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**Comments on the Article,
*Combating Venereal Diseases as an Instrument
of Politicised Medicine. An analysis of the example
of the Soviet Occupation Zone in Germany,
the German Democratic Republic, and the Polish
Peoples' Republic* by Marcin Orzechowski,
Maximilian Schochow and Florian Steger**

The publication of articles by F. Steger, M. Schochow, M. Orzechowski¹ and I. Lipša² in the last two issues of the journal on the control of venereal diseases in the GDR, the Polish People Republic (PPR) and the Latvian SSR made it possible to expand joint academic interdisciplinary (historical, medical and socio-anthropological) research on this topic in four universities in Germany, Latvia, Lithuania and Estonia. Rīga Stradiņš University Institute of the History of Medicine (Latvia) and the Institute of the History, Philosophy and Ethics of Medicine at the University of Ulm (Germany) are the partners of the project “Politicised medicine in Eastern European dictatorships”. At the beginning of 2020, a pilot project was prepared and approved for a grant at the Baltic-German University Liaison Office – an international organisation with the aim of facilitating the scientific cooperation and

¹ Florian Steger & Maximilian Schochow, “Closed Venereology Wards in the German Democratic Republic,” *Acta medico-historica Rigensia* 12 (2019): 67–91. Marcin Orzechowski, Maximilian Schochow & Florian Steger, “Combating venereal diseases as an instrument of politicized medicine. An analysis on the example of the Soviet Occupation Zone in Germany, the German Democratic Republic, and the Polish Peoples’ Republic,” *Acta Medico-Historica Rigensia* 13 (2020): 58–82.

² Ineta Lipša, “Categorized Soviet Citizens in the Context of the Policy of Fighting Venereal Disease in the Soviet Latvia from Khrushchev to Gorbachev (1955–1985),” *Acta medico-historica Rigensia* 12 (2019): 92–122.

the academic exchange between Germany and the Baltic States. This made it possible to expand the geography of the study, complementing the initial partnership between Latvia and Germany with academic medical historians from Estonia and Lithuania. The Covid-19 pandemic has forced a significant adjustment to the project. Individual meetings were cancelled, the possibility to work in archives and conduct interviews was severely limited, reports of initial research results and discussion from the panel form of the 47th Congress of the International Society of the History of Medicine were moved to webinar platforms.³

Nevertheless, in August 2020, a face-to-face meeting of all project participants took place, which confirmed the prospects of the study, the possibility of expanding it and attracting new partners from both Eastern and Western Europe. During the meeting, new, still undeveloped aspects and directions of this interdisciplinary research were discussed. For the Latvian partnership in the project, it means synchronisation and joint research with partners from the University of Ulm under the guidance of Professor Florian Steger, with the research that had previously been independently conducted by *Dr. hist.* Ineta Lipša from Latvia.

For the completeness of the study, the historical and medical aspects are important. In this context, it is of interest to analyse the articles published on the research topic before 1991. Among them there are “well” edited transcripts of speeches by the top echelon of leaders of the Ministry of Health of the Latvian SSR on this issue. Possibly, short speeches and speech abstracts at professional conferences of practitioners – dermatovenerologists, as well as their medical articles in professional publications during the period under study could remain unnoticed. In addition, there were numerous methodological recommendations and clarifying circulars of the Ministry of Health and the Ministry of Internal Affairs of the Latvian SSR for a limited number of users.

Of particular interest is the bibliographic index of the chief specialist in dermato-venereology at the Ministry of Health of the Latvian SSR, chief physician of the Republican Dermatovenerologic Dispensary, Professor Alfrēds Miltiņš (b. 1939).⁴ For a long time, the history of his spe-

³ 47th Congress of the ISHM. <http://ishm2020.rsu.lv/news/line-lectures-politicized-medicine> [retired 17.11.2020].

