

## Fiftieth anniversary of the Medical Movement in Mexico (1964-1965)

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### Abstract

*This Symposium highlights the recognition that this year reaches half a century of the Medical Movement (1964-1965), and 27 years of publishing the book titled, "Documental Memories and Reflections" ("Crónica Documental y Reflexiones") edited by the Faculty of Medicine of the UNAM, at that time directed by the prestigious Dr. Fernando Cano Valle. Our President Dr. Graue indicated that Dr. Alejandro Treviño-Becerra assumed the coordination of this session with the commitment to be published in the Medical Gazette of Mexico for current and future generations. The Academic participants were: Norberto Treviño García-Manzo, president of the Academy in 1988. Dr. Felipe Mota Hernández was the Recording Secretary of the Mexican Medical Alliance ("Alianza de Médicos Mexicanos"). Now he is the Dean of the Children's Hospital of Mexico "Federico Gómez". Dr. Cesar Gutiérrez Samperio, surgeon at IMSS and professor at Medicine School, University of Queretaro until a year ago. Dr. Fernando Cano Valle, former Head of the Medical Faculty, UNAM, presently a researcher in Medicine and Human Rights in the Institute for Juridical Research, UNAM. I quote the Academic Treviño Zapata: "I believe that it will be difficult to bring again the conditions and circumstances that made possible the vigorous realization of the Medical Movement, the enthusiastic and hopeful creation of the Mexican Medical Alliance, and the promising start and progress of the integration of the national medical union."*

**KEY WORDS:** Alliance. Labor achievements. Retaliations.

Presented as part of the symposium "Reflections for the 50th anniversary of the 1964-1965 medical movement". Ordinary session of the National Academy of Medicine of Mexico on September 2, 2015.

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Date of reception: 12-02-2016  
Date of acceptance: 19-04-2016

Gac Med Mex. 2017;153:234-51  
Contents available at PubMed  
www.anmm.org.mx

## Symposium presentation

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This session is highlighted with the series of events that in 2015 reached its 50<sup>th</sup> anniversary: The 1964-1965 Medical Movement in Mexico, and by the fact that 27 years have elapsed since the appearance of the book that, with the subtitle *Crónica Documental y Reflexiones* (Documentary Chronicle and Reflections), was published by the UNAM Faculty of Medicine, then directed by renowned doctor Fernando Cano Valle.

I thank Dr. Graue for programming this ordinary session to commemorate the 50<sup>th</sup> anniversary of the Medical Movement undertaken by the Association of Intern and Resident Physicians (AMRI – *Asociación de Médicos Internos y Residentes*) and the Mexican Medical Alliance (AMM – *Asociación de Médicos Mexicanos*) to vindicate the profession and to put on course the country's medical care of that moment and looking into the future, now our present.

The motivations on why this session had to be included in the Academic Program are, in my opinion, three:

1) Academic motivation. As the book documents, out of 248 medical organizations from the entire country that attended the AMM integration on January 18, 1965, 15 representatives were Medical Academicians in the Provisional Governing Council. Of the 39 members, five were academicians. In the beginning, a commission of five, out of which three were academicians, was designated in the *Hospital General Medical Society*, with other two joining later to write the list of demands and the statutes of the Alliance. In the book *La Academia Nacional de Medicina, 150 Años de Actividad Ininterrumpida* (The National Academy of Medicine, 150 Years' Uninterrupted Activity), the chapter written by Alberto Lifshitz reads: "Although the National Academy of Medicine did not explicitly participate in this movement as an institution, or did it discretely, several academicians did; the two most notorious leaders, Ismael Cosío Villegas and Norberto Treviño Zapata, were Academy members". Another outstanding event is that Treviño Zapata read, in this Auditorium, on July 4, 1984 ordinary session, the summarized version of his book, a document that was published by the Medical Gazette of Mexico in February 1986 volume 122, and made full submission of the Alliance's annexes and appendixes and bulletins "in order for it to be part of the historical heritage of medicine in

Mexico", and stated: "An advancement was marked in the achievement of the best medical services for the national collectivity".

- 2) The second motivational is generational. Many of my graduating year's schoolmates, which, by the way, are about to celebrate our 50<sup>th</sup> anniversary, had concluded the fifth year of medical school and had to wait for months to be accepted as undergraduate interns until the AMM declared to "publically thank Mr. President of the Republic for having agreed to satisfactorily solve the problem posed by the AMMRI's demands, where the State recognizes intern and resident physicians the category of workers, who at the same time entitled to professional education". The Medical Movement determined the initiation of our professional life and alerted us to wisely perform within the infantry of the the National Medical Movement.
- 3) The third motivation is of a familiar nature, but I shall leave it for another occasion.

