The sitting statue of Vargas

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Abstract Medicine and health care in Venezuela have had a roller coaster evolution in parallel with advances and retreats of democracy and of efforts to modernize. The most prominent of the founding fathers of Venezuelan medicine has a sitting statue in the homonymous hospital. After a blossoming of medicine, health care, and research led by dermatology that lasted for nearly four decades, the system went into a tailspin that mirrors what took place in the governmental institutions and in the economy. The statue of Vargas seems to warn Venezuelans that if the decay goes too far, it may become irreversible.

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Introduction

Vargas, in white marble sits, on his cathedra over a black pedestal. His right hand is extended as if to issue a warning (Figure 1). The small paved open court is surrounded by corridors with pointed arches. On the walls, there are several plaques. One, in white marble, sets the opening of the hospital in 1891, another in bronze, the 100th anniversary in 1991 with the names of senior physicians. My name is there with others, many gone. Long galleries, also with pointed arches, connect the wards with the central court. They used to be full of patients in wheelchairs or trolleys, nurses, medical students, physicians, visitors... Now they are half empty. There is a whiff of decay. To the north of the old building, there is a newer one, the emergency section. Its entrance is fenced off. It has been in “repairs”... for 3 years. The Institute of Dermatology is a cube of concrete to the southwest of the hospital. It is an island of activity and life in the sick hospital complex. Yet, even it is wilting at its edges; the blight is all pervading.

José Maria Vargas

José Maria Vargas returned to Venezuela after extensive postgraduate training in Edinburgh. In 1827, Simón Bolívar commissioned him to reform the medical curriculum and to become Rector of the Central University. New subjects were added to the curriculum. Vargas published books on anatomy and surgical techniques, searched the hills for useful botanicals, and described pellagra masterfully. He trained many who became prominent physicians. To cap it all, Vargas was elected President of the Republic. This was not accepted by the military, and Vargas had to resign. He died in New York, while the country went into a spin, with civil wars that lasted for decades.*

In a parentheses of peace and democracy, a civilian President started—and another completed—the Vargas Hospital. It had 600 beds and became the center of teaching.

* The uprising against Vargas was headed not by the regular army leader, General José Antonio Páez, but by former fighters against the Spanish forces, among these was the notorious Col Carujo. These irregulars felt that civilians, who had not fought against Spain, should not be in charge. Páez actually defeated Carujo and put back Vargas into the Presidency. Vargas resigned shortly, thereafter, as he realized that he had no true power and would not be able to do what he thought to be best for the country.
practice, and research. Dermatology as a subject was established in 1908. Students filled the wards, when these were not closed to them by dictatorships that erupted in the first three decades of the 20th century.

The legacy

Paradoxically, when Europe bled in the late 1930s and early 1940s, Venezuela started a new democracy and had reasonable social peace. The Ministry of Health was created, and a network of hospitals dotted the land. New schools were built. Infections with *Plasmodia* and *Ancylostoma*, as well as with *Treponemes* and *Mycobacteria*, were curbed.

The Venezuelan Society of Dermatology was created in 1936. A system of social security that included medical care and pensions was established in the mid-1940s, and the Vargas Hospital continued to train physicians that did the new work. Medical care and ethics were respected, even under a spell of renewed dictatorship in the 1950s.

The 1960s were to be the beginning of new frontiers, including a National Research Council and a National Institute of Research. The Vargas School of Medicine established formal ties with Stanford University Medical School in the early ’60s. Dermatology, recently established then as an independent department, was the standardbearer of this approach under the leadership of Francisco Kerdel-Vegas and Jacinto Convit. Graduate students were sent and received. They developed translational medicine before that word was even coined. In Venezuela, modern immunology, histochemistry, biochemistry, medical mycology, and molecular biology were created or put on the map by dermatologists or scientists connected with dermatology. In the very early 1970s, under the aegis of Convit, the Institute of Dermatology was built and functioned under a design that arranged for close contact and cooperation between clinical dermatologists, basic scientists, MD and PhDs, and trainees in several disciplines under the direction of dermatology.

In the Golden Decade, 1970-1980, the Venezuelan National Institute of Dermatology (later disgracefully renamed Institute of Biomedicine) was at the forefront of scientific productivity in Latin America. Dermatologists, including this writer, sat on the Executive Board of the National Research Council and headed several of the study committees for evaluation of projects. Venezuelan dermatology and its Institute became a model that was followed elsewhere in Latin America.

Unfortunately, the 1970s also saw the enthronement of King Oil, under direct government administration and somewhat later of corruption. Controls were set aside, a lot of money flowed in, but more out. When there was not enough, government scooped away what was supposed to be the pension, maintenance, and building funds. Again and again, hikes in oil prices postponed the reckoning, but Black Friday of 1983 made it evident that collapse had come. The whole health structure started to go down, slowly at the beginning, but then faster and faster. Privatization was used as a pretext not to bolster governmental investment in the health structure. It never functioned. Private medicine took care of the wealthy and the insured middle classes. Most of the people continued to be served by whatever existed before, but at lower and lower levels of resources and efficiency.

Current status

Beginning in 1999, a new phase of the republic was loudly proclaimed. Wealth would be distributed among all; health care would go to the people in the form of task forces, so-called Missions. Welfare would fall from the heavens effortlessly, as manna did. Some individual efforts and isolated improvements took place, particularly at the beginning. There was a feeling of participation and optimism that paraphrased a much later slogan, “Yes, we can.”

Unfortunately, even biblical manna needed some administration. It would not fall on the Sabbath, so on Friday one had to gather twice the amount. The newly proposed structures never functioned. There was no system, no efficient administration. No persons with technical know-how were there. Competent individuals were set aside. Parallel universities and schools were started by sheer improvisation. The results: a dismal lowering of standard of care and also migration of physicians, particularly the best young graduates, to foreign countries. As hospitals such as the Vargas were left to wilt, not much worthwhile came to be, except for some isolated specialty-oriented institutions. The widely read *Ultimas Noticias* newspaper now prints letters such as, “Mr. President I need a hip replacement,” and “Chávez! I voted for you, give me a pacemaker.” Items such as these used to be provided years ago without much ado by hospitals and social security.
Conclusions

All political systems have had to learn—and will always have to learn—that only G-d can say “Let there be . . .” and there will be . . . For the remainder, hard work, planning, and ability are required. Health, both in research and its application, abhors improvisation. Earthquakes can destroy in minutes, but reconstruction takes so long.

José Maria Vargas taught only after many years of training. The hospital that bears his name has been functioning for more than a century. A government or political system may allow it to rot, but then it may become too late eventually to reopen or even to replace it or other ones under similar conditions. Could this be the warning meant by Vargas’ extended hand?

Postscript

This contribution expresses my personal points of view and not of those of the Vargas School of Medicine or the Central University of Medicine. There are no conflicts of interest. The figure of Vargas was obtained from the Internet, but it is in the public domain and has been published innumerable times.