Editorial

The “Cuban Epidemic Neuropathy” of the 1990s: A glimpse from inside a totalitarian disease

Pedro Coutin-Churchman

Clinical Manager, Department of Clinical Neurophysiology, Ronald Reagan UCLA Medical Center, Los Angeles, California, USA

E-mail: *Pedro Coutin-Churchman - pchurchman@mednet.ucla.edu

*Corresponding author

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Abstract

During the 1990s, Cuba was struck by a rare epidemic disease. Up to 50,000 people were affected by a pathology compromising primarily the optic nerve but also peripheral nerves and even spinal cord. This is a testimony from a direct witness and participant in the initial study of the epidemics showing that in spite of claims of a “multifactorial” etiology, still in the literature, the root cause of this disease is just result of the deliberate deprivation of the most elementary economic rights by extreme Government control over a population left unable to tend to its elementary survival by itself, in spite of a thorough Government-sponsored, universally celebrated Universal Healthcare System.

Key words: Neuropathy, malnutrition, public health

Optic neuritis is not what you would normally expect to see coming out of the blue as an epidemic outbreak. Its annual incidence globally is approximately 5/100,000. So it should not be hard to imagine that any Health Authority would be shocked and awed by the almost abrupt appearance of nearly 400 cases of optic neuritis in a remote, poor, low populated area of a poor Third World country. This was precisely what happened in Cuba in the early nineties, when people suddenly turning blind showed up by the dozens on remote medical posts of southern Pinar del Río.

Pinar del Río is the westernmost and perhaps the poorest province of the poor Cuba, but curiously the same one having in its southern side the plains of sandy lands where the unique tobacco leaves used in the making of the worldwide famous Churchill, Romeo-and-Juliet, Partagas, Cohiba, and other renowned Cuban cigars grow. Sadly, the big money the rich and famous spend in buying those cigars have had no reflection whatsoever in the life and pains of the inhabitants of those lands, not a single penny spent by the likes of good Arnold Schwarzenegger to enjoy their wonderful cigars. And it was precisely here when in early 1991 optic neuritis cases started flourishing like mushrooms.

Obviously, for an establishment rooted inherently in the concept of a besieged fortress to justify its very existence, facing any odd situation, especially something as bizarre as a sudden explosion of optic neuritis, brings immediately the suspicion (or the hope) of a deed from El Enemigo. The Maximum Leader of the Revolution, The First Secretary of the Cuban Communist Party and President of The Council of State and the Council of Ministers Commander-In-Chief Fidel Castro Ruz (to make a long story short, from now on just El Comandante) immediately saw that crystal clear, as usual, with His unique foresight and wisdom.

For that reason, a team composed by several Cuban clinicians and researchers from the National Institute
of Neurology and Neurosurgery (from which at the time I acted as head of Clinical Neurophysiology), the Institute of Tropical Medicine, the Institute for Hygiene, Epidemiology and Microbiology, and other scientific institutions of Havana was mobilized to Pinar del Rio to try to find an answer, and concretely, to unearth evidence of biological or chemical warfare from El Enemigo, in other words the United States of America, and to show it to the world as an evidence of the intrinsic evilness of the vicious and ruthless imperialist enemy.

However, when we arrived to the site and started seeing the patients, nothing besides its explosive appearance resembled the epidemiological pattern of a biological-borne disease. All the tests searching for viruses or other agents turned out negative, so we could not find anything relating the disease with activity from El Enemigo. Evidences from electrophysiological tests demonstrated axonal involvement. It was quickly demonstrated that all patients had extremely low blood levels of several B-complex vitamins. However, when contrasted to control subjects including ourselves, the levels were not so different. Another bizarre and intriguing initial observation was that, contrary to the usual, the disease was more prevalent in men that in women.

We could immediately ascertain that one common feature in our patients was smoking. The most frequently affected were male smokers, followed by female smokers, female nonsmokers and male nonsmokers. Pregnant women, elderly people, and children were almost not affected. We found no patient younger than 7 years old.

That was (or should have been) the last nail on the coffin of the El Enemigo’s biological or chemical warfare theory, and to certain extent to the possibility of an airborne toxic chemical cause. It should have affected everyone, without sparing children.