In this session, the following academicians did participate:

- Dr. Norberto Treviño García Manzo, Chairman of this Academy in 1988, Minister of Health in the State of Tamaulipas until 2016. He will be substituted in this occasion by Academician Carlos Varela Rueda, who will read the manuscript.
- Dr. Felipe Mota Hernández, who was the Recording Secretary for the Alliance, and is the dean of the *Hospital Infantil de México Federico Gómez*. Since he is a nephrologist, we are bound by professional and friendship ties.
- Dr. César Gutiérrez Samperio, an IMSS surgeon who emigrated and was a prominent professor at the Medical School in the *Universidad de Querétaro* until 1 year ago; Doctorate in Bioethics by the *Universidad de Alcalá de Henares*, Spain.
- Dr. Fernando Cano Valle, former director of the UNAM Faculty of Medicine, currently a productive researcher on Medicine and Human Rights at UNAM's Institute for Juridical Research.

Upon suggestion from academician Raúl Carrillo Esper, we endeavored to produce a facsimile edition of the book *El Movimiento Médico de México 1964-1965. Crónica Documental y Reflexiones*, which was accurately published by *Editorial Prado*.

## Introduction

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Over the past lustrum, anniversaries have been celebrated about events or institutions related to national medical life. Among others, the first centenary of the Mexican Revolution and the National University, the 80<sup>th</sup> anniversary of the creation of the Social Security Institute and 70 years of some National Health Institutes and of the National Academy of Surgery, in addition to remembrances of Mexico's Olympic Games and, last year (2014), the National Academy of Mexico 150<sup>th</sup> anniversary, which was extraordinarily successful, solemn, productive and adequate to its significance.

The University, the Social Security Institute, the Ministry of Health and the academies are a set of creations and symbols that define Mexican medicine. In the light of this, the Medical Movement 50<sup>th</sup> anniversary cannot go unnoticed, and this is why this commemorative session is celebrated, and there will be celebrations for the rest of the year: publications, books, interviews, academic sessions, etc.

Dr. Fernando Cano Valle, who belongs to my graduating year and was the director of my Faculty when I was a nephrology postgraduate professor, with whom I had professional contact when he belonged to the *Hospital Juárez de México* Governing Board; when he was the *Clínica Londres* director, he helped us to install one of the first modern hemodialysis units of this country. When analyzing his trajectory as a medical leader, we can perceive his talent, people skills, pragmatism, enthusiasm and perseverance.

After some brief talks, we decided to carry out at least three events to commemorate the initiation of the Medical Movement, our movement:

- 1) First, the September 2 National Academy of Medicine session, which was held thanks to the understanding of another great director of the Faculty of Medicine, Dr. Enrique Graue, and with the sympathy of another great director of the Faculty of Medicine, who is now concluding his second rectorship at the UNAM, Rector Dr. José Narro Robles.
- 2) The second task is to republish in a facsimile volume the book *El Movimiento Médico en México 1964-1965, Crónica documental y reflexiones*, written by Norberto Treviño Zapata, an illustrious Mexican doctor, university professor and also an academician. The book in question comprises 243 pages,

as well as documentary material composed of 203 appendixes and 13 annexes, in addition no. 1 through 10 bulletins published by the Alliance.

- 3) The third one was to gather at the Academy premises to listen to presentations describing some medical specialties' current status, and dissertations on the legal and regulatory framework of healthcare in Mexico.

The book by Dr. Enrique Cárdenas de la Peña, *La Historia de la Academia Nacional de Medicina; el tramo de los grandes maestros, 1926-1964* (History of the National Academy of Mexico; period of the great teachers, 1926-1964), recently published by the National Academy of Medicine, concludes that by the year 1930 there were Medical Unions in Mexico and, in 1950, Dr. Efrén del Pozo and other illustrious former chairmen of the Academy discussed on the creation of a Mexican Medical Confederation and of the National Medical Association in 1959.

My colleagues participating in this seminar lived the medical movement more internally over little more than one year it lasted. I lived it intensely because I was a medical trainee, and because my father, Norberto Treviño Zapata, was wrongly characterized by the press as the leader of the Medical Movement.

