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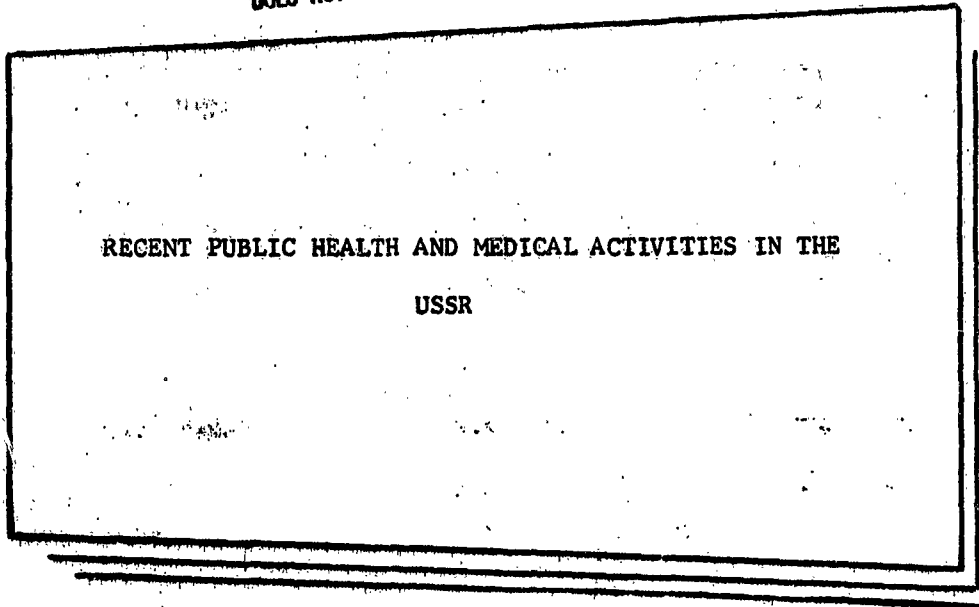
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RECENT PUBLIC HEALTH AND MEDICAL ACTIVITIES IN THE USSR

Following are the translations of several articles from Russian-language periodicals, 1962-1963, on the specific subjects indicated in the table of contents. Complete bibliographic information accompanies each article.

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ANNIVERSARY MEETING OF THE
VITAMINOLOGY RESEARCH INSTITUTE
OF THE USSR MINISTRY OF HEALTH

[Following is a translation of an article by D. Ye. Rosenberg in the Russian-language periodical Sovetskaya meditsina (Soviet Medicine), Moscow, No 9, 1962, pages 151-152.]

The regular annual meeting of the Vitaminology Research Institute of the USSR Ministry of Health which took place in Moscow in 1961 coincided with the 25th anniversary of the founding of the only vitamin control station in our country under the People's Commissariat for Health of the USSR. It served in 1954, as the nucleus for the current Vitaminology Research Institute, created as a guiding and coordinating center for research in this field. The meeting was attended by 300 administrative, research and practicing public health personnel, leaders in medicine and biology and other specialists, including 100 representatives of corresponding research institutes in the Union republics.

In welcoming the delegates to the anniversary meeting in the name of the USSR Ministry of Health, chief USSR Sanitary Inspector T.A. Nikolayeva stressed the fact that the meeting was being held at a significant time when all the efforts of the Party and the government were directed towards an undeviating improvement in the living conditions

and welfare of the Soviet people. 7

The institute is the chief institution dealing with problems in vitaminology; one of its principal duties is that of coordinating research in the field of vitaminization which is now being done at numerous research institutions in our country. The institute holds yearly meetings on research topics; at the second session in 1959 there were 40 papers presented with 10 by scientists from remote parts of the country, at the third meeting in 1960 there were 80 papers and at this one 110 with approximately 70 being presented by vitaminologists from such major centers as Leningrad, Kiev, Khar'kov, Minsk, Baku, Dushanbe and others.

A paper on "Twenty-five years of research and practice at the Vitaminology Research Institute of the USSR Ministry of Health" was read by Professor B.A. Lavrov, director of the institute and active member of the USSR Academy of Medicine. He described the activities of the institute, from the founding of the vitamin control station up to the present day, gave a detailed account of research done during all these years and stressed the importance of the problems now facing vitaminologists in new research done during the successive years of the current decade.

The paper read by A.O. Matanson, assistant director of the institute, dealt with the planning and coordination of research on problem No. 11 delineated by the USSR Academy of Medicine ("Vitamins and their mode of action").

All the papers and reports were followed by discussions in which

many representatives of research institutes in Moscow and outlying areas took part.

In a resolution adopted by the division of biochemistry and physiology of vitamins it was pointed out that the meeting had heard interesting new data on the metabolism of vitamin B₁, nicotinic acid and the mode of action of vitamin A. A general discussion was given of problems relating to discovering the effect of bioplavonoids and the vitamin P-ascorbic acid complex on the body. Of considerable interest are data on modifications in vitamin metabolism caused by ionizing radiation and the interaction of vitamins and drugs.

The meeting approved studies now being done on the functional relationship between the different vitamins and recommended further expansion of the study in order to take in the effect of large doses of vitamins on the animal body. However the assembly felt that there is still not enough research being done on the basic problem of modern vitaminology: the biological mode of action of vitamins, particularly vitamins A, D, E, K, P and others. Insufficient attention is also being paid to the relation between the trace elements and vitamins.

The session recognized that a pressing current problem is that of determining optimal therapeutic doses of vitamins in treating different experimental pathological conditions. At the same time it would be practical to extend studies on the vitamin requirements of the animal organism during adaptation to different environmental conditions.

to increase compensatory reactions and the body's capacity for reaction (development of immunity, desensitization, etc.); d) side effects of prolonged usage of large doses of vitamins and the establishment of correct dosages; e) problems in polyvitamin therapy.

With regard to "Vitamins and nutrition" the meeting pointed out the greater amount of work being done on vitamin requirements of the different segments of the Soviet public and the effect of production factors and occupational hazards (underground work, chemical industry, machinery manufacture, etc.). At the same time the resolution points out there has been an increase in the number of works on the vitamin requirements of collective farmers.

The meeting recommended a further intensification of research on the vitamin content of products in different areas of the country. A more extensive study should be made of the use of vitamins as preventives in association with different occupational hazards. It would be desirable to expand research on the addition of vitamins to different products. The meeting called attention to the necessity for modifying the doses of vitamins in preparations intended for prophylactic vitaminization. In the opinion of the meeting, the vitamin content of these preparations must conform to the standards for daily human vitamin requirements as established by the USSR Ministry of Health in 1960. The meeting recognized the necessity for requesting the USSR Ministry of Health to adopt measures for improving the quality of vitamin preparations.

In the meeting's resolution on methodological problems a point is made of the very little work being done in the methodological field. The development of theoretical and practical vitaminology requires, in the general opinion of the assembly: 1) continued work on improving methods for determining vitamins in biological specimens (blood, urine etc.) and in vitamin preparations; particular attention must be paid to methods for determining vitamin K and folic acid; 2) more extensive use must be made of modern methods of analysis: chromatography, polarimetry, spectrophotometry; more work must be done on developing microbiological assay methods for determining vitamins. There should also be further study on the spectral characteristics of different vitamins and their derivatives.

It was decided to request the problems committee of the Institute of Vitaminology to hold working sessions (symposia) during the interval between meetings in order to have a more detailed discussion of the different urgent problems in vitaminology, particularly the interaction of vitamins, the selection of criteria for vitamin requirements (the vitaminological analysis method), the study of vitamin metabolism and their use in diseases of the liver and stomach. It was decided to ask the medical councils of the ministries of health of the Union republics to set up special committees to coordinate research in vitaminology already being conducted in the republics and to establish contact with the problems committee of the USSR Academy of Medicine and the Institute of Vitaminology (Moscow).

The meeting decided to ask the Ministry of Health of the USSR to adopt measures to expedite the publication of a vitaminology journal in accordance with the resolution of the A,1-Union Conference on Vitamins (1958).

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PRACTICES IN THE TRAINING
OF PEDIATRIC PERSONNEL

[Following is a translation of an article by V.P. Spirina and A.P. Cherrnikova of the Pediatric Research Institute of the RSFSR Ministry of Health, Moscow, in the Russian-language periodical Voprosy Okhrany materinstva i detstva (Problems in Maternal and Child Welfare), Moscow, Vol 7, No 9, 1962, pages 67-71.]

The historical decisions of the Twenty-Second Congress of the CPSU stressed the important role of science in social development and in the development of communism in our country. One of the most important conditions for scientific progress is the presence of highly qualified scientific personnel. The problem of personnel training has been a focal point of the attention of the Party and government. The decree of the Central Committee of the CPSU and the Council of Ministers of 12 May 1962 entitled "Measures for improving the selection and training of scientific personnel" requires that this problem be solved with a greater sense of responsibility.

During the entire period of its existence (35 years) since its opening in 1927, the Pediatric Research Institute of the RSFSR Ministry of Health (Moscow) has been continuously and systematically training scientific personnel, both young and older scientists. During the past 15 years 12 doctoral and 39 candidate degrees have been granted at the institute.

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In comparing with what has been done, what is being done and future problems in developing the public health system, we can point out a number of essential features which determine success in the training of pediatric personnel.