However, the overwhelming prevalence of smoking among these patients coming from a tobacco-growing land led us to search for the possibility of some pesticide or chemical fertilizer used in the vast local tobacco plantations as a possible contaminant on the cigars and cigarettes so avidly consumed by the patients, thus causing a toxic neuropathy. At this point in time it was already evident that the optic nerve was not the sole structure affected. Many patients showed evidence of dorsal column involvement, very much alike to pernicious anemia, while others had a predominantly peripheral neuropathy. So this was not (as some of us had initially thought) just a tobacco-alcohol amylopecta.

Unfortunately, the hypothesis of a toxic compound used in the tobacco plantations as a cause for the disease was also short-lived. One day, someone called our Director at the time, Dr. Santiago Luis, and told him (in the uttermost secrecy) that looking in that direction was useless since cigarettes made for internal consumption in Cuba did not contain local tobacco. The cigarettes sold in the government-owned markets open to everyday Cubans were made out of foreign tobacco purchased at ridiculously low prices by the Cuban government at certain island in the Mediterranean (I can’t remember if that someone said Sicily, Crete or Cyprus), which was not allowed to sell its tobacco in international markets due to its extremely high tar content. Instead, the superb Cuban tobacco leaves, just like shrimp, lobsters, oranges, and other exquisite national products were (and are) jealously collected by Government officials and used exclusively for export-bound cigars since (in the words of the official Newspaper) “given its high international market value they are solely devoted for exportation and, logically, they are not distributed to the population”.

One very peculiar trait of El Comandante’s lingo (automatically becoming official Cuban government-owned press lingo) is the subtle distinction implicit in the use of the term “The Population” as opposed to “The People” to name the same entity according to the circumstances. When El Comandante demanded heroic sacrifices, like sending men, women, and kids from the cities to the fields for months to work for Him as “volunteer laborers”, or to fight and die for Him in foreign wars like Angola and Ethiopia, we were called “The People”. The gallant, heroic, glorious, and combative People, We The People, always willing to sacrifice ourselves for the Revolution, the Party and El Comandante. However, when the Government had to deal with the burden of providing the always scarce food, clothing, and sheltering to the same folks, we were called “The Population”, an annoying nuisance whose petty needs had to be taken care of somehow, distracting the Revolution and El Comandante from its supreme goal of achieving Victory. It is usually forgotten that the Government was the only allowed provider for The Population just because the latter had been thoroughly forbidden to fend for itself for almost 40 years, that is, to produce and trade the basic goods necessary to fulfill their needs, like food, clothing, and housing. According to the law, The Population had to live out of the monthly rations allowed by the Government and had to patiently wait until the day the Government, if ever, decided to assign them an apartment to live, all this since the early sixties. Anything else was black market and hence illegal and punished to the extent of the Law with prison, hard labor, and confiscation.

But going back to our main goal here, the story of the so-far unknown disease we used to call colloquially just “The Neuritis”, while we were busy trying to find out its cause and characteristics, the disease was quickly propagating from west to east along the whole country and in few months the affected population reached the thousands.
At this point, while reviewing the literature, our Neuro-Ophthalmologist Dr. Rosaralis Santiesteban found and old report from 1947, describing a similar disease observed in captives from prisoners of war (POW) camps in Southeast Asia during World War II, which was associated with malnutrition and vitamin deficits. She also found other papers describing the same symptoms in Jamaican slaves at sugarcane plantations living on a diet composed exclusively of sugarcane juice, cassava (yuca) and smoking tobacco. The presence of cyanide in the cassava (yuca) root and in raw cabbage was documented, as well as in tobacco smoke.

This was a turning point of our research: What had cassava and cabbage to do with all this? A little bit more of history is needed to understand the importance of this discovery.

Since the collapse of the Soviet Union 2 years earlier, the lifeline that artificially sustained the Cuban Socialist experiment was essentially cut and it was left on its own. For decades the products of Government-owned farms, or the Government-owned great fishing fleets whether it was milk, meat, pork, fish, or any other source of protein were almost never seen in the Government-owned markets in which The Population was allowed to buy their rationed allowance (even the last little mom-and-pop shops was confiscated by the Government in 1968).

Fortunately, there was something called The Strategic Reserve of the Revolutionary Armed Forces, consisting in big warehouses in some conveniently out of sight places. These warehouses were filled with several types of canned meat and other long-term food items sent from the USSR and other countries of the Eastern Block in order to feed the Army. When these goods approached their expiration dates (usually around 2 years) they were extracted from the Reserve warehouses and sent to some selected government-owned markets in Havana and other main cities where The Population could buy them at reasonably high prices to supplement its meager ration diet. That was the main source of protein The Population had available for around two decades. But all this came to an abrupt end when the Wall fell.

