Conference Report

Cooperation not confrontation: the imperative of a nuclear age

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International Physicians for the Prevention of Nuclear War (IPPNW) has seen enormous growth since three American and three Soviet doctors sat down together in Geneva in December 1980. It now has 140 000 members in affiliated groups in 40 countries spread over the globe. Its fifth congress in Budapest, held from 28 June to 1 July, with the motto "Cooperation not confrontation is the imperative of the nuclear age," was attended by over 1000 doctors and other health care workers from almost 60 countries.

This congress was exciting, for several reasons: it was the first in a Warsaw Pact country and the first to be attended by doctors from the People's Republic of China. (They reported that one million Chinese soldiers were being demobilised and that a proportion of China's defence industry was being reorientated to social need.) Perhaps the most exciting thing, however, was to see how the thinking and motivation behind IPPNW are becoming more mainstream: how IPPNW is increasingly supported by a medical consensus of concern over the threat of nuclear war and its medical consequences, and over the dangerous and morally repugnant disproportion between spending on arms and on health and welfare (fig 1).

This consensus was shown in Britain in the BMA motion on the latter subject passed at the 1984 annual representative meeting, as well as in the existence of the BMA board of science report on the medical effects of nuclear war.¹ The World Health Organisation, to which IPPNW is now affiliated as a non-governmental organisation, has also produced a report on nuclear war and declared that "nuclear weapons constitute the greatest immediate threat to the health and welfare of mankind."² This IPPNW congress was addressed by the directors of WHO and UNICEF as well as by politicians of a stature exemplified by Willy Brandt (and who better to talk of the need for East and West to sink their differences in working together to fill the North-South gap?).

Further evidence of this growing consensus was the presence of Sir Raymond Hoffenberg, president of the Royal College of Physicians (albeit attending in an individual capacity), who chaired one of the plenary sessions, and a gathering of the world's leading medical editors, including those of the *British Medical Journal*, the *Lancet*, the *New England Journal of Medicine*, and the *Journal of the American Medical Association*, in a colloquium on journal coverage of nuclear issues. The congress also heard the results of a global medical petition, "International Physicians Call for an End to the Nuclear Arms Race," which had collected the signatures of one quarter of all doctors in the world (48% of doctors in Europe had signed).

This developing medical realisation of responsibility was captured in the opening words of IPPNW copresident Dr Bernard Lown: "Physicians charged with responsibility for the lives of their patients and the health of their communities must also begin to

explore a new province of preventive medicine, the politics of preventing nuclear war. This is not partisan politics favouring one or another group, but a new global politics to ensure that human beings continue to have a home on planet Earth."

Previous congresses have spelt out the facts about nuclear war: its medical and environmental effects, the risks of unintentional

FIG 1—Expenditures on foreign economic aid (---) and military development (—) by developed countries. (From: Sivard, RL. *World military and social expenditures*, 1983.)

nuclear war, psychological issues maintaining the arms race, and the possible effects on children of living under the threat of nuclear war.³ This meeting had two main themes. It developed the topic introduced last year in Helsinki of the current health costs of the arms race, an issue described at the congress by the director general of WHO as "not a nightmare of the future, an agony of the present." It also sought to provide a prescription for the beginning of the end of nuclear weapons by examining the case for a comprehensive nuclear test ban treaty.

Healing the agony of the present

The congress was bombarded with information on unmet health needs in the world and on what could be achieved if money and brain power were diverted from the arms race (first box). It was

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Health needs and the costs of confrontation

- 40 000 children die in the world daily from preventable diseases and malnutrition, and the same number are permanently disabled. In terms of loss of life this equals a new Hiroshima every three days.
- World spending on arms in 1985 will be over \$800 billion. WHO's entire budget (\$250m) is equivalent to three hours of this spending.
- 4.5 million children die in the world each year from diseases that can be prevented by immunisation.
- Spending on medical research is less than 20% of spending on military research world wide.
- Life expectancy at birth is 30 years shorter in Africa than in Europe.
- A cut of 10% in the military budget of developed countries could almost triple economic aid to underdeveloped countries.

eloquently addressed by Dr Halfdan Mahler, director general of WHO, and Mr James Grant, executive director of UNICEF, among other distinguished authorities. It held a special meeting of international experts on immunisation, including Dr Jonas Salk of the USA, Dr Victor Zhdanov of the USSR, and Dr R H Henderson, director of WHO's expanded programme on immunisation, to promote international collaboration in achieving the aim of WHO and UNICEF of making immunisation available to all children of the world by 1990.

The fusillade of facts confused the delegates, and initially IPPNW's exact role in relation to the immunisation campaign was not clear. A journalist at the opening press conference asked what immunisation had to do with nuclear war and had IPPNW run out of ideas on that score? The answer to his question became much clearer by the end of the congress.