Of primary importance for research work is the general philosophy of the scientist, his moral make-up and outlook; for this reason the institute devotes considerable attention to ideological and politically training for the trainees. Coworkers in research, members of the CPSU and non-Party figures participate systematically in seminars planned by the Party organization, take part in conferences on theory, and present papers on different problems in the philosophy of science.

Of the 78 members of the institute staff 58 are taking an active part in seminars dealing with problems in philosophy and natural science. Some section leaders and professors are doing work according to individual plans. A correct ideological and political training for personnel is particularly important since it is bound up closely with the development of qualities of profound and skillful research, and devoted struggle for the goal which is a constant motivation in seeking the new and in improving what already exists.

Another, no less important condition to be met in the training of scientific personnel is maintaining a close tie between the scientist and practice: if one is to improve what exists, one must know it very well, must be able to evaluate correctly the positive and negative aspects of current views on any problem and be acquainted

with current requirements in public health today and its direction for the future.

The connection with practice is maintained in the institute in different ways. Of considerable importance is direct participation in therapeutic and prophylactic work at those municipal and province institutions where research is being done (pediatric hospitals, polyclinics, nurseries, kindergarten-nurseries, kindergartens, day and boarding schools, orphanages, children's sanatoriums). At permanent base institutions where work has been done for a number of years the institute utilizes more than 600 beds. In addition, separate research projects and appropriate organization and therapeutic-prophylactic work is being done at so-called temporary bases where members of the institute staff have not worked for more than 2-3 years.

An acquaintance with the work of therapeutic and prophylactic institutions located in different cities and villages not only of the RSFSR but the entire Soviet Union is acquired by research workers when they are sent out to study the above mentioned agencies or to act as consultants in therapeutic questions. Out-of-town meetings held by the institute in different cities are also used for an exchange of information between research personnel and practicing physicians. For instance, there were 63 cases of special missions to 30 cities in 1961 and two out-of-town meetings (Yoshkar-Ola and Orel).

In addition to personal participation in the work of therapeutic and prophylactic institutions, research personnel of the institute provide

[correspondence consultations for physicians, analyze the developmental] histories of children in orphanages and the case histories of children in hospitals. These records which are continuously forwarded by the Ministry of Health from different cities in the RSFSR for analysis reflect to a certain extent the status and organization of medical care in the different localities.

The institute systematically conducts diversified pedagogical work on a public basis: courses, 10-day series, conferences, instruction "in the field". Workers in different branches of the public health service take advanced study - assistant directors of province pediatric agencies, chief pediatricians of the autonomous republics, provinces and cities, pediatricians from different therapeutic agencies, methodological specialists in physical education and exercise therapy. In 1961 eight different courses were held which averages 5 months and 10 days in length; there were 200 enrollees; 118 studied "in the field" (4 from the people's democracies) for from 1 to 3 months. Thus by using different connections with actual practice, research personnel of the institute supplement their knowledge of conditions in pediatrics on the spot and at the same time pass on research results to physicians for use in practice.

In order to improve the knowledge and development of the research man, practice must be combined with a thorough mastery of scientific literature for the institute assigns great importance to reading and library work. The more experienced staff members - the

Research directors and senior staff scientists - teach the beginners the correct way to work with scientific journals, collected papers, monographs and dissertations and give advice on compiling a card file, writing abstracts and making literature surveys on specific topics. The practice of discussions of abstract papers at methodological meetings within the sections and at institute conferences has justified itself. These meetings extend one's general outlook and improve written and oral analysis of material in the literature and this is particularly important for young research workers.

The use of scientific literature cannot be spasmodic but must be constant. At present each physician as well as the research worker must study in order not to lag behind the most recent achievements in diagnostic, therapeutic and prophylactic methods. A constant renewal of knowledge is essential for working in the institute clinics where new methods of treatment and diagnosis are being tested and research is being done on the pathogenesis of diseases.

In the training of your research personnel and graduate students a significant place is occupied by the work of the director with individuals. Each experienced researcher trains and teaches others, particularly the younger ones. The joint endeavor of the entire staff in the wards and laboratories creates an atmosphere of creative work, the group concentrates on finding the best solution for urgent research problems and the most rapid way of applying results in practice.

The training of research personnel cannot be dissociated from

every day practice and for this reason it is incorporated into the diversified activities of the institute; future candidates and doctors of medicine participate directly in therapeutic, pedagogic and methodological work, giving practical assistance to pediatric institutions of Moscow and other cities in the USSR.

Carrying out a topic assignment requires not only a preliminary study of Russian and foreign literature but zealous efforts in mastering the latest methods. The staff researcher studies scientific and diagnostic apparatus, the set-up and management of experiments, and, if need be, asks for advice or studies methods at other institutes.

As a rule, during the first year's work the young staff worker studies literature and methodology, takes his candidate admission examination, and does a little extracurricular research work. This period is used for improvement in diagnostic and therapeutic work, for participation in seminars with interns, and for teaching the subprofessional personnel of the clinics. As the year ends the institute evaluates the capacities of the young researcher, makes a collective judgment as to the level of his training, the degree of his interest in research and his participation in the common life of the institute. The results of this discussion are considered by the academic council and the administration in deciding the future fate of the research worker. If he is accepted as capable of research, he is given a research assignment which later is developed into his dissertation topic.

The rather wide range of research problems worked out at the

institute contributes to the all-round development of specialists. For many years the institute has dealt with problems in the organization of pediatric public health, the hygiene of children and adolescents, the morphology and physiology of childhood and the physical training and nutrition of children. In the clinical sections studies have been made of nonspecific diseases of the respiratory organs in infants and young children (chronic pneumonia and bronchial asthma), rheumatic fever, acute childhood infections and the neurotropic infections. The development at the institute of the ideas of such outstanding pediatricians as Professors A.A.Kisel' and A.A.Koltypin has had a positive effect on the conduct of all research and the training of young scientists. The training of the young worker in any department starts with problems in pediatric physiology, an acquaintance with the principles of sensible childhood nutrition and the principles of physical education for children. A study of the characteristics of the development and higher nervous activity of healthy children contributes to the development of medical thought, to an understanding of the child's reactions to different environmental factors and aids in discovering the pathogenesis of a disease and the mechanism whereby physiological functions are restored during convalescence.

In carrying out his assigned project the young scientist improves his skill in the organization and set-up of a scientific experiment and in clinical observation. An analysis of research results, their generalization and scientific conclusions are formulated

into a research report. This material is presented in papers at congresses, printed in periodical literature and serves as a basis for recommendations to practicing personnel (in the form of instructions or methodological memoranda). The results of years-long research are formulated in monographs, manuals, or collected papers on given topics. Yearly the institute deals with 60-70 topics many of which are given 2 years for study or are the logical extension of research from previous years. Each project is reviewed by the group more than once during its execution - at methodological meetings in the sections and in the laboratories. Criticism from his colleagues helps the author to find a correct approach in solving the assigned problem. The finished work is reviewed by staff research from other sections and then it is discussed and evaluated by the problems committee of the institute. Group discussion of research results improves the analytical thinking of the researcher and his ability to distinguish the main and essential from the subordinate. Even details can be of importance in the training of young scientists: during group discussion the staff researchers are urged to express their opinions with the older and more experienced adding to and, if need be, correcting them. The more important papers and articles are also subject to group discussion in the different divisions.

While constant improvement in medical qualifications, the expansion and intensification of general scientific knowledge and participation in all divisions of the work of the institute is a re-

requirement for the young research worker, one of the criteria for rating the work of the elder and more experienced staff members, division directors or laboratory chiefs is the degree of their participation in the training and instruction of young workers. Each candidate, in addition to his own research, must in some way participate in the training of his younger colleagues and do some basic teaching. Professors, M.D.s and division heads are in charge of the training of young scientists, supervise their candidate dissertation work and give advice in the preparation of doctoral dissertations. During the period 1959-1961 the institute supervised the candidate dissertation work of 15 staff members of the institute, 24 practicing physicians and researchers from other institutes.

Work on the dissertation is not the research worker's goal in itself: as a rule the dissertation is the logical outcome, a generalization of the work of a number of previous years but it does not come into being of its own inertia. After a preliminary study of some question, and being convinced of the importance of the assignment and the possibility of improved investigation, the group discusses a concrete plan for the dissertation project which is then approved by the academic council. Supervision is then maintained during the carrying out of the project with changes introduced if necessary and discussion held on the data obtained. Fragments of the work are published in the periodical press or given as papers at conferences or scientific meetings. This system of

preparing dissertations contributes to a more rational approach in conducting research, and to a certain degree disciplines the researcher and the entire staff.

Systematic supervision over all types of work makes possible an objective evaluation of each worker which is the basis for advancement of senior staff researchers and division and laboratory chiefs. During the last 3-4 years discrepancies in the rating of two junior research workers, one senior worker and one laboratory chief were established. The activity of a research worker is rated on the totality of data concerning his work. The best ones are given positions. The institute strives for a correct combination of experienced and young personnel. During the past 10 years retiring senior research members have been replaced by 20 young persons trained at the institute and 7 have been promoted to division and laboratory heads. In addition, 15 research scientists who had received the degree of candidate or doctor of medicine moved to other institutes or schools to accept positions as senior research assistants, instructional assistants, or department heads.