In contrast, at some point during the few years the Gorbachev’s Perestroika experiment lasted, someone within the Cuban Government got inspired and had the wild idea of allowing the few “private” farmers still surviving the two Agrarian Reforms El Comandante implemented in the 1960s, still owning tiny farms comprising about 5% of the fertile land in Cuba, to sell their self-consuming allowance in some sort of Farmer’s Free Market.

The self-consuming allowance, a part of the Agrarian Reform Law, was supposed to be up to 15% of the production of the tiny farms the surviving “private” peasants were allowed to keep for their own self-maintenance, but not to trade or sell it. The remaining 85% had to be sold to the Government at Government-regulated prices to be sold later to The Population as their assigned rations at the Government-owned markets. However, for decades most of this 85%, together with all of the supposedly vast agricultural production (according to the newspaper and the TV) from the Government-owned farms, somehow vanished along its way to the usually empty Government-owned markets and hence were seldom seen in The Population’s table. There was a popular joke about some scientist who won the Nobel Prize for inventing a device that when connected to a TV set will allow the plantains, potatoes, fish, and pork shown in the Cuban news to be materialized at home, sort of an anticipation of modern day 3D-Printing.

However, when the first Farmer’s Free Markets started to appear, albeit at high prices suddenly there were plenty of potatoes, milk, fruits, beans, lambs, eggs, chicken, pork, and many other forgotten goods. So in few months the chronic Population’s flirtation with hunger was alleviated with only the 15% of the production of the 5% of the fertile land in Cuba, and everyone had a chance to get a reasonable share of protein. All of this came also to an abrupt end when the Wall fell.

At that point, as a way to express His rejection to the heretic Perestroika ideas guilty in His opinion of bringing down the supposedly eternal Soviet colossus, El Comandante decided that He would no longer allow anything even remotely smelling a little bit like Capitalism. The Farmer’s Free Markets suddenly disappeared and with the last decade of a century that promised us endless progress we entered in what El Comandante called “The Special Period in Peace Time”, the equivalent of the worst nightmare of a Post-War wasted land but with no end in sight. The protein was gone and The Population was left just with the old strict ration of five pounds of rice, half a pound of (usually black) beans and half a liter of cooking oil a month plus four eggs each 21 days per person, but relief from the Strategic Reserve leftovers was no longer available. However, following its advertised humanitarian tradition, the Government allowed children under 7 years old, seniors over 65 years and pregnant women to keep in addition their supplement of a daily bottle of milk. The latter also received a vitamin supplement. These rations were complemented by the unpredictably sporadic supply of an ersatz of grind meat made up of soybeans or, more frequently, cassava and cabbage. Soon after, The Population started to fall ill.

At this point, the mechanism of the Neuritis became pretty evident to us. Quoting the 1994 report from the Center for Disease Control (CDC),[2] expressing in part what we wrote in our report:

“Economic difficulties in Cuba since 1989 have
been associated with widespread changes in dietary and lifestyle patterns. For example, the consumption of some locally produced foods has increased; the availability of other foods, including meat, dairy products, oils, and fats, has been reduced; and some basic food items (e.g. rice and beans) have been rationed. Toxicity from cyanide or cyanoglycosides in cassava and tobacco can be exacerbated by relative deficiencies of B-vitamins and sulfur-containing amino acids, which are necessary for the detoxification of these compounds. In addition, because of decreased availability of fuel for transportation, alternative approaches to transportation (e.g. walking or bicycling) have increased personal energy expenditures, which are associated with depletion of B-complex vitamins.”

There was no virus. There was no toxic agent in the air, just a mixture of tobacco and malnutrition. However, why were many nonsmoking women affected? To anyone with a bit of family values could come as a surprise that these women (usually mothers) would forfeit their already teeny protein rations in favor of their children. That was how that loose end in our model, why many nonsmoking women also got the Neuritis, was explained. The effects of the cassava-cabbage, no protein diet, plus some passive smoking would suffice to unleash the toxic effects of cyanide upon the nervous system.