The link up between IPPNW and WHO, UNICEF, and similar organisations helps both sides. It allows IPPNW to put over a more positive, less apocalyptic message, pointing out the health consequences of the arms race now as well as the dire medical effects of a future nuclear war, thus helping its prime aim of achieving the abolition of nuclear weapons. WHO and the other organisations also see advantages in IPPNW being able to feed back information to levels of medical grass roots within countries, which will lead to pressure on governments to direct resources from spending on arms to the relief of human misery. Both aims work together to make the world a healthier place to live in. As Halfdan Mahler of WHO put it, "World health and world peace must go hand in hand."

The question of what immunisation has to do with nuclear war was also answered by Dr Lown in terms of IPPNW's history. The organisation had grown out of professional collaboration and personal friendship between Lown, a distinguished American cardiologist (inventor of the defibrillator), and Evgueni Chazov, an equally distinguished Soviet specialist in the same discipline. They had decided that their patients were at risk more from nuclear war than heart attacks, and so IPPNW was born. International medical collaboration could multiply this example many times and help to break down the stereotyped thinking of East and West that underlies the nuclear arms race.

The collaboration of East and West in helping to remove the discrepancies in health and development between North and South, as well as enriching the relation between East and West, is vital in its own right. This fact was powerfully presented by Willy Brandt in his keynote address and also by Halfdan Mahler: "I am convinced that if this gap between 'haves' and 'have nots' persists it will be the fuse that sets off the biggest time bomb ever in human history" (fig 2).

This whole topic of diverting excessive arms spending to unmet

human need caused the most discussion and controversy at the congress. Some delegates felt that the movement was straying too far from its prime antinuclear purpose. Others criticised the apparent concentration on immunisation. Why save children from measles or whooping cough only to let them drink contaminated water and starve? To be fair, however, the invited experts had emphasised that immunisation was only one medical part of an interlocking array of necessary measures, including family planning, education, changing the role of women, providing sufficient food and safe water, and so on.

At the end there seemed to be agreement that IPPNW should ally itself with the immunisation and other campaigns of WHO and UNICEF, though not itself taking a direct role in their implementation.

Preventing the future nightmare

Over the 40 years of nuclear "deterrence" nuclear arsenals have proliferated vertically by the equivalent of one new Hiroshima bomb every 18 minutes. There is now a danger of another kind of vertical proliferation, up into space, in the form of President Reagan's strategic defence initiative ("star wars"). The star wars proposal was uniformly condemned at the congress, partly because any defensive measures will promote offensive countermeasures, and so on, in a spiral of increasing cost and instability. An eloquent plea against the militarisation of space and for the use of space technology for humanitarian purposes was made by Oleg Atkov, a Soviet doctor and cosmonaut, who had addressed the previous congress from the vantage point of his orbiting *Salyut 7* space station.

Another huge threat is that of horizontal proliferation. The congress heard from the Hon Warren Allmand, a Canadian member of Parliamentarians for World Order, that 10-15 countries in addition to the current five are expected to have nuclear capability by the end of the century. He explained that international agreement to prevent the further spread of nuclear weapons is embodied in the non-proliferation treaty, which came into effect in 1970. It has 124 signatories, including the USSR, the USA, and the UK but excluding France and China. Under article VI of this treaty a balance of responsibilities is laid out (second box). The quid pro quo for the non-nuclear nations foregoing development of nuclear weapons (and the status that apparently goes with them) was that the three nuclear nations promised to pursue negotiations leading to cessation of the nuclear arms race at an early date and to subsequent nuclear disarmament.

The failure of Great Britain, the United States, and the Soviet

FIG 2—Meeting of West and East with Willy Brandt, the former West German chancellor, in conversation with copresidents of IPPNW Dr Bernard Lown, USA (centre), and Dr Evgueni Chazov, USSR (right).

Article VI of the non-proliferation treaty on nuclear weapons, effected in 1970 and signed by the UK, the USA, the USSR, and 121 other countries:

"Each of the parties to the Treaty undertakes to pursue negotiations in good faith on effective measures relating to cessation of the nuclear arms race at an early date, and to nuclear disarmament, and on a treaty on complete and general disarmament under strict and effective international control."

Union to abide by their commitments in article VI threatens the viability of the whole non-proliferation treaty, which has to be reviewed every five years. Its next review is due in Geneva in September this year.

The role of third party nations in trying to get the nuclear powers to fulfil their responsibilities was exemplified in the contribution of Ola Dahlman, director of research at the Swedish National Defence Research Institute. He explained the role of a comprehensive test ban treaty in preventing nuclear proliferation and the Swedish government's efforts to this end. Over the past 10 years an average of one underground nuclear explosion a week has been detected, mainly reflecting weapon development and testing. Dahlman underlined the urgent need to revive negotiations for a test ban treaty, which would be a first step in limiting nuclear armaments (previous trilateral negotiations froze in the cold war atmosphere of 1980). Important advances in seismological verification techniques have occurred, which bring agreement on verification (an important previous obstacle) within reach, leaving only a need for political will. The achievement of a test ban treaty would resuscitate a critically sick non-proliferation treaty and strengthen it by preventing non-nuclear powers from carrying out testing.