In addition to the above described system of training young personnel, the institute trains specialists through a 3-year post graduate course and a 2-year internship. Interns and graduate students have lessons according to special curricula. Graduate students are required to participate in research work. During the last 15 years 18 men have completed graduate studies and 1/4 have

had clinical internship. All graduate students, as a rule, have time to prepare their candidate dissertation. The institute has the opportunity to instruct a large number of graduate students. Considering the great range of basic divisions in pediatrics included in the institute, it would be possible to train research workers and practicing physicians in such specialties as pediatric roentgenology and pediatric pathomorphology. In addition, the institute can also train specialists in pediatric public health organization, pediatric physiologists, and specialists for prophylactic institutions (nurseries, orphanages, nurdery-kindergartens).

Group discussions of the training of research personnel, conducted periodically by the administration and public organizations, act as a deterrent to complaisance and make for prompt correction of errors.

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BASIC PRINCIPLES IN PROVIDING
POSTGRADUATE TRAINING FOR PEDIATRICIANS
IN MOSCOW PROVINCE

[Following is the translation of an article by Chief Pediatrician T.A. Grishina, Professor M.I. Olovkiy, and A.L. Strutsovskaya, M.D., of the Moscow Province Department of Health and the Moscow Province Clinical Research Institute, in the Russian-language journal Voprosy obshchey materinstva i detstva (Problems in Maternal and Child Welfare), Moscow, Vol 7, No 9, 1962, pages 72-75.]

The Communist Party and the Soviet government have constantly given enormous attention to problems in protecting the health of our country's children.

The decree of the Central Committee of the CPSU and the USSR Council of Ministers with regard to measures for improving medical care and public health and the program adopted by the Twenty-Second Congress of the CPSU confirm a new and significant expansion of the public health program.

Along with the extensive construction of new pediatric hospitals there is much to be done in training pediatric medical personnel and in providing advanced training for them.

Problems in postgraduate training for pediatric medical personnel in Moscow Province have been dealt with for a number of years. We have accumulated considerable experience which we would like to share through the pages of this journal.

Among the most pressing problems facing medical personnel in Moscow Province is that of a further reduction in infant morbidity and mortality. After taking into consideration existing medical institutions and those now under construction in the province, analysing the course of pediatric public health during recent years and, finally, evaluating the level of training of medical personnel involved in pediatric care, we have planned and carried out postgraduate training for these workers, introducing certain changes in form and methods as required by the current situation.

Problems of priority and frequency in postgraduate training for physicians have been met through the use of a card file compiled especially by the chief pediatrician which gives the age, length of service, different types of postgraduate training, etc.

The solution for all problems in the organization of pediatric public health, and the prevention and treatment of different types of pathology (both infectious and noninfectious) was provided by the joint efforts of the pediatric sector of the province public health department, and the obstetric, pediatric and infectious disease clinics of province institutes.

The principal types of postgraduate training for medical personnel in clinics are clinical internship, work assignments with instruction from 3 to 6 months, one-month courses, ten-day seminars on special problems, periodic seminars, clinical conferences with analysis of case histories and demonstrations of patients.

As experience has shown us, one of the most effective mass forms of advanced training including simultaneously a large number of medical personnel was the continuous province seminar. These were organized for medical personnel of different specialties (orphanage physicians, district and city pediatricians, physicians from children's clubs, school physicians, nursery physicians, nursery directors and nursery teachers).

The continuous seminars cover a period of 2-3 years. They meet once a month on specific days at clinics or other province institutions with a special program based on the field of specialization of the medical personnel involved.

In 1962 more than 300 persons participated in these seminars.

The province seminars enjoy great popularity among medical personnel of Moscow Province. Knowledge gained at the seminars on current topics in the student's specialty is passed on to personnel in outlying areas at conferences and seminars organized for them.

Special plans and curricula are compiled for each type of postgraduate training, depending on the specialty involved (district and city pediatricians, nursery physicians, directors of septic and infectious wards, teachers and trainers, lying-in staffs, sector physicians, feldshers, nurses etc.).

A large role in the training of personnel is played by the province consultative clinic. Of great importance are the meetings of the Moscow Province Pediatric Society and province conferences on theory and practice at which current problems in organization, and

disease prevention and treatment are discussed, starting with newborn pathology and ending with problems concerning day and boarding schools. There are usually from 200 to 300 present at these conferences.

Along with advanced training for medical personnel provided at clinics of province institutes, considerable work is being done toward a decentralization of this work. The practicality and necessity for decentralizing the training system in the province were dictated, on the one hand, by the numbers of medical personnel and, on the other, by the geographical scattering of pediatric institutions throughout the province. For instance, as of January 1, 1962 there were 1627 pediatricians, 6263 feldshers, 2163 nurses working in nurseries and children's institutions in the province. In addition, there were 424 therapists and 1391 feldshers in rural areas who also treat children.

It is natural that with such a large number of medical personnel in the province it would take decades to get them all enrolled in postgraduate training in the clinics.

In order to accelerate the process of systematic postgraduate training and even to have special refresher courses on different problems it was necessary to organize base hospitals serving from 5 - 8 districts each. These interdistrict hospital staffs included an interdistrict pediatrician and each base had attached to it specialists from pediatric clinics and the province consultative clinic; these latter attached specialists made 311 trips to the different localities in 1961.

Thus a system of decentralized training for personnel in Moscow Province has become possible. Pediatricians working in the interdistrict hospitals, including the interdistrict pediatricians regularly conduct periodic courses at province institute clinics without a break in their regular work. Since they are physicians with considerable practical experience, they are fully qualified for giving postgraduate training to medical personnel from the outlying districts.

The interdistrict hospitals have been conducting topical seminars and conferences for physicians and subprofessional medical personnel, work assignments have been reserved for physicians and feldshers, and they have made inspection tours and analyzed case histories.

Physicians of the interdistrict hospitals in conjunction with specialists from the province pediatric institutions travel out to rural areas where they provide consultation and practical assistance; there were 632 such visits in 1961.

The province has methods sections on pediatrics (in 42 districts) and sections on child training (22 districts).

The pediatric methods section includes a district or city pediatrician, the head of the pediatric association, the physician of the base nurseries, heads of polyclinic sections, the head of the infectious disease section, the pediatrician of the district or sector rural hospital, the district epidemiologist, a lawyer, etc. The chairman of the methods section is usually a district or city

pediatrician of the head of the pediatric association.

The training methods section includes nursery teachers, nursery directors and physicians as well as representatives of the Pediatric Association. The chairman of the training methods section is usually a teacher with special education and considerable experience.

The program of the methods section is usually drawn up for 6 months with consideration given to some special type of work and is discussed ahead of time at a general meeting of district pediatricians.

Meetings of a methods section usually take place once a month with extensive participation of medical personnel of the district. Here are discussed problems both of an organizational nature related to pediatric medical care and of a clinical character.

Considerable attention at these meetings is given to an analysis of the operation of pediatric institutions, to analyzing mortality cases, and to an exchange of progressive information.

The training methods section deals with providing supplementary training not only for nursery and orphanage personnel but for sector physicians and visiting nurses of polyclinics.

The work of the training methods section consists of an analysis of different types of pedagogical work in children's institutions.

During the past 3 years 295 pediatricians have had advanced training through work assignments in clinics including 28 rheumatic fever specialists, 20 phthisiologists, 61 heads of pediatric hospital departments, 40 heads of polyclinic departments, 12 rural sector

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During the past 3 years 235 pediatricians have had advanced training through work assignments in clinics including 28 rheumatic fever specialists, 20 phthisiologists, 61 heads of pediatric hospital departments, 40 heads of polyclinic departments, 12 rural sector

physicians, 67 pediatricians from lying-in hospitals and 7 physicians from other pediatric institutions. Twenty-eight persons finished their clinical internship; they are now working in different institutions in Moscow Province.

In 1961 88 pediatricians, 80 teachers and 60 school nurses and 121 nurses from lying-in hospitals enrolled in periodic courses without interrupting their regular work.

At the same time there were 416 medical employees who studied acute pediatric infections, tuberculosis, massage, gymnastics and exercise therapy at 10-day courses and seminars.

A distinctive school of postgraduate training for pediatricians was the analysis of case histories of dead children, particularly the still-born. At these discussion sessions all errors in diagnosis and therapy were analyzed. They attracted 528 pediatricians in the province.

In 1961 430 physicians, 573 feldshers and nurses took supplementary training at interdistrict centers.

Our experience has been used as a basis for postgraduate training for medical personnel in the province in subsequent years during which time particular attention has been given to those working in rural areas and to young specialists who have just finished school.

In conclusion we would like to point out that the constant improvement in the workers' welfare, better pediatric medical care and the coordination of measures for postgraduate medical training adopted by the pediatric sector of the Moscow Province health depart-

ment, by children's clinics and other province institutions, have not failed to be reflected in the constant decline in infant morbidity and mortality. For instance, infant mortality dropped by a factor of more than 3 during the period 1950-1961.

Much intensive work is still required to combat still births, infant diseases, pneumonia, gastrointestinal and communicable diseases (Botkin's disease, etc.) and to improve the physical development and training of children. This must be based on the general line of Soviet public health practice - on prevention.

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CSO: 1873-D

THE PUBLIC HEALTH SITUATION IN THE TATAR ASSR
IN THE LIGHT OF DECISIONS
OF THE 22ND CONGRESS OF THE CPSU

[Following is a translation of an article by R.Yu. Yarakhametova, Minister of Health of the Tatar ASSR, in the Russian-language journal Kazanskiy meditsinskiy zhurnal (Kazan Medical Journal), Kazan', No.5, 1962, pages 3-8.]