In another book, *Norberto Treviño Zapata. Hechos, Escritos, Libros* (Norberto Treviño Zapata. Facts, Writings, Books), it can be discerned that he was a natural leader, creative in all professional, political and social activities he undertook in his fruitful life. Its content will spare me praises, misrepresentations or even reestablishing useless controversies about his participation as one of the Mexican Medical Alliance leaders. But I would like to make use of this tribune to clarify to a couple of authors that, when writing about the movement history, but not documenting it, claim that he was forced to run out of the country, as other leaders did when they felt threatened by the repressor government.

In the book on the Medical Movement pages, its author states: "Meanwhile, more than 500 colleagues had been laid off in different dependences and many had been threatened with indictment, apprehension and jail for crimes the president of the Republic sentenced in the House of Representatives when he presented his state of the union address. In many of us who were laid off, a sad moral and professional situation was generated. Many were left in terrible professional and institutional isolation and solitude, suffering economic woes; they have behaved with us as in we were outlaws, depriving us from elementary signs of consideration and comradeship".

I make it clear: Norberto Treviño Zapata remained in Mexico and yes, in effect, he left the country years later, when president Echeverría appointed him as ambassador in Italy.

Pages 147 to 149 highlight:

“It’s just fair to underline the deserved credit that since these early days corresponds to the *Hospital General de México*, S.S.A., Medical Society. In its midst, the thought and the purpose to imprint the Medical Movement a national and institutional nature was conceived and forged, marking guidelines that were captured in January 18, 1965 manifesto, a historical document, a fundamental letter that constituted the doctrinal definition, postulates and objectives of the Medical Movement.”

“Such vital and defined impulse by the referred Society tempered the solitary, vigorous start of the National Medical Movement, and it also determined the operative tactics and strategies that were to be imprinted to its initial and first stages.”

“We will always insist in our postulate expressed by the National Medical Alliance in our January 18, 1965 Manifesto: the practice of medicine requires, to be able to satisfy Mexican people’s needs in matters of health, a complete restructuration, both in terms of conception and methods, as well as goals. A harmonic, comprehensive restructuration that is consistent with Mexican reality.”

“In addition, an essential purpose is to call National Medical Unity to expose our opinion and points of view on how medical-social problems that affect medicine teaching, practice and application on the community should be confronted, addressing the required studies and works for the restructuration of medicine in the country.”

“The State will assume its responsibilities on medicine renovating and restructuring measures, having the medical class participate by addressing the study of the problems Mexican Medicine is experiencing, as well as its application to the country’s inhabitants, and enable its adequate planning by starting and continuing with the reform of its structure, starting from its teaching, organization and application.”

Of the summarized version, published by him in the *Gaceta Médica de México* (February 1986), I highlight two paragraphs:

“On February 18, 1965, an agreement of the President of the Republic was published, with a salary increase for resident physicians. It was regarded as an adequate answer to AMMRI’s demands and to the Alliance Manifesto, where the human, social and economic reality the professional medical class was living

through, as well as the justice their movement was built upon, had been exposed.”

“President Díaz Ordaz was far from imagining that for long months, for the entire year of 1965, he was to remain closely linked to the medical problem, which in the beginning he had considered to be of little importance and that went on growing until it represented an absolute conflict of the regime.”

Fernando’s main concern when organizing this Seminar was the attendance of young doctors, who are unaware of the Medical Movement, and I must say that, in 1964-1965, medical students attended as respectful audience the scenarios where the anguishing, prolonged and prolific meetings, first of the AMMRI, then of the Alliance, and many times combined, took place. Young undergraduate students marched twice to Mexico City’s *Zócalo* (main square), in the Alliance Doctors’ Contingent; among thousands, my schoolmates Rojas Dosal, Jesús Gudiño, Jorge Pastor, Miguel Ángel Paredo, Rosa María Ortega, Guillermina Merino, Felipe Pérez Gallardo; among the students, Alberto Lifshitz, who wrote the book *El Pensamiento Médico y su Proyección en 150 Años* (Medical Thought and its Projection in 150 Years) (of the Academy’s Collection); the two more conspicuous leaders were Norberto Treviño Zapata and Ismael Cosío Villegas, who were members of the Academy; “when quoting Pérez Horcasitas, underscores the Director of the UNAM Faculty of Medicine, Donato G. Alarcón (academician), he expressed his opinion, almost always disqualifying the forms”.