So we packed, went back to Havana and wrote our report describing the Neuritis as a toxic-nutritional deficiency disease like the Strachan Syndrome. It was submitted to Dr. Hector Terry, the Vice-Minister of Hygiene and Epidemiology of the Cuban Public Health Ministry (MINSAP). He read it and found it reasonable. Then Terry forwarded it to Dr. Julio Teja, the Public Health Minister. He found it reasonable, countersigned and submitted it to “The Higher Instances of the Government”, that is, El Comandante. And then all hell broke loose. Reportedly, he threw the report to the floor screaming “In the Third World people die of starvation but do not become blind! Find me that virus! Kick out these idiots and bring the Military in!”

To his eternal honor and glory, Dr. Terry had then the guts to say “You may be right Comandante, but I know that neither I nor my family will get the Neuritis”. Obviously, Terry was immediately fired. His boss the Minister Teja soon followed suit.

And the military came in the form of physicians from the Medical Services of the Revolutionary Armed Forces and the Medico-Surgical Research Center (in Spanish CIMEQ), an alias for the Ministry of Interior’s big exclusive clinic for high ranking military and Government officers hidden somewhere to the west of Havana. We were liberated of our responsibilities and returned to our hospital routine.

A couple of weeks later someone from the military announced triumphantly they had found in samples of cerebrospinal fluids of some patients the infamous virus causing the Neuritis, a sort of engineered Inoue-Mehnick virus, confirming El Comandante’s hypothesis and hence His innate genius once more and also demonstrating the ineptitude and perhaps treachery of us miserable civilians. The then Minister of Foreign Relations, the then promise now purged Roberto Robaina was immediately dispatched to the United Nations to denounce the atrocious and ruthless covert attack El Enemigo was unleashing against our heroic besieged fortress, the last (together with North Korea) sacred standing bastion of Socialism in the World.

However, soon after two things went awry: First, the infamous virus was found to be just a vulgar enterovirus out of a contaminated sample. Second, when the mostly Canadian, Italian, and Spanish tourists staying at the exclusive Foreign-Only hotels in Havana and the sunny beaches heard about a possible biological attack under way, they packed en masse and rushed to the airports. This brought an unforeseen and undesired blow to El Comandante’s finances, relying at the time in tourism as His main, almost sole source of hard currency.

I never knew what happened to the guy from the military who discovered the virus but the uproar about biological warfare was quickly silenced. However, no apology was made; no recognition of mistake was done, because that would have violated a core principle of the Totalitarian Leader Code. No matter how he is called; Fuhrer, Duce, Supreme Comrade, Dear Leader, Comandante or whatever, he is never wrong and never will be, especially when dealing with El Enemigo.

What could not be silenced was the fact that by the time there were already tens of thousands of members of The Population sick with Neuritis.

To somehow cope with the continuing problem without hurting El Comandante’s pride, 12 research cohorts to study the Neuritis, or rather the Cuban Epidemic Neuropathy, as it was newly baptized, were created in equal number of hospitals in Havana. Each one would test one of the well advertised Achievements of the self-proclaimed Cuban Medical Power, such as extract of placenta, extract of thymus, hyperbaric chambers, Aloe Vera extracts, and others, in order to find out which of them could do the miracle and earn its particular advocate the gratitude of El Comandante with the consequent material privileges, which would allow (following Dr. Terry’s suggestion) to shoo away the Neuritis from them and their families.

Then help was requested from the World Health Organization (WHO) and foreign experts including some members of the American CDC (i.e. straight from El Enemigo’s guts) were sent to Cuba to help with the mounting epidemics. But at the same time an unnamed thirteenth study group was going on secretly at CIMEQ. The treatment was not any of the
above-mentioned Achievements, but stuff as simple and vulgar as beef, cheese, poultry, and ham. Not surprisingly those were the ones showing the highest improvement. Since this cohort was secret, the results never went public but El Comandante ordered His neighborhood based control cells, the “Committees for the Defense of the Revolution” to start distributing rations of multivitamin pills (one daily) to The Population. This created yet another popular joke:

Q: Which is the similarity between a Cuban stomach and a Maraca?
A: They are both full of just air and little seeds.

At this point (mid-1993), although the Institute of Neurology had been kicked out of the research, we were ordered to discharge all our epileptic, stroke, and neuromuscular patients and admit only Neuritis patients. We studied and treated those following standard medical practices except for the addition of a Nutritional Sheet to the clinical record. The Nutritional Sheet of a typical adult patient would look like this:

Q: When was the last time you ate eggs?
A: One month ago.
Q: When was the last time you drank milk?
A: Six months ago.
Q: When was the last time you ate meat?
A: I don’t remember…

Few weeks later, we were told an expert from the CDC would visit our Institute to see some of our patients and discuss them. Febrile preparations to give a proper welcome to the illustrious visitor were made, including the disposal of all of our Nutritional Sheets to avoid giving him any sort of bias.