Concern for the public health has always been one of the main functions of the Party and the Soviet government.

At the 22nd Congress of the CPSU a program was adopted for developing a Communist society.

The socialist government is the only type of state which assumes responsibility for the maintenance and constant improvement of the public health.

The new program of the CPSU is a manifesto of profound humanitarianism. It systematizes a thought which penetrates the entire document: "In the name of humanity, for human welfare." Under communism this slogan is completely realized. And everything that progressive human spirits could dream of, becomes a reality.

Under communism all conditions will be created that are needed for better physical development and spiritual growth of all members of society. During the next 10 years the USSR will see a shift to the

6-hour working day with one free day per week or a 35-hour week with 2 free days while the 5-hour day will prevail in underground or hazardous occupations. The amount of leave time will be gradually increased to 3 weeks and then to a month. Even collective farmers will get paid vacations.

Living conditions will be improved markedly and the housing problem will be solved.

Children will be kept free in pediatric institutions at the public expense. In addition to current free medical care there will be free use of sanatoriums and free drugs.

All these and other measures proposed by the new program of the CPSU as the basis for extensive improvement in the public health reveal enormous opportunities for public health improvement in a communist society.

The radical changes which have occurred in our country under the Soviet regime have had most favorable effect on the state of health of the Soviet people.

As a result of increased material welfare and cultural level, and improved medical care in a historically short period our country has passed from a backward nation in sanitary affairs, from a country with a high incidence of death and disease, to a nation with a high level of public health and with the lowest death rate in the world.

How, except as an advantage of our socialist form of government, could one explain the fact that the average length of life in the USSR,

has doubled. During the past 5 years alone the average life expectancy has increased from 67 to 69 years and this with the highest birth rate among the economically advanced nations - 24.9 per 1000 population in 1960, while in tsarist Russia the average life expectancy was 32 years.

As compared with 1913 the over-all death rate has dropped to less than 25% while the infant rate has been reduced by a factor of almost 7.

There has been a remarkable reduction in the total incidence of disease. The relatively high birth rate coupled with a low death rate determines the high natural population increase in our nation. The average yearly increment is 3.5 million persons. This is 60,000 persons in the Tatar Republic alone.

Tatar industry, agriculture and culture have flourished under the Soviet regime. Real progress has been made in the area of public health. This is indicated by the yearly increase in the number of medical and sanitary institutions, the increase in the number of medical personnel and the greater appropriations for public health purposes.

Before the Great October Socialist Revolution the greater part of the population received no medical care. In Tataria there was only 1.5 doctors per 10,000 population while there are now 16 for the same number of persons. During the past 10 years more than 1500 young physicians have been assigned to positions in our Republic from Kazan Medical Institute. The 11 medical schools in the Republic annually graduate more than 500 feldshers and nurses. I^N 1960-1961 1139

subprofessional medical personnel were assigned to cities and districts, 1084 going to rural assignments.

At present there are approximately 4500 physicians, 946 pharmacists, pharmacists' assistants and more than 15,000 subprofessional medical personnel in the Republic.

We know that it is people and personnel that determine the success of an undertaking. Hence the correct disposition of forces and systematic postgraduate training for physicians is of decisive importance.

The seminars and 10-day courses conducted in surgery, obstetrics, gynecology, pediatrics, oncology, tuberculosis, conferences of physicians on current public health problems in cities and districts, and the licensing of physicians, in which the scientists of our higher schools of learning play an active part, will no doubt play an important role in improving the quality of our medical services. As a result of great preparatory work in 1961 more than 600 physicians were licensed.

The public health budget of the Tatar A.S.S.R was 49475,500 rubles in 1962 which is 2.2 times greater than that of 1952. This makes it possible to furnish medical institutions with the latest apparatus, equipment and transportation.

During the past 2 years alone these institutions have received 129 X-ray installations and the most up-to-date physical therapy equipment. There are approximately 200 X-ray and more than 100 physical therapy departments functioning in the Republic. All district hospitals and 80% of the sector hospitals have laboratories for clinical diagnosis.

The economic council of the Tatar Economic District is procuring 300,000 rubles worth of medical, pediatric and pharmacy furniture this year.

This year the institutions will receive approximately 100 special machines, 10 high-power electric plants and much other equipment.

Under the Soviet regime the Party and the Soviet government have provided public health with considerable equipment. The republic now has 283 hospitals with 20,720 beds, 29 dispensaries, and 27 independent outpatient-polyclinic institutions, 13 medical and sanitation units, 328 physician-feldsher stations at industrial plants, and 1750 feldsher-midwife stations.

As a result of the work done by the staffs of these institutions there is a general improvement from year to year.

For instance, the incidence of rheumatic fever, croupous pneumonia, goiter, etc. declined at city and rural hospitals. We have achieved some success in organizing emergency surgical services. The discovery of new antibiotics has made possible the successful treatment of such diseases as dysentery, bruceellosis, tularemia and suppurative infections.

The development of over-all methods for controlling malaria and the new highly effective antimalarial drugs has made it possible virtually to eradicate malaria; the adoption of live polio vaccine and the organization of mass inoculations with this vaccine has reduced the incidence of poliomyelitis abruptly. In the Tatar ASSR in 1961 there were approximately 1 million persons between the ages of 2 months and 20 years yet

policymelitis was reduced to isolated cases.

The use of effective gamma globulin against whooping cough is being adopted in our country. We also use blood plasma substitutes, hemostatics, preparations for gluing bone, prostheses to replace blood vessels, and many others.

In a number of our cities (Kazan, Bugul'ma, Zelenodol'sk) there has been extensive use of surgery in treating tuberculosis. Groups of physicians of Kazan, Bugul'ma, Zelenodol'sk and other dispensaries and medical institutions have performed successful operations on the lungs, making many patients able to work again (I.S.Sigal, M.Yu.Rozengarten, S.Ye.Margolin, E.M.Muradinov, G.M.Kuznetsov, A.I.Likhtenshteyn).

Scientists in our institutes, Professors N.P.Medvedev and P.V. Kravchenko and Docent L.N.Kolchanov are operating on patients with congenital and acquired cardiac defects.

In the ENT section of the Republic Clinical Hospital Assistant L.T.Svatko has been performing successful surgery in restoring hearing.

In the oncological section of the clinic at the State Institute of Postgraduate Training for Physicians (Professor Yu.A.Batzer) new methods are being employed in treating and diagnosing tumors.

A new transillumination method for diagnosing diseases of the stomach has been worked out (I.S.Sigal), extensive use is being made of a modified method for electro-surgical resection of the gastrointestinal tract; there are new methods for diagnosing cancer of the thoracic cavity.

Up-to-date methods for treating urological cases are being worked out (Professor I.F. Charitonov).

Our scientists and practicing physicians are performing complicated surgery of the chest, esophagus and pancreas.

Many new methods for diagnosis and therapy are being worked on in the therapy sections of the Kazan Medical Institute, the State Institute of Postgraduate Training for Physicians (Professor Z.I. Malkin, K.A. Mayanskaya, L.M. Rakhlin, Docent G.Z. Ishmukhametova).

Kazan traumatologists and orthopedists have been doing a great deal of work on accident prevention and on the adoption of up-to-date methods for treating accident and orthopedic patients with congenital or acquired defects of the skeletomuscular system (Professor L.I. Shulatko, A.L. Latyshev, F.S. Yusupov, G.T. Litvin) and they have made many valuable innovations.

In a Communist society there is no place for diseases to becloud human life. Everything around man will be harmonious, delightful and even man will become more beautiful and joyful. For this reason our most important task, as indicated in the new program of the Communist Party, is the prevention of definitive reduction of diseases, with the elimination of some and a sharp reduction in the incidence of other communicable diseases.

Trachoma and Malaria have been eliminated as mass phenomena. Brucellosis has been reduced to isolated cases. There is a decreasing incidence of typhoid fever, poliomyelitis and other infections.

However there has been no permanent reduction in the number of cases of such diseases as influenza, Botkin's disease (infectious hepatitis), diabetes mellitus,

The immediate task facing medical personnel in the Tatar Republic is the liquidation of such mass phenomena as diphtheria, poliomyelitis and total eradication of trachoma. This requires greater organizational efforts and supplemental epidemiological control measures.

Our progress in public health will in the future be based on today's success in preventive medicine.

In order to prevent many diseases, particularly the infectious ones, the living and sanitary conditions of the public must be improved.

Great responsibility in improved public sanitation rests with the Republic Center of Health Education and on the 43 health universities set up in 1960-1961, the 34 health schools, the television and radio health journal "Zdorov'ye", the local councils, trade-union and other public organizations, and on the entire public spirited group of the Republic.

With the great expansion of industry and agriculture and the growth of cities and towns an enormous role in disease prevention is being played by the control of air, water and soil pollution; this imposes on sanitary and epidemiological control personnel a great responsibility for improving preventive and current sanitary inspection with regard to air, soil and water pollution. In this connection a number of measures have been adopted in recent years by

local health agencies and the Economic Council in carrying out the decisions of the Party and the government; more than 30 gas-cleaning installations have been built, and the boiler systems of 39 plants have been converted to gas. However more than 70 plants still do not have these installations.

Purity of the air is a particularly acute problem in Kazan, Zelenodol'sk and Bondyug since the gas and dust from industries in these towns are definitely harming the public health.