Young medical trainees had to wait in uncertainty whether the IMSS would enforce the undergraduate internship contract, the beginning of which was postponed until March 1 (2 months after the date the school year was supposed start), and those of us who entered the undergraduate internship had to tolerate some unjustified complaints from staff doctors that not only did not support the Medical Movement but were against it, in spite of having benefited from the considerable salary raise the IMSS Union had achieved.

Some of us embraced and lent support to the 1968 Student Movement. The awarded writer Elena Poniatowska bears witness of this in her book *La Noche de Tlatelolco* (The Night of Tlatelolco).

Our experience and teachings of more than 50 years in medicine (which corroborates that life expectancy at birth has effectively increased in Mexico) fade when at trying to improve medical care in Mexico we hear arguments of quality and warmth, but other concepts such as knowledge, consistency, complaisance and consciousness are omitted.

There are two concepts that place us on the course of that year of 1964:

“As every personal, group, professional collectivity medical task or work, the 1964-1965 Medical Movement was honest, vigorous, and transparently independent. Thus was it undertaken by the Mexican Medical Alliance in order to improve present things and project a healthy future.”

“I consider unlikely for the conditions and circumstances that enabled the vigorous occurrence of the Medical Movement, the enthusiastic and hopeful creation of the Mexican Medical Alliance and the promising beginning and progress of national medical unity integration to be able to coincide again.”

In the *Revista del Hospital General* (General Hospital Journal) (no. 3, 2011) published during Dr. Francisco Navarro management, a review appeared on the Medical Society session to celebrate a century of Treviño Zapata's birth.

Dr. Treviño Becerra made the following reflections:

“It wouldn't be a surprise that when he worked on the General Statute of Health and on the formulation of a project on the National Health system, Dr. Soberón had the events of the so-called Medical Movement, occurred only 12 years prior, in mind:

I) Surely when in the Medicine and Surgery Academies the creation of the CONACEM was outlined by doctors Víctor Espinoza de los Reyes, Norberto Treviño García Manzo, Enrique Wolpert and José Rojas Dosal, among others, the postulates of the Mexican Medical Alliance were still current.

II) When the Minister of Health, Dr. Juan Ramón de la Fuente, started the creation of the CONAMED, his reads included the book *El Movimiento Médico en México. Crónica Documentada y Reflexiones*.

III) The creation of the so-called “*Seguro Poular*” (people's health insurance) by Dr. Julio Frenk and his collaborators has direct backgrounds in the 1965 Medical Movement, 40 years later.”

Pedro Ramos, in the In Memoriam pronounced and both published in the *Gaceta Médica* and repeated in the book *150 Años de la Academia Nacional de Medicina a través de los In Memoriam* (150 Years of the National Academy of Medicine through In Memoriam articles), wrote on Norberto Treviño Zapata:

“Being reintegrated to this city and to the *Hospital General*, after concluding his mandate as Governor of his natal state, Tamaulipas, in 1965, the so-called medical problem stirred up. He found himself involved as a member of the Mexican Medical Alliance Council where, unfortunately for the movement and for himself, neither his prudence, nor his experience was taken advantage of.”

To conclude, I will highlight one more paragraph of the book in question:

“The Medical Movement was unable to rescue the essential, the most precious aspect: the vigorous national medical unity we were beginning to envisage, which had established new routes for the professional and social development of this medical class with the ensuing healthy repercussions on the collectivity in the country.”

These valuable and extraordinary experiences as a professional community, which had medical and social important repercussions and left many consequences and teachings, should not be forgotten. Let's keep them alive, both veterans and especially young doctors for the future.

Thus was the 1964-1965 Medical Movement.

## Reflections on the 50<sup>th</sup> anniversary of the Medical Movement

Norberto Treviño García-Manzo

Former Chairman, Academia Nacional de Medicina de México

Commemorating the 50<sup>th</sup> anniversary of the 1964-1965 medical movement is an excellent occasion to remember the only serious, responsible document written about this social phenomenon. It is the book entitled *El movimiento médico en México, 1964-1965. Crónica documental y reflexiones* (The 1964-1965 medical movement in Mexico. Documentary chronicle and reflections). This work consists of a 158-page-long text, accompanied by 164 highly valuable appendices, thus referred to by the author.

For this reason, in this introduction I will refer to my personal vision on the motives doctor Norberto Treviño Zapata had to write the book. Treviño Zapata was a participant, a protagonist in this huge movement, and I say huge owing to its national impact and advanced conceptual content.