The man showed up next morning, saw several patients with us and then went with us to the conference hall to hold a Case Discussion. Then he said:

“I have only one question: Is this disease the Strachan Syndrome, in other words the Japanese Concentration camps disease or the Jamaican Sugarcane Cutter’s disease or not? And if not, why?”

Some of our colleagues tried bravely to deflect the question and somehow demonstrate that our disease was not the Strachan syndrome, but something else, officially called the Cuban Epidemic Neuropathy. And every time the implacable visitor reduced their arguments to dust. Until at some point, our director Santiago finally lost his temper and said something that translated to English would look like this:

“Listen buddy, we are not fools. For the last ten months we have known perfectly this is the Strachan syndrome, but we just can’t say it!”

That was the end of the discussion.

Epilogue
A year later, left out of options and perhaps a little afraid after the massive Balsero exodus crisis of 1994 and the turmoil in Havana consecutive to the deliberate sinking of a tugboat full with fleeing refugees including women and children, right in front of Havana harbor, El Comandante decided to restore in all its glory the Farmer’s Free Market and allowed The Population to own hard currency and buy food and goods at the previously forbidden Foreign-Only markets. A few months later, the Strachan Syndrome, a.k.a. Cuban Epidemic Neuropathy, was mostly gone for good.

For the most naïve observer the causal nexus between the Farmer’s Free Market restoration, the slight ease of the “internal embargo” preventing The Population to buy and sell goods and the ebb of the epidemic should be obvious. Nevertheless, the possibility of an involvement of the Inoue-Melnick virus was still being mentioned in the 1994 CDC report.[2] A couple of years later, a different team of Cuban scientists published a very interesting report in the American Journal of Public Health comparing “our” disease to a similar outbreak in 1898 they tried to associate with the US naval blockade during the Spanish-American war. When reading the paper, though, it became obvious that the previous epidemics started actually one year earlier when farming in Cuba was interrupted because the infamous Spanish military governor Valeriano Weyler ordered the peasants to be locked up in towns to prevent them to cooperate with the Cuban insurgents, inventing on the way the Concentration Camps, deed for which good Don Valeriano has never received the due credit. While the authors admit their common nutritional character, they still sustain that “the causes of (our) epidemics are not entirely clear” and invoke “a tightening of the US embargo” as the underlying factor.[3] I understand there is not much else they are allowed to say in public. They are still there.

In summary, it should be clear that the root cause of this epidemic was nothing but the result of the iron-fist hold of an utterly incompetent Totalitarian Government over a Population deprived of its most elementary economic rights by extreme Government control and left unable to tend to its elementary survival by itself, in spite of a thorough Government-sponsored, universally celebrated Universal Healthcare System. This might have been just the result of an experiment on the limits of Absolute Government Control.

At that time I had already got my chance to leave El Comandante’s island and start a new life somewhere else, free of the risk of Neuritis. Yet 20 years later, every time I hear some people calling the President of the United States “The Commander in Chief” a chill runs down my spine…

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 Commentary

This excellent article by Dr. Pedro Coutin-Churchman, former Head of the Department of Clinical Neurophysiology at the Institute of Neurology and Neurosurgery in Havana, Cuba, is a very important contribution to the medical literature in general and Surgical Neurology International in particular.

This historical review article is poignant, while remaining objective, informative, and insightful. Most importantly, it demonstrates how a once prosperous country, judging by the standard of living of most (not all) of her inhabitants and economic parameters (except industrialization), was a first World Nation despite its location in Latin America—that is before the totalitarian Revolution of the Castro brothers in 1959.

This article recounts the epidemic of optic neuritis and sudden onset of blindness that affected Cuba in 1991, despite the much touted “advances” of socialized (free) medical care in Cuba under the Revolution. As such, this article is reminiscent of the public health saga of Dr. Dessy Mendoza Rivero, the Cuban physician who was arrested for investigating, exposing, revealing and then forcing the Cuban communist government to admit the existence of a raging secret epidemic of dengue fever in 1997 in the city of Santiago de Cuba, the second-largest city in the island.1,2

Both of these episodes, as well as the lesser known epidemics of leptospirosis, hepatitis, even typhoid fever, that have affected Cuba are symptomatic of a deterioration of not only medical care but also of basic nutrition, hygiene, and sanitation in socialist Cuba, contrary to the fraudulent praise heaped upon Cuban health care by such luminaries as Sean Penn and Michael Moore.