The job of industrial directors and health agencies is to make more extensive use of equipment already produced for these purposes; our laboratories should be improved, hygiene departments should take an active part in studying air pollution and health inspection agencies should have more rigid requirements toward industrial directors.

No less acute is the problem of maintaining the purity of water in natural bodies. The condition of the Volga, Kama and other small rivers has deteriorated markedly in connection with the increased industrial and household sewage dumped without purification. As a result the public water supply has been damaged and fishing has been hurt.

During recent years a number of plants have built purification installations; these are now being built at a number of other plants.

The administration of the Tatar Economic Council and the local councils must take decisive measures in this area in order to eliminate

Factors which undermine the public's health.

We know that the incidence of disease depends largely on the water supply, sewerage and the degree of sanitation of the cities and towns.

As a result of work done by municipal agencies and local councils the per capita consumption of water has increased. There is an increasing number of towns with central water supply. In the near future the operation of the 1st string of the Kama Collector Point will greatly improve the water supply of cities and towns in southeast Tatar.

The water lines are being built and extended in Kuybyshev, Agryz, Buinsk, Apostov, Kaybitay, Nurlat, Saby and other towns.

However this work lags behind the rate of housing construction and the rising living standards of the people. The rural water supply is particularly poor. Of the 43 district centers 17 lack a central water supply. Many dug wells do not meet sanitary requirements. Greater demands on the municipal agencies and the local councils are a necessary condition for improving the water supply, particularly in rural areas.

Pressing even today is the problem of improving outpatient and polyclinic services for the public, particularly in its specialized aspects (stomatology, urology, psychiatry, etc.) and the extension of the number of polyclinics.

During recent years polyclinics have been built in Al'met'yevsk,

Leninogorsk, Azankayev, and Zelenodol'sk; new polyclinics have been opened in Kazan. Sanitary conditions have been improved in a number of districts. Preliminary registration has been introduced in a number of them; the work of registrars has been systematized. The principle of polyclinics serving specific territories has been a leading principle in their operation.

However the scope and quality of medical care does not meet the public demands. Health agencies and local councils face the task of extending outpatient polyclinic services in every way. The size of the polyclinic areas must be reduced and the size of the medical staffs must be reviewed with a view toward adequate staffing to provide complete service for the territory. This will make it possible to eliminate shortcomings in the organization of outpatient care and increase the authority of the sector physician.

Maternal and child welfare has always been a focal point for the Party and government.

The new program states: "Provide for the training from infancy of a physically sound younger generation with harmonious development of physical and spiritual resources." This is understandable since the future belongs to our children, our coming generation, the generation of the Communist tomorrow. Infant mortality is dropping every year in the Tatar ASSR; today it stands at 35 per 1000 births as compared to 50.9 per 1000 in 1959. Physical fitness indexes for children are also improving. The average newborn weight is 3.5 kg. Morbidity and mortality are being

for many diseases every year.

But there is still a lot to be done in order to solve the problem posed by the Party and government and incorporated into the new program, that of "providing a happy childhood for every child." This means that the size of pediatric sectors must be reduced (1000 children per doctor), there must be more lying-in hospitals in cities and rural areas, there must be more consultation centers, pediatric sanatoriums, hospitals, and open-air schools. They must have better equipment. Therapeutic and preventive measures must be carried out more vigorously, using all the new techniques known to science.

The Soviet people are rearing their younger generation with great love and for this reason the future mother is surrounded by care and attention. A well-developed system of special medical institutions in the USSR has as its main purpose to prepare women for motherhood in every way, preserving her health and that of the future child; this system includes gynecological and pediatric consultation centers, lying-in hospitals, milk kitchens, nurseries and kindergartens.

Our Republic now has 59 gynecological and 104 pediatric consultation centers and 10 lying-in hospitals. Such institutions are being built in Bugul'ma, Al'met'yevski and Leninogorsk.

Milk kitchens have been set up in many cities. In Kazan alone the milk kitchen turns out 8,000 feedings per day. Children get good grade and varied food which is important for their correct development.

Nurseries and kindergartens have given great assistance to

Soviet women. Thanks to them hundreds of thousands of Soviet women have an opportunity to raise their children without giving up their jobs or school. But we do not have enough of these institutions. Our task, the task of our trade-union organizations and all people is to exercise unflinching supervision over to complete utilization of appropriations for the construction of these institutions.

Much remains to be done in order to improve medical care and the sanitary conditions of our cities and villages and industrial and other enterprises.

Further improvement in the public health is planned during this 7-year period. Capital investments in hospital and pediatric construction and the assignment of a number of administrative tasks to health agencies will make it possible to have approximately 24,000 beds or 8.1 beds per 1000 population in the Republic by the end of the 7-year plan.

During the 7-year plan the Republic is to acquire approximately 700 physicians with the result that there will be 17.5 physicians per 10000 population in 1965.

The new Party program has revealed enormous prospects for the expansion of the public health system.

Medical personnel of the Tatar ASSR and the entire Soviet people rejoice and take inspiration from the great prospects in the development of a Communist society. The future of our country is bright and heartening.

⌈ We are entering a new era - the era of communism. The Soviet
citizen must enter this Communist tomorrow a healthy, strong and robust
person. This requires that all the instructions of the new Party program
be carried out in their entirety.

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ALL-UNION CONFERENCE OF NEUROSURGEONS

[Following is a translation of an article by Medical Candidate N.Ya.Vasin in the Russian-language periodical Voprosy nevrokhirurgii (Problems in Neurosurgery), Moscow, No 1, 1963, pages 59-63.]

From November 28 to December 2 Moscow was the site of the All-Union Conference of Neurosurgeons convoked by the USSR Ministry of Health, the USSR Academy of Medicine and the All-Union Society of Neurosurgeons. The conference was attended by delegates from the republics of the Soviet Union and guests from the people's democracies.

The agenda called for 3 scheduled topics: 1) tumors of the hypophysis and craniopharyngiomas; 2) pathogenesis and treatment of disorders of vital functions in neurosurgery; 3) radiation therapy in neuroncology.

Three plenary sessions presenting 32 papers were devoted to problems in the pathogenesis, diagnosis and combined therapy of tumors of the hypophysis and craniopharyngiomas.

In papers on hypophyseal tumors attention was focused on greater precision in indications and correct time for surgery and an evaluation of the results of surgical and combined therapy. Considerable time was also allotted to a discussion of problems in replacement therapy.

The analysis, presented in the papers, of results of surgical treatment of hypophyseal tumors based on considerable statistical material from major neurosurgical institutions indicates the effective-

ness of surgery in early stages of the disease. However two points of view exist with respect to the time for surgery. B.G.Yegorov (Moscow) believes that patients should be operated on at that stage where the tumor has not spread beyond the sella turcica and is manifested clinically as endocrinometabolic disorders and roentgenologically as a decided spreading of the sella turcica. This period is based on the fact that during the stage of visual disturbances there is supra- and parasellar tumor growth which makes radical removal impossible. A.I.Arutyunov (Kiev), I.S.Babchin (Leningrad), V.M.Ugryunov (Leningrad), A.I. Zlatoverov (Kuybyshev), D.G.Shefer (Sverdlovsk), Glowacki (Poland) and others as proponents of early surgery propose using the appearance of initial visual disorders as a criterion for selecting the time of surgery.

As for the methodology involved in surgery for hypophyseal tumors the majority of the speakers favored an intracranial approach to the sellar area with maximal evacuation of the cerebrospinal spaces. The use of urea assures free clearance of the brain and open access to the sellar area (B.G.Yegorov, M.A.Salaskin, Moscow; A.I. Arutyunov, Kiev; V.A.Nikol'skiy, Rostov-on-Don). The transnasal approach is now used in inoperable hypophyseal tumors for purposes of inserting radioactive substances by the stereotaxic method (F.M.Iyasa, E.I.Kandel', A.L.Kadin, Moscow). From the point of view of working out methods for hypophyseal surgery there were very interesting data presented on the topography of the sellar region obtained by M.A.Baren

(coauthor with B.G.Yegerov and M.A.Salaskin) by tracheoscopy [?] and on blood circulation in the hypophysis cited in the paper of D.A.Zhdanov, M.R.Sapin and I.G.Aksayev (Moscow).

Of great importance for a favorable outcome in surgery is the use of up-to-date methods of anesthesiology, the use of replacement therapy and prompt recognition of postoperative complications (B.A.Sanotkina, P.M.Panchenko, R.I.Zhitnyuk, W.M.Gryunov, I.S.Vaskin, V.L.Kachaev, A.A.Kokhanchikova, Ye.I.Stroganova, Leningrad; G.P.Kornyanskiy, V.I.Volkova-Pavlova, Moscow).

During the stage of extrasellar growth of the hypophysis indications for surgery and the methodology to be followed can be more precise in accordance with results of preoperative clinical examination. In this instance data of neurological analysis assume the chief importance (B.G.Shefer, O.V.Grinkovich, Sverdlovsk; A.I.Zlatoverov, V.A.Kozlova, L.V.Yastseva, M.I.Solovykh, Muzbyshov; Ya.M.Pavlovskiy, Ye.P.Gurova, Kharkov).

The ophthalmological aspects of diagnosis, more exact indications and prognosis for surgery in hypophyseal tumors were treated in the papers of O.M.Sokolova and A.R.Shakhnovich (Moscow).