⁴ “Profesors Alfrēds Miltiņš: biobibliogrāfiskais rādītājs” (Rīga: Latvijas Universitāte, 2000). <https://dspace.lu.lv/dspace/handle/7/50100>, [retired 17.11.2020].

ciality in Latvia has also been in the sphere of his interests. He published several articles, such as “Venereal diseases and venerology in the bourgeois Baltic States”,⁵ “The history of the development of the dermatovenerologic department in Soviet Latvia”,⁶ etc. The archival sources discovered and introduced into scientific circulation make it possible to continue and expand research on the topic without ideological connotations, which was not possible under the conditions of the censorship of that time and was often determined already in the title of the article.

Historical statistics on the incidence of venereal diseases in Latvia during the study period will provide an evidence-based clarification and expand the already summarised data of the Ineta Lipša study on the ideological practice of controlling the spread of venereal diseases, as well as identification and treatment of patients with the said diseases within marginal and categorised groups. Such statistics were collected by the structure of the Ministry of Health of the LSSR – the Republican Bureau of Medical Statistics, but until 1967 – by the Scientific and Methodological Office of Sanitary Statistics of the Pauls Stradiņš Republican Clinical Hospital. The summarised information was published annually in a limited edition under the title “The main indicators of health care development in the Latvian SSR”, with the stamp “for official use” and assigning a unique number to each copy. For the reasons of secrecy or the lack of demand after 1991, these materials have been lost, but from time to time it is possible to find an individual copy of some year.

At the moment, 12 publications have been identified for the period from 1962 to 1989, mainly for the last decade of the period. All of them have a section on statistics of venereal diseases, in which the following statistical data have been annually summarised: the number of beds in dermatovenerologic dispensaries, the number of dermatovenerologists in absolute numbers and per 10,000 of the population, the availability of dermatovenerologists for the urban population in urban outpatient polyclinic institutions per 10,000 of the population, the incidence (separately) of syphilis and gonorrhoea per 100,000 of the population in the seven largest cities of Latvia and all administrative regions. Annually, a special table with

⁵ A. P. Miltinsh, “Venericheskie zabolevanija i venerologija v burzhuaznoi Pribaltike” in: *Voprosy mediciny i biologii Pribaltiki*, (Tartu, 1977), 71–77, 127

⁶ A. P. Miltinsh, “Iz istorii razvitiija dermatovenerologičeskoi sluzhby v sovetskoj Latvii” in: *Iz istorii mediciny*, (Riga, 1984), 14: 74–81.

the main indicators of the dermatovenerologic department of the republic in relation to control of venereal diseases was published, in which venereal patients were indicated (separately syphilis and gonorrhoea) both identified during professional examinations, and patients with gonorrhoea identified by the obstetric-gynaecological department as a percentage of all female gonorrhoea. In a separate table, there are epidemiological statistics on the detection of sources of infection in venereal patients in % and the number of examined contact persons per patient with syphilis and, separately, with gonorrhoea. The current epidemiological department for identifying contacts of patients with Covid-19 allows us to form a view of the work of epidemiologists-venereologists of that time, but does not disclose the expanded mechanism of repressive measures used at the government level to identify contacts and control the spread of venereal diseases in the republic.

For the development of the topic of politicised medicine of particular interest in these annual statistical collections is the descriptive introductory abstract part of the publication signed by the Minister of Health or his deputy, which always emphasises the improvement of indicators compared to the previous year, but also constantly points to the shortcomings of the efficiency of venereal department work and interaction with law enforcement bodies. In this regard, a fragment from the statistical compilation for 1977 is illustrative:

“We have improved and are constantly improving our interactions with law enforcement bodies in the field of control and prevention of venereal diseases. However, it is unacceptable that last year on the part of the law enforcement bodies of Riga, the activity of delivering persons leading an immoral and parasitic lifestyle to the special-regime dermatovenerologic dispensary decreased, it was reduced by one third. It is our duty, using the accumulated experience, to mobilise all forces in the field of control of venereal diseases and to significantly improve the results achieved. I am sure that on the part of the local Soviet and party structures, the Ministry of Internal Affairs, the Prosecutor’s Office and law officers, we will meet with full understanding and proper activity in our, I emphasise, joint work.”⁷

⁷ Osnovnye pokazateli razvitiya zdavoohraneniia Latvijskoi SSR v 1977 godu (statisticheskie materialii). (Riga, Ministerstvo zdavoohraneniija Latvijskoi SSR, 1978), 29.