In this article, Dr. Coutin-Churchman relates how malnutrition due to socialism and government planning combined with toxic smoking byproducts caused the optic neuropathy resulting in the epidemic of blindness that assailed Cuba in 1991. Tens of thousands of Cubans were affected and many became permanently blind. Ponder the utter maleficence of this design: Cheap and dangerous foreign tobacco is imported into Cuba for domestic cigarette consumption, such excellent Cuban natural resources as lobsters, fruits, and Cuban tobacco are exported for hard cash, while the impoverished Cuban people are famished and fed injurious substances, including cassava and tobacco containing traces of cyanide, which are not detoxified in their bodies because of the inadequate nutrition and endemic chronic vitamin B complex deficiency in the population. Fidel Castro blamed viruses for the epidemic, biological warfare unleashed upon the “workers’ paradise” by enemies of the Revolution. Castro’s solution: “Bring in the military!” Dr. Coutin-Churchman writes: “The then Minister of Foreign Relations, the then promising, now purged, Robertico Robaina was immediately dispatched to the United Nations to denounce the atrocious and ruthless covert attack El Enemigo was unleashing against our heroic besieged fortress, the last sacred standing bastion of Socialism together with North Korea.”

Finally, with the assistance of the CDC that confirmed the findings of the original Cuban physicians who had diagnosed the malnutrition and vitamin deficiency (but were not allowed to publicized their findings), the culprit behind the epidemic optic neuropathy was found to be related to the suppression of the tiny “Peasant’s Free Market,” which was quietly restored about a year later, and a few months after that the vitamin deficiency malady, the Strachan Syndrome of blindness, had vanished by the wonders of freeing a tiny hand of the free market. Yet to this day the real cause of the epidemic continues to be suppressed in Cuba.

Before the Revolution, the standard of living and the state of health of the Cuban people were far better than they are today. Pre-Castro Cuba had a better medical care system than it has had all through the nightmare of communism. In 1958, Cuba had three times as many doctors as all of Central America. Cuba had one doctor for every 500 inhabitants, a ratio exceeded only by Argentina and Uruguay in all of Latin America. Cuba even exceeded the U.S. in some features of public health; for example, it had twice as many physicians in relation to population and a lower mortality index as well as a higher proportion of nursing staff and other public health workers.3

In 1958 the island had a well developed, superb education system too. In education and literacy, Cuba ranked at the top of Latin American countries. It ranked first in the percentage of national income spent on education, the third-highest literacy rate in Latin America at an estimated 80 to 90 percent, on par with the United States. Most school textbooks for Latin America were written, edited, and published in Cuba.

What Dr. Coutin-Churchman relates in this article about epidemic blindness confirms what Dr. Mendoza recounted in the dengue fever epidemic of 1997. That is that Cuba’s “free” socialized system of medical care is a veritable disaster, disgraceful tragic regression from the once advanced medical care system of the 1950s in the pre-Castro years.
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I strongly recommend Dr. Coutin-Churchman’s excellent article, exposing the iniquities of socialized medicine in Cuba, be published in SNI as a Historical Review at the earliest convenience. The author should be congratulated on bringing this information, firsthand knowledge, to the light of day!

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Miguel Faria

Clinical Professor of Neurosurgery (ret.) and Adjunct Professor of Medical History (ret.), Mercer University School of Medicine, President, www.haciendapub.com, Macon, Georgia, USA.
E-mail: hfaria@windstream.net

Commentary

I remember quite well the event Dr. Coutin-Churchman recalls in his excellently written article. I also recall the response of the liberal media and the leftist defenders of Castro’s totalitarian island prison. What I didn’t know was all the details that Dr. Coutin-Churchman provided us from his firsthand experience—details that are critical to our understanding of the totalitarian system and its core of lies.