The papers of M.B.Kopylov, A.M.^Aun, Yu.M.Pilatov (Moscow), V.A.Nikol'skiy (Rostov-on-Don), Yu.A.Zazul', V.G.^Aarayanova, Ts.M.Sorochinskaya, and G.S.Danilenko (Kiev) showed the importance of oenographic and contrast (angio- and pneumography) methods in the differential diagnosis and preoperative size determination, direction of growth and

relation to major cerebral vessels of hypophyseal tumors.

Of considerable interest was an attempt to provide quantitative criteria for the bioelectric activity of the brain in hypophyseal tumors (N.P.Bekhtereva, I.V.Vvedenskaya, K.V.Grachev, Yu.V.Dubikaytis, T.S. Stepanova, V.V.Ussov, Leningrad). Some data on cardiac activity in cases of hypophyseal tumors as revealed by electrocardiography were analyzed in a talk by F.G.Ivanov-Dyatlov (Moscow).

Problems of X-ray and gamma-ray therapy in hypophyseal adenomas were treated extensively in papers by M.D.Gal'perin, B.N.Pil' (Leningrad), Ye.V.Dubova, A.P.Korol', M.D.Golosarskiy (Odessa), A.I.Zlatoverov (Kuybushev), D.G.Shefer (Sverdlovsk), and M.D.Gal'perin (Leningrad) believe that in some cases good results can be obtained with radiotherapy alone with which the treatment of hypophyseal adenomas must sometimes start. In the course of a lively discussion on this question and in sections of talks summarizing the experience of the major neurosurgical institutions (B.G.Yegorov, M.A.Salaskin, Moscow; V.M.Ugryumov, I.S.Vaskin, I.S.Babchin, Leningrad; A.I.Arutyunov, Kiev; Glowacki, Poland) there was recognition of the necessity for combining radiation therapy with surgery which produces the most effective treatment for hypophyseal adenomas.

The discussion of the problem of craniopharyngiomas showed that their topographic location (V.V.Grekhov, Moscow) determines the less favorable outcome in surgery for these tumors than for hypophyseal tumors. Postoperative mortality remains high although the use of replacement therapy during the pre- and postoperative period has somewhat

improved the outcome of surgery. Basic methods recommended for surgery are partial removal of the tumor and its capsule with opening of the cystic cavity, sometimes using palliative surgery to return the spinal fluid circulation to normal (A.A.Arendt, D.Ya.Varshavskaya, Moscow; I.S. Babchin, A.G.Zemskaya, M.M.Zobina, Leningrad; A.I.Arutyunov, Kiev; M.S. Gorbachev, Khar'kov).

Data presented from an analysis of a large body of clinical material showed that hypophyseal tumors cannot always be considered congenital. They may develop during the course of the entire life, including middle and advanced age (D.Ya.Varshavskaya, Moscow; B.S. Khominskiy, Kiev).

The conference dealt with specific questions on the clinical aspects and diagnosis of craniopharyngiomas. The talk of N.S.Blagoveschenskaya (Moscow) discussed some data on otoneurological symptoms in craniopharyngiomas. G.P.Burgman (Moscow) showed the diagnostic significance of examining the content of the craniopharyngioma cyst. Problems in psychopathological disturbances in tumors of the sellar region were dealt with in talks by L.P.Lobov (Moscow), S.S.Kaliner (Leningrad), T.A.Dobrokhotov (Moscow), and A.G.Dzevaltovskaya (Kiev).

The delegates gave considerable attention to the problem of endocrinometabolic disorders and replacement therapy in hypophyseal tumors and craniopharyngiomas. Talks by I.^M.Vinogradova, D.G. Palinkashi (Moscow), N.D.Luk'yanova, Ya.N.Buntsef (Khar'kov) showed functional changes in the thyroid and adrenal cortex in cases of tumors.

of the hypophysis and diencephalic region. The current status of the problem of the neurosecretory apparatus of the hypothalamus-hypophysis region was treated in a survey paper by A.A.Voytkovich (Voronezh), and recent data on a hemocriphil [?] neurosecretion of the neurohypophysis in a paper by D.A.Zhdanov, M.R.Sapin and I.G.Aknayev (Moscow). A.A. Voytkovich feels that hypophyseal therapy must use active principles from the hypothalamic nuclei and direct action.

Disorders of vital functions in neurosurgery were dealt with in 2 plenary sessions with 27 papers. This problem which has attracted increasing attention among neurosurgeons in recent years is only now being worked out, despite its urgency, and really has not passed beyond the data collecting stage. For this reason a discussion of a number of questions in the pathogenesis and treatment of terminal states in the neurosurgical clinic made it possible for the first time to point up the main lines for future research in this field. From this point of view it must be considered timely to combine the forces of reanimatologists and neurosurgeons in dealing with the problem.

Problems in the pathogenesis of disorders of vital functions from different points of view were treated in the majority of the papers presented. Of prime importance in their etiology are edema and dyshemic disorders in the form of extravasion of blood at the level of the brain stem. A.I.Arutyunov, A.L.Dukhin, V.F.Tushevskiy, G.A.Pedachenko, B.S.Kheminskiy (Kiev), N.A.Smirnov (Moscow) feel that the mechanism of disruption of vital functions in brain tumors and

cerebral extravasations is directly affected by axial and lateral displacements of the brain stem and the vessels which supply it. E.I.Zlotnik and I.Z.Stoklarts (Minsk) stressed the role of arterial spasm which can lead to cerebral infarct, edema and dislocation of the brain with ruptures of intracranial aneurysms.

Some problems in the relationship between respiration, vascular tone and cardiac activity in terminal states were analyzed by L.A.Koreyska (Moscow) who used experimental material to show the importance of the cerebral cortex in the pathogenesis of cerebrovascular disease with irreversible disruption of vital functions. The results of clinical observations of the state of the cardiovascular state in terminal states of patients with tumors and cerebrovascular disease were analyzed in papers by A.Ya.Kuz'michev, L.M.Svirid (Kiev), V.L.Lesnitskaya, G.V.Soveshchanskiy and V.V.Rudchenko (Simferopol). V.S.Khrapov (Moscow) presented data on the nature of reflex changes in arterial pressure in surgery on the diencephalic regions of the brain using ganglion-blocking agents and neuroplegics.

The pathogenesis and clinical aspects of respiratory disorders in terminal states were discussed in papers by T.M.Sergiyenko (Kiev) and Yu.V.Zotov (Moscow).

The paper by Yu.A.Zozul' and G.M.Kachal (Kiev) considered changes in certain biochemical factors of the oxidative processes in disorders of vital functions in brain tumor patients.

Considerable attention was given to problems in the clinical

analysis and treatment of terminal states. Papers by I.M.Irger, T.P. Bel'skaya, Ye.M.Boyev, B.I.Kamenetskaya, V.L.Kassil', Ye.M.Mal'nikov, M.A.Ravikovich, E.A.Treblev, A.Ya.Pal'chuk (Moscow) and L.B.Litvak and Kh.N.Zil'bershteyn (Khar'kov) presented pathogenetic variants of terminal states following brain tumors and cerebrocranial injuries which determine the course of therapy. M.Yu.Rapoport (Moscow) stressed the importance of neurological analysis of acute and particularly lingering forms of terminal states for a correct evaluation and effective treatment. O.M.Grindel', V.V.Grekhov and Ye.Ya.Shoherbakova (Moscow) compared neurological, electroencephalographic and pathomorphological data for cerebrocranial injuries and showed the importance for prognosis of the sequence of changes in symptoms originating with the damaged and undamaged hemisphere and the relatively clearly detected correlations between the rate of development of the process and pathomorphological lesions of the brain tissue. N.I.Mironovich (Moscow) gave an analysis of the hyperthermal syndrome following surgery on the cerebellum. A.N.Orlova (Leningrad) presented data on pathophysiological reactions in patients with cerebral meningomas as related to their location.

The conference gave broad discussion to problems in the treatment of terminal states. It should be stressed that the problem of resuscitation has passed beyond theoretical and experimental limits in recent years and has acquired considerable practical importance. At present resuscitation methods in cases of neurosurgical pathology are being widely used not only in the major neurosurgical clinics but

even in small therapeutic institutions in cases of first aid.

The possibility of using the principles of resuscitation in treating terminal states in the neurosurgical clinic was demonstrated in a paper by V.A. Nagovskiy, A.M. Gurvich and Ye.S. Zolotokrylina (Moscow). The speakers pointed out that the principal therapeutic measures for terminal states in neurosurgical patients, in addition to restoring gas metabolism and blood circulation, but aim at controlling cerebral edema. In agonal states when the heart stops direct and indirect heart massage should be used extensively.

Experience in treating vital disorders in cases of closed cerebrocranial wounds was related in a paper by I.M. Irger and his colleagues (Moscow) with citation of much clinical material. In particular they reviewed indications and methods for carrying out auxiliary and artificial apparatus respiration, criteria for producing a tracheostoma, and cited data on the use of corticosteroids. The authors have been extending their indications for tracheostomy when hypoxemia is present and stubbornly insist on the use of hibernation and hypothermia in the initial stage of treating disorders of vital functions.