It is essential for young people to know what happened in those years, and why. What was it that gave rise to that struggle for the sake of medical professionals and, in general, to improve Mexicans' health? They must learn that this was a great social-medical phenomenon. In this sense, the diffusion of the book will contribute to that purpose. It is a descriptive, well founded and testimonial document and, as such, there is nothing in it that Treviño Zapata did not experience personally. Given the vehement thoroughness that characterized him when undertaking the enterprises he faced throughout his life, the work is supported, I insist, on demonstrable, objective facts, which, in case of any doubt, can be verified by resorting to the original sources. By reading it, anybody will know what happened with Mexican medicine after the movement.

It is a manuscript of deep reflection, conscientious analysis of lived and published facts and documents. In a certain moment there is criticism with regard to some behaviors of the group members and, of course, the author points at those that, in his opinion, were behaviors or postures that not only did not help, but were detrimental.

Many initiated the movement; few, very few resisted the pressure and repression of the government until the end, and almost nobody left documentary evidence of what happened. A posteriori, and putting interests, passions or ideologies aside, it can be claimed that the movement only had the purpose to seek governmental support and understanding in order to, together, and never confronted, work for the sake of doctors' dignity and Mexican medicine enhancement.

For anyone who reads him calmly, Treviño Zapata tried to leave to the reader's opinion his personal interpretation of the social, professional and group phenomena occurred during 1964 final weeks and almost the entire year of 1965, when finally, owing to the centers of power lack of understanding, unfortunately, the movement was terminated by lysis, as we doctors say.

From my point of view –and this does not represent any of Treviño Zapata thoughts–, this book brings to light his enormous republican conscience, his pure class-spirit and his great interest in the progress of medicine at the service Mexicans.

Finally, I am very pleased to be here and thank this symposium's intellectual authors for their idea and their effort, which we should broaden by means of thorough formal investigation. It's going to be an arduous task, but very beautiful and, I repeat, necessary.

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## The Mexican Medical Alliance

Felipe Rolando-Mota y Hernández<sup>†</sup>

Dean of the Hospital Infantil de México Federico Gómez

Thanks to the Mexican Society of History and Philosophy of Medicine initiative and to the participants of this session to remember an anniversary of facts occurred between 1965 and 1966 that impacted Mexican medicine.

I have the opportunity to express some reflections about this significant event, to evoke the past and its vicissitudes; it can be an example of medical professionals' daily struggle and discrete silence. What's important is the teaching it left and the immediate, mediate, and long term consequences that extend to the future.

I should make clear that my point of view is based on memories of the time I was a Recording Secretary of the Mexican Medical Alliance, and on some friends' recollections, without dismissing the scarce bibliographic references.

The omission of names is due to the fact that leadership was shared by everyone, with no distinction of age, gender, academic merit or political background. All were equally responsible, from the members of the Governing Board to the last militant.

Many generations ignore there was a medical movement and a Mexican medical alliance, either because they didn't experience it, but rather because nobody speaks about it.

It is difficult separating the Medical Movement from the Mexican Medical Alliance. They complement each other. Discrepancies, which were unavoidable, were solved even in environments of controversial ideas by majority decisions. They were always faithfully respected and fulfilled.

It was something unprecedented and that did not occur again in the entire last century; a movement from which the inherited experience should be retrieved and transmitted to new generations.

By the decade of the 60's, oil and the electric industry had been nationalized. The State exercised control over workers, peasants and laborers through labor corporations such as CTM, CNC, CNOP and the Federation of Unions of Workers at the Service of the

State; i.e., corporatism was at its peak. Opposition was strangled.

By presidential decree early in the century, the National Academy of Medicine was the federal government consulting body for matters of health of the population. However, it was not consulted and its opinion was a dead letter.

Growing industrialization of the country, with an increase in the demand of accessible health care by workers, prompted the creation of the Mexican Institute of Social Security (IMSS – *Instituto Mexicano del Seguro Social*) and later the Institute of Security and Social Services for Workers at the Service of the State (ISSSTE – *Instituto de Seguridad y Servicios Sociales de los Trabajadores al Servicio del Estado*), with the demand of higher performance in quantity, even to the detriment of quality. The result of that situation, 50 years ago, was that most doctors served as workers in public health institutions, which still happens. It was specified that doctors were not incorporated to the institutions and, as a logical result of the evolution towards medicine socialization, they were increasingly facing lack of jobs or deficient conditions for professional practice. This was even prior to what we are currently living, with doctors charging 20 pesos per medical consultation in an office adjacent to a pharmacy, whereby main profit, at the expense of the consultant's exploitation, goes to the chemical-pharmaceutical industry.