What we all should learn from this, as well as from all of the other firsthand accounts of life in a collectivist system, is that centralized power necessarily destroys personal liberty and puts the individual’s life in the hands of an elite—that is, in the hands of those who literally have absolute control over life and death. As Lord Acton so astutely pointed out, “Power corrupts and absolute power corrupts absolutely”. To understand this, one must go one step further and appreciate that the worst people virtually always rise to the top position of control in a collectivist system, as discussed by Frederic Hayek in the essay “Why the Worst Always Get to the Top”.[6]

This essay describes how these elites, in this case Castro and his henchmen, uses a crisis to their “revolutionary” advantage and at the expense of an unlimited number of individuals—in this case over 26,000 people, mostly the poor. Similarly, Stalin, acting as a revolutionary social engineer, murdered tens of millions with the stroke of a pen.[10] Mao did likewise.

As Dr. Coutin-Churchman clearly shows that, in a collectivist system, where an elite wields absolute control over society, reality has no validity—everything is based on an illusion. Unfortunately, modern man seems to be unable to differentiate between illusion and reality. The collectivists merely need to speak the magical words—equality, justice, fairness—and the mass of mankind follows them as lemmings to the sea. Free medical care, free educations, free housing, and redistribution of wealth have always been the honey for the trap. And as in the case of ants, it always works.

I have spent a lifetime readings and listening to brave men such as Dr. Coutin-Churchman and Miguel Faria, who have firsthand experience within the communist prison societies and what always amazes me is how the communist deceptions, lies and propaganda methodology changes very little, but yet always works.

In speaking to a number of people and having lived a long life, I now know why it works—because for the mass of people in any Western society people do not read these accounts and have absolutely no knowledge of what has occurred in the captive nations. On one of my speaking tours I had a driver who brought me to my hotel. In transit I discovered he was from the Ukraine and I discussed some of what I had read from survivors concerning the purposeful mass starvation of 10 million Ukrainians by Stalin during collectivization of farming, which they had resisted. He told me that I was the only American he had ever met that had even heard of the event. It is absolutely astounding that an event of that barbarity and scale can occur and most in the West have never even heard of it.

The same is true of this event—most Americans either have never heard of it or they believed the later propaganda propagated by Castro—that it was all caused by the American embargo. Since this event, I have heard a number of American liberal/leftists declare that the United States should copy the Cuban health care system, as it is incredibly fairer, of higher quality and more assessable than American medicine—all of which are easily dispelled by the rational mind. Yet, such statements come not from open inquiring minds, but rather are merely parroted from professional propagandists seeking to destroy our free system.

The irony of all this is that Westerners have access to some of the best accounts and analyses of these experiments in totalitarian collectivism, yet they are
read by only a handful of people and ignored by masses of those at risk of losing their freedom. As examples, Harvard Soviet expert Robert Conquest has carefully analyzed the Great Terror as well as the communist system in general;[1] Miguel Faria has written of the Cuban takeover and gulag system[5] as has Nathaniel Weyl;[16] A great number of Soviet writers have informed us of the horrors of the Soviet system;[12‑15] Paul Hollander compiled the stories of gulag victims of communist systems around the world;[9] Yang Jisheng chronicled the mass starvation in Mao’s China[11] and the Black Book of Communism analyzes the brutality and methodology of communist systems from around the world.[3] The list of scholarly written works is almost endless and added to these works are the numerous video interviews of ex-Soviet spies and KGB agents who have defected to the West. A masterful summery of these events has been presented in a manner only Robert Conquest can deliver in his book, Reflections on a Ravaged Century.[2]

We should also appreciate that a growing number of scholarly writings are available on the unrelenting attempt by the leftists to bring down the United States, such as in F.A Hayek’s The Road to Serfdom;[6] George N Crocker’s Roosevelt’s Road to Russia;[4] Paul Hollander’s Anti-Americanism. Critiques at Home and Abroad, 1965-1990;[10] John Jewkes’ Ordeal by Planning[10] and John Earl Haynes and Harvey Klehr’s In Denial: Historians, Communism and Espionage.[7] Despite these warnings, we continue to listen to the lies and propaganda of those who would create a similar system in our own country.

This account should be a wake-up call to all physicians as to the dangers of collectivism in medicine and especially to regimentation by distant elites. The political control of medical care so accurately described by Dr. Coutin-Churchman and the horror such a system can lead too, deserves to be carefully considered by all free men.

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Russell L. Blaylock

Theoretical Neurosciences Research, LLC, Neurosurgeon (Ret), Ridgeland, MS, USA.
E-mail: blay6107@comcast.net