Methods for treating severe cerebrocranial injuries combined with disorders of vital functions and prolonged loss of consciousness (28 to 70 days) were discussed in a paper by A.A. Shlykov, N.D. Leybzon, V.A. Kozlyrev (Moscow). A paper by V.P. Radushkevich, A.I. Kladovshchikov and A.D. Khitrov (Voronezh) cited data on the effectiveness

of intraarterial infusions combined with artificial and auxiliary respiration in acute cases of disordered circulation in cases of focal brain damage.

Different problems in methods for treating disordered vital functions were also discussed in papers by A.B.Gorbatsevich, V.I.Grebenyuk, A.P.Panichev, V.A.Shustin; V.D.Spiridonov, I.N.Epshetyn (Leningrad), E.I.Raduan, A.T.Vel'di, A.A.Tikk, R.I.Maymre (Tartu), N.I.Melikh, and Yu.N.Savchenko (Omsk). The report by S.M.Kapustin and V.P.Rayevskiy (Leningrad) in particular described experience in using prolonged anesthesia as a method for preventing and controlling disordered vital functions in the postoperative period. It should be pointed out that the majority of speakers hold persistently to the use of ganglion-blocking agents in the treatment of terminal states which may intensify already developing pulmonary and cardiac disorders.

Of considerable interest were those papers dealing with an analysis of the effectiveness of using urea as a powerful dehydrant in controlling edema of the brain (B.G.Yegorov, G.P.Kornyskiy, V.I.Salalykin, E.I.Kandel', S.N.Fedorov, Moscow; V.D.Dansker, L.G.Bogomolova, R.P.Lastovskiy, G.I.Mikhaylov, Ye.V.Moreva, Z.D.Fedorova, Leningrad; E.I.Zlotnik and I.Z.Stoklarts, Minsk). Problems regarding more precise indications for its use in vital dysfunctions obviously require further study. For instance, I.M.Irger and colleagues (Moscow) point out that in acute closed cerebrocranial injury indications for the use of urea must be limited in some cases since it increases vascular wall permeability.

lity, thus contributing to diapedetic extravasion, and increases azotemia which is dangerous in acute kidney insufficiency.

It should be mentioned that at the Burdenko Institute of Neurosurgery in Moscow a method has been developed and is being used for sterilizing urea of special purity by ultraviolet irradiation. At the Pelenov Institute of Neurosurgery (Leningrad) in collaboration with the Institute of Chemical Reagents, a section of the Institute of Experimental Medicine and the Leningrad Institute of Blood Transfusion, a technique has been developed for the production of Soviet lyophilised urea. This gives us hope that in the immediate future urea will become widely used in all therapeutic institutions.

The problem of radiation therapy in neurooncology was the topic of one plenary session at which 12 papers were read. The speakers stressed the fact that more than one half of all intracerebral tumors cannot be treated by radical surgery and require combined therapy including radiation therapy.

Problems in X-ray therapy connected with intracerebral tumors were reviewed in a paper by M.G.Dotsenko (Khar'kov). The speaker points out that in angioreticulomas, oligodendrogliomas, neuroblastomas, some types of astrocytomas and plexuspapillomas X-ray therapy can be an effective supplementary method in combined therapy; in angioreticulosarcomas, multiform spongioblastomas and dedifferentiated astrocytomas it is not very effective. K.K.Rodionov and F.A.Gurehin (Leningrad) recommend X-ray therapy for inoperable cerebral tumors following

decompressive trephination and the reduction of arterial blood supply to the tumor by ligation of the carotid artery in the neck.

The papers by I.D.Virozub (Dobetsk) and P.I.Petrov (Bulgaria) cited data on the combined treatment of tumors of the cerebellum. The speakers stressed the necessity for as radical as possible preliminary removal of the tumors. According to I.D.Virozub, X-ray therapy is effective in anglioreticulosas and astrocytomas. In medulloblastomas and primary sarcomas of the cerebellum the results are inconclusive. I.P. Petrov pointed out that timely and appropriate X-ray treatment of medulloblastomas of the cerebellum in children may produce not only remarkable clinical improvement but pronounced morphological changes, sometimes with a clear tendency toward saturation of the tumorous elements.

All the speakers stressed the fact that tumor growth inhibition and regressive tissue changes are most pronounced when doses of no less than 10000 r are used. Repeated irradiation must be given during the period when the oncostatic effect of the primary irradiation has not yet passed.

At present it is recognized that most promising is the adoption of sources of high-energy radiation which possess a number of advantages. Their use requires removal of the tumors in accessible zones with marking of the surgical area (tantalum powder and others). The easy toleration of irradiation in inhibitory betatron radiation, the absence of radiation reactions and the good direct effect recommend it for extensive practical

use in neurosurgery (V.M.Ugryumov, T.V.Chayka, K.N.Badmayev, I.S. Vaskin, I.V.Vvedenskaya, T.S.Malyshova, N.K.Muratkhodzhayev, A.N.Orlova, M.N.Potanina, T.S.Stepanova, V.N.Men'shikova; N.K.Muratkhodzhayev; R.V. Sinitayn, A.P.Sinitayna, I.V.Vvedenskaya, T.S.Stepanova, Leningrad).

At the same time we must point out that years of experience in the use of X-ray and gamma-ray therapy (and high-energy sources in more recent years) through external application have shown its inadequate therapeutic effectiveness, since it does not provide a satisfactory oncolytic dose at the tumor site. Six years of experience in the use of radioactive gold 198 in the form of colloidal and granular preparations in treating intracerebral tumors at the Polenov Institute of Neurosurgery in Leningrad have shown its effectiveness (V.N.Shamov, I.S.Habchin, T.V.Chayka, K.N.Badmayev, I.S.Vaskin, A.A.Volkov, A.G. Zemskaya, M.M.Zobina, A.N.Orlova, V.V.Khokhlova, Leningrad). Also of considerable practical importance is the Burdenko Institute's method of stereotactic injection of yttrium-90 into the tumor in treating inoperable tumors of the basal areas of the brain (F.M.Lyass, E.I. Kendal', A.L.Kadin, Moscow). The first positive results obtained by these scientists urgently dictate the necessity for further study of this method.

Extensive resolutions on all three problems on the agenda were adopted at the closing session.

The conference also heard reports from the administration and revision committee of the All-Union Society of Neurosurgeons and the

editorial board of the journal Veščny nevrohirurgii. In conclusion
elections were held to the board of the All-Union Society of Neurosur-
geons.

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BRIEF NEWS

[Following is the translation of an unsigned article in the Russian-language periodical Voprosy neyrokhirurgii (Problems in Neurosurgery), Moscow, No 1, 1963, page 63.]

The All-Union Conference of Neurosurgeons was held in Moscow November 28 - December 2. In addition to the scientific program there was a discussion of organization problems. A new administrative board, a presidium and a revision committee for the All-Union Society of Neurosurgeons were elected.

President of the board of the All-Union Society is Professor B.G. Yegorov, active member of the USSR Academy of Medicine and honored scientist; vice presidents - corresponding member of the USSR Academy of Medicine and honored scientist, Professor A.I. Arutyunov, Professor G.P. Korniyanskiy, and Professor V.M. Ugryumov; chief academic secretary, Candidate of Medicine E.I. Mandel'; treasurer, Candidate of Medicine I.N. Vinogradova.

Members of the presidium - honored scientist Professor A.A. Arendt, Professor I.S. Babchin, honored scientist Professor L.A. Koreysha, Professor V.A. Nikol'skiy and Candidate of Medicine B.A. Samotokin.

Revision committee: Candidate of Medicine M.A. Salazkin (chairman), A.Ya. Podgornaya M.D., Candidate of Medicine V.I. Lerman, Candidate of Medicine Ye.A. Terpugov, and T.V. Cheyka, M.D.

Members of the administrative board of the Society: Ye.A.

[Azarova, A.A. Arendt, A.I. Arutyunov, Ye. I. Babichenko, I.S. Babchin, V. Ye.]
Bryk, I.D. Virozub, N.M. Volynkin, I.M. Vinogradova, I.S. Vaskin, M.S.
Gorbachev, K.A. Grigorevich, V.I. Grabenyuk, A.M. Guseynov, B.G. Yegorov, E.I.
Zlotnik, S.G. Zograbyan, A.T. Zenskaya, Yu.L. Zozulya, I.M. Zenger, L.A.
Kopeysha, E.I. Landel', G.P. Kornyskiy, L.A. Klumbis, G.S. Knirik, A.P.
Korol', A.F. Lepukaln, V.L. Lesnitskaya, N.D. Leyhson, N.D. Luk'yanova,
N.I. Mironovich, S.Yu. Minkin, K.G. Nirenburg, V.A. Nikol'skiy, G.A. Pedachenko,
M.N. Potanina, M.Yu. Rapoport, F.Yu. Raudkapp, A.P. Romsdanov, Yu.N. Savchenko,
E.A. Sanotekin, Y.A. Serbinenko, O.A. Sigua, A.G. Tishin, V.M. Ygryunov,
R.U. Umakhanov, K.I. Kharitonova, B.S. Khopin'skiy, V.S. Khrapov, E.P.
Khudzhayev, B.I. Sharapov, S.S. Oganssyan, D.G. Shefer, A.A. Shlykov,
G.M. Chugunov, B.N. Esparcov.

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BRIEF NEWS

[Following is a translation of unsigned miscellaneous news items in the Russian-language periodical Bulleten' Voenogo Meditsinskogo Soveta (Bulletin of the Scientific Medical Council), Moscow, No 4, 1962, pages 45-47.]

