10 U. S. dollars). These rates are for a 6½ hour day. A doctor can supplement his income by working additional hours at other clinics. A 15 per cent bonus is paid in "dangerous" specialties, such as radiology, and an attempt is being made to have anesthesiologists included in this category in virtue of "prolonged exposure to noxious fumes." The formal education of a general practitioner, following ten years of elementary school, lasts six years.

The only avenue to a higher salary as an anesthesiologist is through study for the Doctor of Medical Science (D.M.S.) degree bestowed by the U.S.S.R. Ministry of Health. This degree can be obtained in any of the recognized clinical specialties or in one of the basic medical sciences, and certifies a fully-trained academic specialist. Admission to such