this article is written not to decide the issue but to bring the controversy to the attention of British doctors and to promote correspondence and discussion.

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USSR Letter

Campaign for sobriety

MICHAEL RYAN

In much of the territory that is now the USSR, and in the Russian heartland especially, heavy drinking and alcoholism have been common phenomena for many centuries. With characteristic reticence about social problems, the Soviet government does not publish annual figures for the consumption of alcohol per head of population and so it is not possible to construct a time series for recent decades. Nevertheless, indirect evidence exists to suggest that since the second world war the trendline has been moving upwards—and by no means minimally.

Ambivalence of approach

Although the point cannot be proved from written sources, governmental attitudes towards this trend are bound to be conditioned by awareness that the sales tax on alcoholic beverages represents a major source of revenue for the State budget. In the short term at least, no comparable high yield tax could be found to make good the financial shortfall resulting from a large reduction in purchases of alcohol. As in other countries, that constraint may be posited as one explanation for any half heartedness about campaigns aimed at modifying the behaviour patterns of drinkers.

It is also relevant to mention the divergence of views on how best to approach a highly complex problem which generally does not yield to simple explanations and for which easy solutions are not available. The lack of unanimity was brought into sharp focus recently by an interesting article published in *Literaturnaya Gazeta* under the title "With a clear head."¹ According to the author, D Viktorov, a vast amount of preventive activity has been undertaken during the 10 year period since the Central Committee of the Communist Party and Council of Ministers of the USSR adopted resolutions about intensifying the struggle against drunkenness and alcoholism. (These resolutions were

adopted in June 1972.) Given the labour shortages and low productivity in the Soviet economy, understandably priority has been given to campaigns in the factories and other places of employment where "commissions for the struggle against drunkenness" have been set up and special "narcological rooms" opened for treating addicts on the spot.

Viktorov contrasts such detailed quotidian activity with the impracticability of far more sweeping and essentially mechanistic measures. He criticises examples of these in an article by a certain Dudochkin, whose work signally fails to show that "rigorous analytical approach," without which it is impossible to arrive at "a constructive solution."

A misguided view

Dudochkin is charged with tendentiousness and disregard for accuracy because he gives an inflated figure for the number of people who are taken into the sobering up stations each year. His total (according to Viktorov) exceeds the correct figure by more than three times. Evidence of simplistic thinking is provided by Dudochkin's strictures against wine making enterprises for planning almost to double their output of table wines in the near future. In fact, these increased production targets are a response to the official strategy aimed at altering the "mix" of beverages so that the share of strong alcohol such as vodka declines as a percentage of total consumption.

Dudochkin also betrays an obscurantist attitude towards treatment by his use of a quotation from a reader's letter. This lays down the following hard line: "In recent times an unfounded opinion has become widespread that drunkards are sick people and it is said that we must relate to them as to sick people who require treatment. Those who are sick are only few, and the remainder have let themselves go; they are criminals and we ought to deal with them as criminals."

A related theme in the article under attack is the naive assumption that drunkenness may be prevented by a "dry law." By way of contradiction, Viktorov first refers to the lesson of the year 1923, when the Soviet food industry was embryonic, strict rationing applied, and no vodka was produced by recog-

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nised distilleries; in Russia the people still managed to make 183 million litres of alcohol at home. Despite widespread starvation and the sanction of severe punishment for moon-shining, grain, sugar, and potatoes were turned into hooch.

As a second, contemporary, example to prove his point, Viktorov cites the experience of an unnamed city in the Russian Republic where the local administration ordered a reduction of 30% in the sale of alcoholic drinks. This policy was shown to be ineffectual when "speculation" in vodka started and the numbers of people taken into sobering up stations failed to decline. Moreover, Viktorov himself discovered that passengers in aircraft flying to that city from Moscow were helping to compensate for the local shortage by taking with them large quantities of "alcoholic souvenirs."

Enlightened strategies

By contrast, the city of Naberezhniye Chelni has adopted a far more advanced approach, which implicitly recognises the importance of a range of social and cultural factors. It was there during the 1970s that a giant complex (the Kama Automobile Works) was constructed to manufacture heavy trucks and engines, and at the start the city imposed a "strict limitation" on the sale of alcoholic drinks. The consequence was that "speculation" in vodka started up. Local organs of the party and its auxiliary the Young Communist League (*Komsomol*), however, responded by evolving a set of measures mainly directed at fostering a more sensible and creative use of leisure time. With the subsequent development of cultural and recreational facilities, the city's reported crime rate—a key indicator of social pathology—became one of the lowest for urban areas in the Soviet Union.

