Polio Across the Iron Curtain: Hungary’s Cold War with an Epidemic.

In the early spring of 2020, steps were taken by governments in the so-called West which would make what was a long-forgotten part of world history an everyday reality again. In order to slow the spread of the coronavirus pandemic, measures were introduced which compelled societies to rethink their value systems and perceptions, and even many experts in various fields had little clear sense of the long-term consequences these changes would have. The current epidemic prompted nation-state governments to implement rapid and, in some cases, comparatively effective policies. In general, in the secondary literature on epidemiological history, pandemics have been viewed as transient and clearly defined periods which begin with the first cases and end with the last. This approach has exerted a considerable influence on the communication concerning the current pandemic. In her first monograph, which was published in 2018, Dóra Vargha, a lecturer at the University of Exeter, discusses the various waves of the polio epidemic in Hungary and the fight against it in the second half of the twentieth century. Significantly from the perspective of the health crisis today, she offers an entirely different approach to the concept of a “pandemic.”

Vargha’s monograph raises a question of historiographical significance when she asks whether the history of an epidemic in a given country should really be seen as coming to an end when mass illness has come to an end. This is a question with moral, biopolitical, and general implications for the writing of epidemiological history. Are we embarking down the right path, when we seek to write an epidemiological history within a “nation-state framework,” by examining a well-defined period of time? In part to investigate this question, Vargha discusses the flare-ups of polio in Hungary between 1952 and 1963 in a broader international context, and she traces the fates of survivors until the change of regimes in 1990.

The spread of polio in Hungary may serve as an appropriate empirical context for Vargha’s analysis in part because the illness was a concern not because of the high number of cases or the high rate of fatalities. It was dreaded, rather, in no small part because of the serious risk of permanent bodily harm to members of a social group whose health was seen as symbolic of the country’s allegedly bright future. According to the logic of the era, this group was supposed to determine the ultimate outcome of the Cold War as an ideological and socioeconomic conflict. Polio therefore could not be treated merely as a (nation) state affair. This
is precisely why Vargha raises the question of how and within what framework it was possible, ten years after the beginning of the Cold War, to organize a wide-ranging cooperative international medical and humanitarian effort to defeat an enemy “unfamiliar with the Iron Curtain.” And what were the social consequences of this cooperative endeavor in Hungary, a country which abutted the Iron Curtain and a country in which the protection of the population from biological threats (such as polio) was indeed an ideological question which cut to the heart of the emerging welfare society, but where the political changes which were underway at precisely this moment of history determined the country’s domestic and foreign policy positions?

Vargha addresses these questions, but she does a great deal more than that. She sheds light on the social status of modern, Western medical knowledge in Hungary in the 1950s, which was precarious in many ways. At times, it met with a skeptical or even hostile reception. Vargha also helps her reader understand a situation which, at first glance, seems contradictory. If the authoritarian political-social systems were never hesitant to use physical force to harass or even destroy individuals who lived under their reign when it seemed to serve their interests, how is it that, at other times, they were capable, when facing challenges similar to the challenges faced by the democratic societies of the West, sometimes to address the needs of their citizens, from certain perspectives, even more effectively?

The monograph consists of six chapters, which are arranged in chronological order, given the fundamental importance of the course of epidemics over time. The organizing thread, however, is not merely chronology. Rather, it is provided by the three major issues raised in the discussion, issues which are turned into analytical perspectives and which, with varying emphasis, run through the argument as a whole and outline the macro, meso, and micro levels of analysis. One of these issues is the problem of the global production and distribution of knowledge concerning polio in a global policy context in which the biological protection of citizens and the production of scientific knowledge in general were the basis for competition. Vargha’s analysis clearly shows something that historians of medical science in the second half of the twentieth century have been striving in recent years to emphasize in more and more empirical fields, namely that the Iron Curtain proved to be a “loosely woven fabric” when it came to the flow of scientific knowledge. The joint testing of polio vaccines which were originally developed in the United States (it is perhaps worth noting that the vaccine developed by Albert Sabin was first tested in the Soviet Union

757
on large populations a few years before it was used in the United States) and the polio-conferences held until the early 1960s clearly indicated wide-ranging cooperation. At the same time, an examination of the discourses in the countries involved in the fight against the epidemic also allows Vargha to identify subtle distinctions: the East-West opposition appears as a topos to be broken down, but one also has a clear sense of the dilemma that was created by the fragility of the trust the two sides had for each other in the Cold War, despite their shared achievements.

By adopting an approach that goes beyond the national framework, Vargha reminds us of the permeability of the Iron Curtain and the global nature of the flow of knowledge. Furthermore, she offers an alternative to the approach based on the assumption according to which the flow of scientific knowledge generally considered to be modern consistently went from West to East. She argues convincingly that the immunization campaign introduced in Hungary in 1959, the manner in which the state-organized program was administered, and the monitoring of vaccinations and complications later served as a model in Cuba and Brazil, and they were also points of departure for the global strategy adopted by the WHO to eradicate polio. Hungary, which was the first country to introduce a vaccination program on the national level, served as a prominent example in these efforts, but, as Vargha indicates, so did several other communist countries.

