The situation in Eastern Europe

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Summary

The administrative structure for the management of patients with sexually transmitted disease is described. The association of dermatology and venereology had psychological advantages for patients attending a combined clinic, but because it was considered that the future development of venereology might suffer an Institute of Venereology has been founded in Poland. The functions of this Institute are described and the organization of undergraduate and postgraduate medical training is outlined.

Introduction

In some countries of Central and Eastern Europe the campaign against the sexually transmitted diseases (STD) constitutes an integral part of the national health service and is based on systematic legislation. Although these legal regulations vary, the principles are similar. These are as follows:

- (1) A medical service for the diagnosis, and prevention of STD is available free of charge to all citizens.
- (2) The notification of venereal disease patients and their contacts is obligatory.
- (3) The contact tracing and treatment of infected contacts is obligatory.
- (4) Each case of irregularity in following treatment or attending for follow-up must be recorded.
- (5) Serological examination of pregnant women, blood donors, and some selected occupational groups is obligatory.
- (6) Persons suspected of spreading STD may be required to submit to periodical clinical and serological examinations.
- (7) National health service facilities are obliged to conduct health education in this field.

Organization of STD management in Poland

These principles are similar in each country, but methods of implementation vary, partly because local conditions and the epidemiological situation vary. It is thus not possible to describe the organization in all countries in detail, but the situation in Poland is fairly typical of Eastern Europe as a whole.

In Poland, as in many other countries, dermatology and venereology constitute one specialty and the diagnosis, treatment, and prophylaxis of STD are carried out at dermato-venereological establishments. This has some psychological advantages for the STD patients who form a minority (10 per cent. or less) and can preserve their anonymity as they are treated in the same way as patients with skin diseases. In view of persisting prejudices regarding STD in some social circles, this psychological factor is important, but recently the increase in health education has led to a more liberal social attitude, particularly in young people.

A drawback of the system is that the increasing range of interests in both dermatology and venereology will make it difficult to maintain an appropriate balance between the two specialties. Not long ago dermatological problems predominated; this had a negative effect on the development of venereology and the epidemiological consequences were serious. For this reason the Institute of Venereology was established in Warsaw. It is exclusively devoted to the problems of STD, and after 5 years work it is apparent that its creation was a wise decision. Concentrated efforts at the Institute have been followed by a decrease of 80 per cent. in syphilis morbidity and of 20 per cent. in that of gonorrhoea.

Despite these achievements it is considered that at present the existing structure of dermato-venereological clinics should be maintained until the attitude of society to STD has been changed by further educational work. To open exclusively venereological clinics will require appropriate organizational changes. At present the campaign against venereal disease in Poland is organized as set out in Table I.

TABLE I *Organization of STD control in Poland*

At the Ministry of Health and Welfare, dermatovenereology is under the authority of the Department of Health Care and Rehabilitation but administration and responsibility is to a large degree decentralized. In each of 22 Divisions the Health Department is responsible for all aspects of public health, including prophylaxis, treatment, and propaganda. In each Division the Director of the Central Dermato-Venereological Dispensary is responsible for measures against STD, and supervises the clinics in his area. These clinics are usually situated in multi-specialist dispensaries. In the whole country there are 495 dermatovenereological clinics, and the staff includes physicians, who are specialists in this field, and ancillary workers (nurses, social workers, and so on). For diagnostic purposes an appropriate network of laboratories carries out serological and bacteriological tests. For patients requiring hospitalization there are 4,330 hospital beds in the dermatovenereological departments of medical academies and general hospitals.

Education of medical personnel

There are eleven medical faculties in eleven Medical Academies. Medical students are taught in the dermatovenereological departments of the Academies. Each student follows a course of dermatovenereology in the fourth year of his studies, receiving 90 hours of clinical training of which 30 hours concern venereology.

After 6 years' study the physician does 1 year's general clinical training, but this does not include venereology. After this the physician may begin training in a specialty. After 2 years training in dermatovenereological establishments and an examination, the physician receives the title of 'first-degree specialist', and after a further 3 years' training in dermatovenereological departments he takes examinations before the board of a medical academy,

and receives the title of 'second-degree (fully licensed) specialist', which means that in the future he may be employed as head of a central dispensary or a hospital department (Table IIA).

TABLE II *Postgraduate training*

A. Specialization	
2 years of training + examination for First-degree specialist	
Further 3 years of training + examination for Second-degree specialist	
B. Special courses organized by the Institute of Venereology for doctors and laboratory staff	
(a) Recent advances in venereology	
(b) Refresher courses	

For assistant personnel a short course of dermatovenereology is included in the basic training programme. Before undertaking work at a dermatovenereological establishment a nurse is obliged to undergo practical training.

With the cooperation of the post-graduate training centre, regular courses at different levels are held for doctors and laboratory staff; these cover basic information, the latest developments in clinical and social venereology, and laboratory methods, in accordance with a programme prepared by the Institute of Venereology (Table IIB). The Venereological Section of the Polish Dermatological Society plays an important role in postgraduate training; a scientific conference is organized each year on the most important current problems in venereology, and the results of studies at the research establishments are presented. From 300 to 400 physicians on the staffs of dermatovenereological establishments participate in the conferences. Research work in STD is conducted at the Institute of Venereology and in some departments of the medical academies. Investigations in epidemiology undertaken by divisional dispensaries are usually devised by or performed in cooperation with the Institute of Venereology.

The Institute is a central research and teaching unit which comprises three departments: clinical, experimental, and administrative (Table III).

TABLE III *Functions of the Institute of Venereology*

Administrative Department	Experimental Department	Clinical Department
1. Planning, organization, and coordinating research		
2. Elaborating methods of STD control and health education		
3. Consultation and supervision of the work of all health service institutions engaged in controlling STD		
4. Organizing postgraduate training in venereology.		

The Institute supervises and coordinates the work of all Health Service establishments engaged in controlling STD. It is responsible for:

Planning, organizing, and coordinating studies in STD control;

Elaborating methods of combating STD;

Writing and publication of material for health education;

Planning and organizing undergraduate and postgraduate training of physicians and laboratory personnel.

The Institute cooperates with the Mother and Child Institute in the serological examination of pregnant women (the prevention of congenital syphilis) and in combating gonorrhoea in women (mass screening for gonorrhoea in gynaecological clinics).

The Central Commission of Venereal Disease Control headed by the Vice-Minister of Health and Welfare includes representatives of various ministries and institutions the cooperation of which is vital for solving the problem of STD in every country. The Ministries of Culture, Education, Transport, Defence, and Internal Affairs, such Institutions as the Red Cross, and youth organizations all assist in studying the epidemiological problem and in coordinating action in cooperation with the Ministry of Health and the Institute of Venereology.