In 1977 the city's decision to lift restrictions on the sale of alcohol was regarded initially with considerable misgiving, especially since the average age of the population was only 25. Public organisations, however, had drawn up plans to take account of this policy change. A commission for combating drunkenness and alcoholism was set up, and each year it formulates a set of measures to improve the prevention of crime, particularly crime arising from drunkenness. The main thrust of the strategy is not so much towards the analysis of incidents caused by drunks as towards "the problem of spare time, recreation, and the organisation of courses about the law for both the adult and teenage population."

Statistics quoted by Viktorov indicate some of the improvements achieved in facilities that are obviously intended as alternative attractions to drinking. In 1977 the city (whose population is around 346 000) had 75 libraries; by 1980 the figure had risen to 105, and the stock of books had nearly doubled. Over the same period, amateur art groups rose from 445 to 580. In the 121 hostels, which accommodate some 50 000 young people, a total of 145 lecture courses and 86 hobby clubs are now operating.

An asthmatic patient suffers from excess sweating. During a recent short course of steroids for an exacerbation of his asthma, he noticed that his sweating was reduced. Since reducing the dose of steroids his sweating has now returned. Is this to be expected, and what is the explanation?

Most therapeutic corticosteroid analogues have some effect in retaining sodium, and thus water, so that reduced sweating may occur, at least temporarily. This effect is rarely noticed by patients but seems the likely explanation in the case cited. There is no evidence that asthma is a deficiency disease because of hypofunction of the adrenal glands. In patients dying from asthma who have had prolonged treatment with corticosteroids before death evidence of adrenal hypofunction is often found, but in patients who have died from asthma without having had corticosteroid treatment, except perhaps for a short period in the terminal illness, there may be evidence of increased adrenocortical activity. Plasma cortisol values

As a result of these developments, it is thought, indicators of personal disaffection and frustration are registering a decline. Thus during 1979 to 1980 the amount of working time lost in the city's industry fell by 19%, absenteeism by 8%, and—probably just as welcome—the number of crimes committed under the influence of drink fell by 11%. Consumption of alcohol, which had started to rise, has now fallen back and hardened drinkers are turning to grape wines.

Involvement of doctors

Another success story is reported from Kursk (also located in the Russian Republic). There the regional Soviet established a preventive centre whose functions include research, organisation of "raids," public education programmes, and work with individuals. The activity of this centre is supervised by the department of psychotherapy at Kursk medical institute, a point of detail worth noting since the overall responsibility for antialcohol campaigns rests not with the Health Ministry but with a law and order agency, the Ministry of Internal Affairs. When Viktorov wrote his article, a mere seven months had elapsed since the inception of this centre, but already the number of street crimes committed in the city had declined considerably.

Viktorov's third example of pioneering work with a positive outcome relates to an experimental prophylactorium (as it is termed) at a factory in Dmitrov, not far from Moscow. The regimen of treatment there consists of three elements: "reflexo-therapy," with ethyl chloride, sessions with a psychiatrist, and, finally, what seems to be a form of social work involving members of the patient's family and companions at work. Despite a heavy case load, this prophylactorium is evidently achieving satisfactory results. "Former patients," Viktorov reports, "have turned into ordinary workers. Peace and tranquillity reign in their families. The 'sobering up' of parents has been seen in the progress and behaviour of their children at school." As for the success rate, the local Ministry of Internal Affairs office provided statistics showing that 207 alcoholics had begun treatment in the unit during the past three years and that 111 of them no longer required continuous supervision.

Viktorov's basic message can hardly be misunderstood: the problem of heavy drinking requires carefully designed and well executed programmes, not grand gestures arising from moral indignation. And as a final example of the wrong approach, he cites Dudochkin's proposal for "a special antialcohol censorship" of books, films, and plays. One can only speculate whether that notion would entail the appointment of some latter day Thomas Bowdler to abbreviate well loved lines by Pushkin and to excise pages from the masterpieces of Tolstoy.

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before death in such cases may be considerably raised owing to stress in the course of status asthmaticus.—JOHN MORRISON SMITH, honorary consultant physician, Birmingham

Correction

Ward meetings: a forum for patients' concerns

We regret that an error appeared in the paper by Dr J Graffy (29 January, p 371). The last sentence of the paragraph on ward meetings should have read "Though very ill patients were inevitably underrepresented, two thirds of inpatients did attend, which suggests that the meetings were representative."