We dare to assume that similar statistical compilations existed in all 15 republics of the USSR. Moreover, it is possible that the list of questionnaires for collecting statistical data was sent to all republican ministries of health from the USSR Ministry of Health and later in the form of a statistical compilation for the reporting period was sent to Moscow to summarise medical statistics for the USSR. This is indicated by the comparative data published in the compilations of the Latvian SSR on individual nosologies in all republics of the USSR. Therefore, a medical statistics component in regard to venereal diseases can expand the design and geography of the study.

The study of case histories of individual patients with venereal diseases is unlikely due to the limited retention period of such documents in medical institutions and the numerous reforms of health care systems carried out after 1991, as a result of which many of the former health care facilities were eliminated, restructured or merged with other medical institutions. It seems more realistic to conduct interviews with now retired doctors, dermato-venereologists and responsible officials of the Dermatovenerologic Department of the Latvian SSR, such as Professor Alfrēds Miltiņš and others. German colleagues succeeded in conducting anonymous interviews even with former patients and nurses of the closed venereal disease departments of the GDR, performing subsequent qualitative analysis of the data received.⁸ In recent decades, “*Nacionālais Apgāds*” has regularly published memoirs by former doctors. Among them is the book by Dzidra Branta (1927–2019), Professor, Head of the Department of Dermatology and Venereology of the former Riga Medical Institute (now Rīga Stradiņš University).⁹ This memoir source has already been successfully and illustratively used by the researcher Ineta Lipša in her scientific publication.

⁸ Florian Steger & Maximilian Schochow, “Closed Venereology Wards in the German Democratic Republic,” *Acta medico-historica Rigensia* 12 (2019): 69.

⁹ Dzidra Branta, *Atmiņas un apcere* [Memories and reflection] (Rīga: Nacionālais Apgāds, 2007).

The case of Soviet Lithuania

The critical historiography of the Soviet period in Lithuania is still rather poorly developed. This is possibly due to Soviet period is relatively recent and it lacks critical historical research. The second problem is determined by the specifics of the research area. Until the last decades of the twentieth century, professional doctors rather than historians mainly carried out research on the history of medicine in Lithuania. The aim of such research was usually to describe the institutional development of the particular department or clinic. However, critical attempts to assess the developments of the Soviet period, and even more so the social aspects of this field, are hardly reflected in these studies.

The last problem is already ideological. The health care system that existed in the post-war period was presented in public discourse as the best and beyond any criticism.¹⁰ Already in the years of independence, the first exceptions appeared. The insights of the hygienist Romualdas Gurevičius should be considered as the first critical study regarding social medicine in Vilnius during the Soviet period.¹¹ Another successful and comprehensive study of Soviet psychiatry is the monograph “Vasarnamis” written by the historian, Tomas Vaisėta. The paper discusses in detail the highly politicised Soviet psychiatric system that operated in Lithuania from 1945–1990.¹²

In the historiography of the Soviet period, the issues of venereology are not discussed in the works of the doctors themselves. Research on the historiography of the independent Lithuania on this topic has not been detected, but a number of stories about the methods of forced treatment and upbringing in the Soviet period can be found in popular spoken history.

According to historian Algirdas Jakubčionis, during the Soviet era, you could not get a driving licence, get married or work without a doctor. You had to not only take your identity documents to the marriage hall, but also a medical certificate stating that you were healthy.¹³

¹⁰ Gurevičius Romualdas, *Socialinės Medicinos disciplinos evoliucija Vilniaus universitete. Higienos Mokslui lietuvoje – 190 metų*, Vilnius, 1997, p. 56.