By decree of the Supreme Soviet of the RSFSR of May 1962, Professor V.G.Budylin, rector of Stavropol Medical Institute, was awarded the title Honored Scientist of the RSFSR for his great services in the field of medicine.

* * *

Professor A.V.Kholod has been appointed prorector for research at Kursk Medical Institute.

Docent V.Yu.Pervushin has been appointed rector of Kemerovo Medical Institute.

Candidate of Physics and Mathematics V.P.Shamov (specialist in physical chemistry) has been appointed assistant director of research at the Leningrad Institute of Radiation Hygiene Research.

* * *

The decree of the Minister of Health of the USSR, No.161, dated 6 April 1962 and entitled "Coordination and planning of research in the field of medicine in the USSR", has been published. This decree affirms instructions: a) on procedure in coordinating and planning research in the field of medicine, control of the topic plan and the

summarising of research results; b) on the problem committee on a problem of national importance; c) on the scientific medical council of the Ministry of Health of a Union republic.

a) On the coordination and planning of research. The Council on Research Coordination and Practical Application of Scientific Achievements of the USSR Ministry of Health in conjunction with the presidium of the USSR Academy of Medicine: 1) determines the order of the most important, nationally significant problems in medicine and presents this ranking to the administration of the Ministry of Health for confirmation; 2) assigns problems of national importance to the different research councils and problem committees organized around the main institutes of the USSR Ministry of Health, the USSR Academy of Medicine and the ministries of health of the Union republics; 3) prepares detailed assignments and recommendations for working out the topic plans on problems of national importance for the next 2 years; 4) works out provisionally composite 2-year research plans on the basis of proposals of the research councils and problem committees, the administration of the Ministry of Health of the USSR and the scientific medical councils of the Ministries of health of the Union republics.

The Council for Research Coordination of the USSR Ministry of Health maintains general methodological supervision over research on all topics of national importance and indirect supervision in the following areas: (1) General features of an epidemiological process and scientific principles applicable to the eradication and reduction in

the incidence of infectious diseases. 2) Scientific basis for vaccination and serum studies. 3) Physiology and pathology of the endocrine system. 4) Tuberculosis. 5) Principal parasitic diseases, their prevention and treatment. 6) Urban and rural public health. 7) Scientific principles of medical radiology and roentgenology. 8) Discovery and study of synthetic drugs, hormones, alkaloids and glycosides. 9) Vitamins and the clinicophysiological basis for their use. 10) Scientific principles of pediatric and adolescent hygiene. 11) Principles of pharmaceutical development and the search for new methods of preparing drugs and methods of analysis. 12) Antibiotics and biologically active substances. 13) Wounds, traumatism and orthopedic pathologies. 14) Diseases of the vascular system, blood transfusion and blood plasma substitutes. 15) Mode of action of physical and resort factors and their application in therapy. 16) Medical problems in physical culture and sports. 17) Theoretical principles for the development of the Soviet public health system. 18) History of medicine and public health. 19) Dental caries and pyorrhea alveolaris. 20) Problems in anaesthesiology and resuscitation. 21) Problems in gerontology and geriatrics. 22) Discovery and study of contraceptives.

The presidium of the USSR Academy of Medicine has direct supervision over research in the following areas: 1) Physiology and pathology of the cardiovascular system (hypertension, atherosclerosis, rheumatic fever, cardiac and vascular surgery). 2) Malignant neoplasms (etiology, pathogenesis, prevention, diagnosis, new therapeutic methods). 3) Viruses

and virus diseases (influenza, poliomyelitis, epidemic hepatitis, measles). 4) Physiology and pathology of the higher nervous activity, diseases of the nervous system (including neuroses and the most important mental illnesses). 5) Biochemistry and pathochemistry of metabolism and its regulatory mechanism (primarily the biochemistry of proteins, nucleic acids and hormones). 6) General and medical genetics and hereditary disease in man. 7) Immunity, allergy and principles of specific prophylaxis. 8) General features of morphogenesis and regeneration. 9) Principles of nutrition in health and disease. 10) Principles of industrial hygiene and occupational diseases. 11) Morphology, biochemistry and genetics of micro-organisms (including variation, breeding and the problem of bacteriophage). 12) Study of the mode of action of drugs. 13) Perinatal mortality and its prevention. 14) Physiology and pathology of infancy.

The research councils and problem committees in conjunction with the main national institutes: 1) work out a 2-year topic plan for each problem on the basis of detailed instructions and recommendations of the Research Coordination Council of the USSR Ministry of Health; 2) coordinate research in the specialized research and therapeutic institutions and medical institutes; 3) provide methodological supervision in carrying out the approved topic plan by establishing direct connections with appropriate institutes and medical schools regardless of their administrative position when necessary to deal with special research cases.

Procedure in working out a composite 2-year topic plan for research on problems of national importance: 1) Detailed assignments and recommendations on compiling a research plan on the most important medical problems for the next 2 years, as worked out by the Research Coordination Council of the USSR Ministry of Health and the presidium of the USSR Academy of Medicine, are forwarded by the Coordination Council to the scientific medical councils of the republic ministries of health and the problem committees by March 1st of the even-numbered years.

2) After accurately determining the distribution of the topics and the time for completion of the projects, the medical councils of the republic ministries of health send the detailed assignments and recommendations to the subordinate organizations. On the basis of these assignments the latter organizations work out topic plans and submit them to the appropriate problem committee and medical council of the republic which in turn submit the topic plans for approval by the collegium of the ministry and report on the collegium's decision to the appropriate problem committee by September 15th of the even-numbered years.

3) The presidium of the USSR Academy of Medicine and the problem committees of the Research Coordination Council of the USSR Ministry of Health submit topic plans for each problem of national importance for the next 2 years to the Coordination Council of the USSR Ministry of Health by October 15th of the even-numbered years.

4) The Coordination Council of the USSR Ministry of Health and the Presidium of the USSR Academy of Medicine use the submitted material

to compile a composite all-Union topic research plan in medicine for the next 2 years which they send to the medical councils of the republic ministries of health for comment and submit for approval to the collegium and the Minister of Health of the USSR by December 15th of the same year.

Supervision and reporting on research results: 1) Work on an approved topic research plan is considered a state assignment.

2) The Coordination Council of the USSR Ministry of Health exercises general control over plan execution as a whole as well as over the most important problems of national importance and the work of specific research institutions and medical schools regardless of their position in the administrative hierarchy.

3) Direct control over execution of the 2-year topic research plan is exercised through the appropriate research institutes by the administrations of the USSR Ministry of Health and the presidium of the USSR Academy of Medicine as well as by the medical councils of the republic ministries of health.

4) Yearly reports on research results under the 2-year plan are submitted.

5) The presidium of the USSR Academy of Medicine and the problem committees of the Coordination Council submit to the Coordination Council of the USSR Ministry of Health reports on the results of research work during the year by the 15th of February of the following year and on the approved form. Medical councils of the republic ministries of health at the same time will submit to the Coordination Council of the USSR

composite data on the most important results in carrying out the republic topic plan.

6) Reports on research work must contain proposals for adopting the more important achievements in practice as well as basic measures necessary for further research in the area.

7) On the basis of these reports the Coordination Council of the USSR Ministry of Health and the administrative agencies of the USSR Ministry of Health will by the 1st of May compile a composite report on research results during the preceding year and proposals for the adaptation of achievements to practice with an indication of the time involved and concrete organizational measures.

8) The plan for the practical adoption of the most important research results with proposals for necessary organizational measures must be submitted to the Ministry of Health of the USSR for approval.

b) In the statement on the problem committee dealing with a problem of national importance it says that the problem committee is a voluntary agency for methodological supervision over the solving of a problem of national importance; the problem committee is made up of major scientists and outstanding specialists at the head of research in a given area; the problem committee consists of a chairman, an assistant chairman, an academic secretary and members of the committee.

In order to eliminate duplication in supervision of research activities a problem committee is set up for each problem and its activity is supervised by the Coordination Council of the USSR Ministry.

of Health or the presidium of the USSR Academy of Medicine. Problem committees are not set up in the republics to deal with problems of national importance. The medical councils of the republic ministries of health have their representatives in research councils and problem committees dealing with problems of national importance.

The problem committee determines the main course of development of a problem, delineating the most important problems for a given period and the most important methods to employ; it draws up a proposed research plan; it determines the nature of organizational measures and means of supplying the institutions involved with the latest equipment and reagents which will assure successful pursuit of research goals; it prepares recommendations for institutes of the USSR Academy of Medicine, the USSR Ministry of Health and the ministries of health of the republics to use in establishing topic plans on the assigned problem for the next 2 years, and compiles a composite 2-year plan for research on the problem, including the most important investigations; it coordinates research between research institutions and medical institutes participating in the research program by means of coordinating conferences, meetings, symposiums and consultations; it supervises plan execution; makes up a composite report on plan results for the past year and submits to the next higher agency recommendations for the adoption of research results in practice; it systematically prepares survey reports on the problem for the press, covering the last 3-5 years in both the USSR and abroad.

The problem committee operates with the support of the organizational and methodological section of the appropriate superior institute.

e) The decree approved a type statement on the medical council of a republic ministry of health, according to which the medical council is charged with responsibility for coordinating research conducted at research and therapeutic institutions as well as in medical schools of the republic, with planning research and with introducing research discoveries into medical practice.

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