The meso-level of Vargha’s study is her analysis of biopower intentions, which she presents mostly in the context of the fight against and prevention of epidemics in Hungary. Given her comparative approach, these phenomena can be traced, at least in part, in the context of the Soviet Union and the United States, and she shows how, due to certain historical features, similar tools available in epidemic management led, at least temporarily, to different successes in the prevention of infection. In the case of Hungary, for a health care system which had suffered catastrophic damage in World War II, the measures taken in the course of the 1956 Revolution and the offers of international assistance created the foundations for the fight against polio at the end of the decade.

In the case of Hungary, the state had a strong intention to provide care for the population, and there was, similarly, a strong demand for intervention. Nonetheless, the question of state jurisdiction over children’s bodies still put the issue of the relationship between power and the individual in the foreground, as well as the question of paternalism as the fundamental stance of the socialist state. Although policy with regards to children in the modern state has tended
to see state participation in the rearing of children as essential even from the moment of birth, in order for the campaign to slow the spread of the virus to be effective, the state still needed to convince parents of the importance of its efforts and to clarify their role. Vargha shows that, at the initial stages of the epidemic, attempts by the state to insist on the urgency of protective measures appeared in the press and the narratives of health policy-makers as a common struggle by the state and parents, even if there were paternalistic motifs in the discourse. However, this rhetoric also made it possible to blame parents for the failure of the Salk vaccination in 1957.

The micro-level of the analysis concerns the discussion of the problems which arose in the everyday lives of individuals, problems which, effective international cooperation and state intervention notwithstanding, sometimes made it impossible or at least more difficult to protect the population. As Vargha’s analysis shows, the epidemic was not always taken as seriously by the general population as it should have been, and compliance with state regulations fell short of expectations, as did the actual number of vaccinations. When the epidemic flared up in 1959 and caused more destruction than it had in earlier bouts, it may have been tempting to attribute this to the decisions made by parents who went against the will of the state. However, as Vargha makes clear, defiant parents were not the only cause of the flare-up. The administrative confusion of the first vaccination campaigns and the early technical uncertainties concerning inoculation with the Salk vaccine, which was used first as a prophylactic measure, created a situation in which even large-scale immunization did not provide complete protection for the population belonging to the most vulnerable age group.

Vargha offers subtle insights into the contradictory and tense relationship between the paternalistic state and society through a discussion of a pressing issue of health care policy, and she also considers the ways in which the intentions of the state and the wishes of the population diverged or collided, sometimes because of problems with implementation and sometimes simply because of individual aims or perceptions. She does a great deal more than this, however. Because she uses a conceptualization of “epidemic” which is broad both in time and space, she also incorporates into her discussion an examination of the circumstances of those who survived the pandemic, stretching all the way up to the change of regimes in 1990. Thus, she also considers phenomena which were part of the larger strategies used by individuals during the Kádár era to assert or achieve their perceived interests, and she casts light from a new angle on the
social and political dysfunctionalities which were, ultimately, the foundation on which these strategies were built.

Furthermore, since the early 1960s, the social circumstances of the individual fundamentally determined the circumstances of survivors of the polio epidemic. Since new cases of polio began to decline, polio itself no longer constituted a medical, social, or political problem. The Heine-Medin Hospital, which had been set up during Imre Nagy’s second term as prime minister, was closed, and knowledge concerning the disease was less and less a part of a practicing physician’s immediate repertoire. In the absence of reliable, organized state care, the quality of life for the people who had survived polio and who had been left with lasting handicaps depended on their circumstances and/or the circumstances of their families. By dwelling on this question, Vargha very justifiably suggests that, even if the epidemic was cured on the larger societal status, the Kádár regime ultimately failed to provide professional medical care, available regardless of one’s social background, even though this was one of its most prominent sociopolitical aims. For survivors of polio, differences in social level were factors which had a strong influence on the individual’s ability merely to exist.

Vargha makes persuasive use, in support of her various propositions, of a diverse array of sources, including archival documents, printed sources and sources from the press, an impressive body of secondary literature, and even oral history interviews done earlier with patients. Her use of the interviews allows her to present subjective perspectives on the illness and care and treatment, thus providing, to some extent, a “patient’s view,” or in other words, a perspective which is often seen as a worthy goal in the scholarship on medical history, but which, given the nature of the sources, is hard to provide (in the case of Vargha’s book, this perspective is particularly significant in the second, fourth, and sixth chapters). The interviews also enable her to make the changes of scale which are used in the other chapters and which constitute the most exciting points of her analysis. These changes of scale vividly show the reader how the decisions that were made in the interests of protecting the population from disease (decisions which, with small changes, ultimately did provide protection) were different, during the first wave of vaccinations, on the individual level because of the administrative chaos. In other cases, the shifts in scale show how, as gradually there were no cases of new infections, the question of providing care for polio survivors was no longer an issue that could be easily integrated into the communist social vision, and thus the provision of care essentially became the
task of the families and friends who lived with or around people grappling with handicaps of various seriousness.

It is difficult to imagine a subject which could be more pertinent at the moment, considering the pandemic currently underway. But beyond its immediate relevance, given the questions she raises, the scholarship on which she draws, and the scientific and social-scientific perspectives she offers, Vargha’s book will be an essential work in the international scholarship on medical history in the next few years, as well as a substantial contribution to the scholarship on state socialism in Hungary during the Kádár era.

Viola Lászlófi

Eötvös Loránd University – École des Hautes Études en Sciences Sociales