The congress willingly accepted that a test ban treaty was no less important a public health measure than discouraging smoking or promoting car seatbelts, and IPPNW issued a call for an immediate moratorium on all nuclear testing pending the completion of a comprehensive test ban treaty. Such a treaty incorporates opposition to star wars, as key elements such as the x ray laser programme require extensive underground nuclear testing.

A "space for health" idea was also floated for future consideration: that IPPNW might support the use of satellite technology for the purpose of sharing medical knowledge and discovery across the globe.

The congress had many other parts, too numerous to mention and impossible for one person to cover anyway as many sessions were simultaneous. There were an educational "core curriculum" and

specialist sessions on various topics. I attended one of these on "psychological aspects of East-West trust and mistrust," co-led by eminent American and Soviet psychiatrists John Mack and Marat Vartanyan. Much of the discussion was on the theme of stereotyping and dehumanising the "enemy." The conclusions reached on how to deal with this were really so embarrassingly obvious that one wonders why they have to be stated to some politicians. These were, of course, that stereotyped images can be reduced by learning more about other people and relating to them personally, and especially that leaders such as Presidents Reagan and Gorbachev should know each other personally. Peace education in schools was also advocated—it is mandatory, for example, in Finland. This means, of course, not simply education on nuclear issues but a whole new philosophical approach to education encouraging self esteem, cooperative problem solving, and respect for other people.

It is now customary for the congress at its close to send messages to the presidents of the USA and USSR summarising its conclusions. This was done again from Budapest, emphasising the two main themes described above and calling for an immediate moratorium on nuclear testing. (World leaders also send messages, which are read at the opening of the congress, and this year that from President Reagan upset many delegates by its cold war propagandist tone, a fault now rectified on the Soviet side.)

For most delegates one of the most important aspects of these congresses is simply meeting doctors, nurses, psychologists, and so on from all over the world who share the same concern. This was just as true this year in Budapest, though some congress "veterans" felt that there was an obstacle in having the congress in several different sites (mostly hotels, one of which, incidentally, was the Budapest Hilton and one the Vörös Csillag or Red Star). Perhaps the next congress should have fewer overlapping talks in plenary sessions and more close working groups that report back their conclusions. But these are problems of success and growth. All seemed pleased by the warm and enthusiastic welcome given by their Hungarian hosts.

The sixth congress in 1986 will be in Cologne, West Germany, with the theme "Save life on Earth." It will be held in a congress centre on the site of a former branch of the Buchenwald concentration camp: an apt reminder of the human capacity for mass destruction which did not die with Hitler and which now requires continued efforts from doctors among others to save life on earth from the nuclear threat.

References

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- 3 Smith R. Nuclear war: preventable or inevitable? *Br Med J* 1984;288:1901-4.

WORDS BOUGIE. Everyone in this country who has learnt a foreign European language knows that there are words that have a common origin and may have an identical spelling, but which have slightly, sometimes appreciably, different meanings. For example "smoking" in German means "dinner jacket," and "les girls" in French are not the sort that join the Guides over here. Now, the French "chandelle" is a large ornamental candle and, as every schoolboy knows, it is the sort that "le jeu ne vaut pas." The currently used word for candle arose in the following way. The Algerian port Bejaia was for long the centre of the wax trade, and candles were a major item of export. Even before the French took control of Algeria in 1830 they called Bejaia "Bougie," and the wax candles they imported therefrom came to be called bougies after their place of origin. Because of their pliability at body temperature, slender candles were used to dilate strictures of the urethra and other passages and orifices, being occasionally "medicated" with caustic at the tip.

It was required of these candles (bougies) that they be smooth and supple, yet sufficiently firm not to bend or twist under pressure of insertion.¹ The

right consistency was obtained by melting beeswax 2 parts, olive oil 6 parts, and minium (red lead) 3 parts. Stiffening could also be imparted by the addition of litharge plus a trace of cinnabar, or by increasing the proportion of beeswax. The wick cannot have ensured freedom from the risk of breakage in situ, and bougies were therefore reinforced with linen, strips of which were dipped in the melted wax, then folded and rolled on a marble slab until smoothly cylindrical.¹ Rigid metallic bougies are preferably called dilators,² though the function of a pliable bougie is also that of a dilator. Nevertheless, in surgical practice the distinction between the pliable and the rigid seems to be important for nomenclature. It remains to be said that, if you wish to buy a candle in a French speaking country, ask for a bougie.—B J FREEDMAN.

- 1 Morris R, Kendrick J, et al. *The Edinburgh medical and physical dictionary*. Edinburgh: Bell and Bradfute, 1807.
- 2 Kirkup J. The history and evolution of surgical instruments. IV. Probes and their allies. *Ann R Coll Surg Engl* 1985;67:56-60.