¹¹ *Ibid.* 53–57.

¹² Vaisėta Tomas, *Vasarnamis*. 2018.

¹³ *Prievarta sovietinėje medicinoje: liginėse kentė disidentai, alkoholikai ir lovelasai* <https://www.tv3.lt/naujiena/lietuva/1044367/prievarta-sovietineje-medicinoje-liginese-kente-disidentai-alkoholikai-ir-lovelasai>

According to the urologist, Balys Dainys, the state interfered in the personal lives of certain groups of people monitoring when and with whom they made love, as well as persecuting those who were libertines in their sexual life. Everything, according to the professor, was performed due to the noble goal - the desire to eradicate the nasty venereal diseases that spread in some places in the Soviet Union like forest fire.¹⁴ However, we have very fragmentary data which are not enough to describe the incidence of venereal diseases. Janina Stefanija Vasilavičienė, Head of the Department of Skin and Venereal Diseases, states that up to 700 people became ill with syphilis in Kaunas in the 1970s.¹⁵ That would be approximately 192 cases per 100,000 population (1978 data).

“In around 1955–1965, a secret decree was passed on the prevalence of venereal diseases. With the help of medics, militiamen and prosecutors, the order was given to catch anyone who visited the doctor with syphilis or gonorrhoea,” said states Professor Balys Dainys. He also added that soviet citizens, who were suffering from venereal disease, were often disclosed to the entire work team and had to indicate their own sexual contacts.¹⁶

Certain social groups received extraordinary attention from the government. According to Algirdas Jakubčionis, some sub-cultures not beloved by the government were punished by authorities being examined and detained on the suspicion of having venereal diseases. Hippies were often transported to a hospital for a venereal disease check. It is hard to say whether it was for a real health check or just to humiliate them in public.¹⁷ The rather flexible definition of sexual offences at the time created the preconditions for detaining and punishing citizens for supposedly immoral sexual activity. Article No. 239 of the Criminal Code of the Soviet Socialist Republic of Lithuania of the year 1962 “On the possession of slums and prostitution” defined that “the possession of slums for gambling, sexual lewdness or

¹⁴ Prievarta sovietinėje medicinoje: ligoninėse kentė disidentai, alkoholikai ir lovelasai <https://www.tv3.lt/naujiena/lietuva/1044367/prievarta-sovietineje-medicinoje-ligoninese-kente-disidentai-alkoholikai-ir-lovelasai>

¹⁵ Gydytojos patirtis: prievartinis gydymas ligų plitimo nestabdo. <https://www.diena.lt/naujienos/sveikata/sveikata/gydytojos-patirtis-prievartinis-gydymas-ligu-plitimo-nestabdo-912031>

¹⁶ Prievarta sovietinėje medicinoje: ligoninėse kentė disidentai, alkoholikai ir lovelasai. <https://www.tv3.lt/naujiena/lietuva/1044367/prievarta-sovietineje-medicinoje-ligoninese-kente-disidentai-alkoholikai-ir-lovelasai>

¹⁷ *Ibid.*

drug abuse, as well as prostitution services, is punishable by up to five years' imprisonment".¹⁸ In practice, the definition of "slum" was applied to many social meeting places which fell out of favour of the government. "I was taken to a party by some friends. It was only later that it became clear that the apartment had been declared as a slum. During the party on Bokšto Street, the militia broke into the apartment and took everyone who was there, and closed it. Nobody was interested in whether you were sick or not," stated Vilnius citizen Gintaras.¹⁹

According to the psychotherapist and sexologist, Viktoras Šapurovas, in Vilnius,

"there was a dispensary of Venereal diseases on Bokšto Street. If you get sick or someone says you may have been infected, you won't get out because there is a militia post there. You are locked up there, no one listens to your wishes and they treat you until you are healed."²⁰

Article No. 61 Of the Criminal Code of the Soviet Socialist Republic of Lithuania of the year of 1978, among the coercive educational measures applied to under-aged persons, also provides "the transfer of a minor to a special treatment-education or upbringing institution for children and adolescents" (Item No. 8).²¹ The vast majority of the points in Articles 59 and 60 of the Code relating to involuntary treatment are applicable to mental illness or alcoholism. Unfortunately, the mentioned law does not define what other crimes may be covered by the above-mentioned measures, so we cannot answer whether the such measures were also applied to the prevention of sexual crimes.

