

Book Reviews

only this reviewer but everyone connected with its production, with the exception of the fairly substantial number of its authors who are dead.

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YAKOV RAPOPORT, *The doctors' plot*, transl. Natina Perova and Raissa Bobrova, London, Fourth Estate, 1991, pp. xii, 280, illus., £17.95 (1-872180-13-2).

On 13 January 1953, the astounded citizens of the USSR heard a massive "criminal conspiracy" denounced. Prominent Soviet physicians had conspired to kill the leaders of the country by medical means. A round of arrests followed involving high-ranking physicians and scientists. This was the so-called "Doctors' Plot".

The administration forced Yakov Rapoport out of his major professional position as chief pathologist at the First Gradskaya Hospital on 14 January. He assumed that his removal was merely routine antisemitism. Later events showed that it was a prelude to his arrest. On 2 February 1953, Rapoport was still a distinguished pathologist on the staff of the Tarasevich Institute of Control of Medicinal Preparations in Moscow. On 3 February he was in Lubyanka Prison having his first lesson in MGB interrogation. A few days later, he began advanced studies in Lefortovo Prison.

The doctors' plot records Rapoport's recollections of his incarceration—fortuitously, for only two months. He wrote it some years later and it was finally published in the USSR in 1988. Though based entirely on memory, Rapoport's account is full of detail. But it is much more than a memoir from prison. *The doctors' plot* chronicles the pernicious, stultifying, and often terrifying effects of Stalinism from the 1930s until 1953.

One muted theme which presents an important message for modern readers is moral courage and our need to cultivate it. Not the adrenalin-boosted courage of jumping into a river to rescue a drowning child, but the more testing courage that exists—or does not—unaided by drama. Will an individual defy a corrupt regime by refusing to inform on a neighbour or a colleague? Can he or she adhere to ethical standards in the face of unrelenting pressure to abandon them?

The consequences of failure by individuals to rise to ethical challenges invests *The doctors' plot*. Rapoport cites several instances of unethical behaviour. One was the use of Soviet medical commissions to certify the health of physicians who later became prisoners. For example, Eliazar Gelstein was a physician incapacitated by cardiac disease. A commission of doctors proclaimed him fit for military service. Rapoport, himself a victim of severe hypertension, also was supposedly fit (pp. 86–7). Later, he realized that this charade provided a patina of legality. If he and Gelstein were physically fit for military service, they also were fit for prison. What of the ethical values of the Soviet physicians who made up these commissions?

Rapoport is scornful of two younger colleagues who, under direct orders, wrote a scathing denunciation of Rapoport's pathology textbook. This was more than two years after its publication. The negative book review was only a minor issue in Rapoport's life. Nevertheless, its publication is another example of the cynical construction of spurious legality by the Soviet regime. If the Soviet medical literature denounces Rapoport's scientific work this is one additional sign that the state has a duty to act against him. He was physically fit for prison, and as a bad scientist he ought to be in prison.

The young men excused themselves, later, on the grounds that though they were unhappy writing such a review, they acted under orders. Here is the leitmotiv of the 1945–48 war crimes trials. *Befehl ist Befehl* was the constant refrain in Europe, the Japanese equivalent in the Far East. Orders are orders. One must obey. But superior orders had limited merit as a defence in these trials, and received some weight as mitigating factors in the trials of those of low rank only. "Superior orders" should be equally unacceptable now, even though disobeying may carry major economic and political penalties.

And there's the rub. Rapoport's appeal is for honesty and courage in the face of demands by the state to behave otherwise. That is his definition of courage. But many of us lack these

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qualities, especially when we find ourselves caught in the soulless, pitiless existence Rapoport describes. Is he unfair? Even he gave the MGB the names of friends and colleagues (p. 120), though throughout the book he tells us the probable dire effects of doing so. Yet he also cites instances of men forgiving colleagues for their betrayal, acknowledging that they could not help it (pp. 210–11). And Rapoport understands that intimidation and torture inevitably create victims:

Fresh from prison, I had strong feelings on the subject and was not sure I would be able to overlook this 'betrayal.' But then I had a change of heart. I realized that one cannot demand heroism from everybody. People's powers of resistance vary greatly—from extreme tenacity to complete lack of physical courage. (p. 138)

The issue is not one that we can ignore as being of interest only to historians. For the medical profession, a related area is the self-governance of the profession. Occasionally—frequently?—physicians fail to protect patients by identifying colleagues who behave unethically or dangerously by reason of addiction, incompetence, or other causes. Where does loyalty to one's colleagues end and patients' rights take over? It takes moral courage to recognize that place and to act upon the knowledge.

Medical torture is a more heinous if less widespread problem. In Nazi Germany, medical torture achieved its worst manifestations in the concentration camps. The NSDAP perverted the medical profession and destroyed its ethical underpinnings soon after the Nazis came to power. Without the support of a body of ethical beliefs, the participation of at least a few doctors in such unethical and often murderous activities followed inevitably. Rapoport experienced torture of two banal though often effective types: enforced sleeplessness and the constant use of self-tightening handcuffs. Today, more refined methods are in favour. Increasingly, medical practitioners in the service of certain regimes sanction or administer torture. No twisting of the Hippocratic Oath or its analogues can justify the participation of physicians in such activities. Medical torture is well known to have gone on in the USSR; countries such as Chile and Lebanon and many others regularly use medical torture as part of their machinery of political control. (For a recent analysis see Gordon Thomas, *Journey into madness: medical torture and the mind controllers*, 1988.) How can we encourage medical practitioners to fight these types of ethical perversion? In these permissive times there are even some medical schools that do not administer the Hippocratic Oath.

The events of August 1991 may have ended blatantly illegal incarceration in the USSR. Indeed, the USSR itself has ended. But these events do not make Rapoport's book out-of-date. Many countries use illegal or extra-legal means to silence political opposition. Rapoport reveals yet again how powerless the ordinary citizen is in trying to fight such methods. He and his colleagues survived only because of the fortuitous death of Stalin. Most political prisoners are less lucky.

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DAVID P. ADAMS, "*The greatest good to the greatest number*": penicillin rationing on the American home front, 1940–1945, *American University Studies, Series 9, History*, vol. 93, New York, Peter Lang, 1991, pp. viii, 227, £22.00 (0–8204–1284–8).

When a new medicine is discovered and becomes known to the public, a great demand is liable to arise more quickly than large scale manufacture can be got going. Sick people and their relatives believe that a cure is available, if only they can get hold of it, and the alert media, already proud to reveal yet another breakthrough, reap a rich harvest of tragic stories.

The scenario includes suffering families, politicians eager to gain votes by fighting on their behalf, faceless doctors, manufacturers and administrators who have not the charity to hand over the medicine which would save the life of little Jennie or Billie, and a press conscientiously