Although the fact of involuntary treatment of venereal diseases is widely known in oral history, and it almost became a public secret, unfortunately we cannot answer the question as to whether there were any special closed type venereal facilities in Lithuania that would be analogous to GDR

¹⁸ Lietuvos Tarybų Socialistinės Respublikos Baudžiamasi kodeksas, str. 239, 1962, p. 118.

¹⁹ Tada ir dabar. Priešnuodis nuo masturbacijos, gėdingiausia poza ir seksualios paleistuvės. <https://www.delfi.lt/multimedija/tada-ir-dabar/tada-ir-dabar-priesnuodis-nuo-masturbacijos-gedingiausia-poza-ir-seksualios-paleistuves.d?id=69567416#>

²⁰ *Ibid.*

²¹ Lietuvos Tarybų Socialistinės Respublikos baudžiamasis kodeksas, str. 61, 1978, pp. 60–61.

or Soviet Poland. The currently available sources do not allow us to answer the other questions such as, by what other partly social means venereal diseases were treated and how the work was organised in such facilities, or whether the alleged diagnosis of venereal diseases was abused. Because of this, we believe that this new issue could be of great interest and should be developed in the future.

The case of Soviet Estonia

We have data on the incidence of sexually transmitted diseases in the Estonian Soviet Socialist Republic from 1945 to 1947.

In 1945, 623 people became infected with syphilis, and 2,550 people with gonorrhoea. In 1946 – 1,433 and 4,140, respectively, while in 1947 – 664 and 1,636 people.

In 1946, the contracting of sexually transmitted diseases increased sharply in rural areas. 213 beds were in use. Many sources of infection were outside of Estonia.

Preventive examinations were carried out on 41 123 persons (in schools and communal flats), with 10 155 of them in Tallinn. Additionally, all persons working in catering and communal services, staff of children's and medical institutions were examined by a specialist each month, and pupils of children's institutions were examined twice a year.

An interdepartmental committee consisting of representatives of the Health Ministry, the Ministry of Internal Affairs, the Baltic Navy and the 10th Army was created. The committee jointly developed measures against sexually transmitted diseases. The general administration of pharmacies also launched the sale of personal preventive packages.

Venereological institutions in Tallinn and Tartu opened prevention stations that worked all day and night. Physicians working in other specialities such as district physicians, paediatricians, gynaecologists and others were also constantly recruited to help combat sexually transmitted diseases.

In the struggle against sexually transmitted diseases, the main task of the Stalinist post-war five-year plan was to decrease the number of cases to the pre-war level and lower. Attempts were made to conduct sanitary education as broadly as possible. In 1946, 189 lectures were held over Estonia, with 17 of them on the radio, and 1150 talks in the physicians' own institutions – the number of listeners was more than 10 000. The Clinic of Sexually

Transmitted Diseases, in cooperation with the Sanitary Education Centre, issued and distributed two brochures with a print run of 10,000 copies – *Syphilis* and *Gonorrhoea*. In the first half of 1947, venereologists delivered 982 talks in their own institutions and 109 lectures outside the institutions, with 13 of them on the local radio. (The review is based on data from: Ludmilla Nurmand. *Suguhaiguste esinemine ja nende vastu võitlemine Eesti Nõukogude Sotsialistlikus Vabariigis* [Occurrence of sexually transmitted diseases and their fight against them in the Estonian Soviet Socialist Republic. Dissertation submitted to Tartu State University for obtaining a scientific degree of Candidate of Medical Sciences]. Tartu, 1949.)



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