A milestone in history was the creation, in 1943, of the Children's Hospital of Mexico, precursor of the National Institutes of Health.

In the decade of 1960, residencies were starting in Mexico (with the name of trainees or interns for doctors). Hospitals opened for specialty residencies, with the concept of "cheap labor force". There was an excess of opportunities to make these residencies, with salaries or remunerated grants, although insufficient and undignified. Monthly salary for a resident at the *Hospital Infantil de México Federico Gómez* in 1960 was 390 pesos. Impossible to support a family.

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On November 26, 1964, the first resident physicians' walkout was initiated at the *20 de Noviembre* Hospital because ISSSTE's medical sub-director, in an arbitrary form, did not authorize the payment of "grant holders" Christmas bonus. The doctors protested, and in view of the authorities' lack of openness, they suspended routine services and, for this reason, 210 doctors of that hospital center, who demanded dignified salaries, Christmas bonus and safety at work, were dismissed. Resident doctors housing facilities were in awful conditions, food was bad and hygienic conditions in the kitchen were terrible. The Association of Mexican Resident and Intern Physicians, better known as AMMRI, was created.

A few days after assuming the charge as president, on December 8, President Díaz Ordaz received a group of AMMRI representatives, shielded by a demonstration at the capital city *Zócalo* esplanade. Next day's newspapers magnified the chief executive's performance and described the residents as having been reprimanded for acting incorrectly. He spoke to his cabinet and gave instructions for the residents to be received, in such a way that there was a perverse play by the Federation of Unions of Workers at the Service of the State (FSTSE – *Federación de Sindicatos de Trabajadores al Servicio del Estado*). Using the press, they attacked the residents to make them appear as inconsiderate individuals and that they were putting money ahead of Mexican people's health. However, it should be clarified that, in an ethical, responsible and honest climate, we always led the Medical Movement without harm to patients.

The President resorted to Dr. Ignacio Chávez, rector of the National Autonomous University of Mexico (UNAM – *Universidad Nacional Autónoma de México*), to convince nonconformists to drop their attitude. Dr. Chávez commitment and effort were unsuccessful. The chief executive didn't forget this and the rector paid the price with a humiliating exit of the UNAM.

The movement took place in a moment where the country was suffering a very solid authoritarian presidential rule and economic growth. However, health expenditure was preferably for building hospitals and purchase of equipment, with very low investment on doctors' salaries and habitat.

Immediately after the AMMRI was created, the Mexican Medical Alliance was born. On Monday January 18, 1965, in *Hospital General de México* José Terrés Lecture Hall, with attendance of 248 representatives of 218 medical organizations from the entire country, before a public notary, the Mexican Medical Alliance was

established. The denomination was enthusiastically welcomed, with the motto "For the health of the people and the progress of medicine in Mexico" being approved, as well as the manifesto's project.

The manifesto advocated for our medical-social and professional aspirations and postulates, as well as for the goals and purposes of the medical movement: struggling for professional and cultural improvement of the physician, as a member of a professional community that has to perform a progressively more efficient work for better quality of patient care.

Its essential purpose was to call for national medical unity to expose its points of view on how medical-social problems that affect medicine teaching, practice and its application to the population should be confronted, addressing the required analyses and works for the reform of medicine in the country.

The Alliance governance was in charge of a council formed by 50 members representing the AMMRI, different health institutions and national, state and municipal medical societies, all of them democratically elected.

The president had refused to hold a new interview with AMMRI representatives. The second presidential interview was requested by the Mexican Medical Alliance and granted in less than 24 hours, on January 20, 1965. The Alliance's council laid out the need of radical changes, summarized in five points: 1) restitution of dismissed doctors; 2) preference to occupy permanent posts; 4) satisfactory solution of each hospital's problems; and 5) change of the contract-grant terms with salary raise.

The brigades were born with the Mexican Medical Alliance. Both residents and doctors travelled to all States of the Republic to ask for affiliation and economic support from local medical societies. The enthusiasm was evident, until the white monster was machine-gunned.

Nearly one month elapsed between the first and the second walkout, an interval in which authorities and unions fixed their positions and formulated political proposals. The first unions to attack doctors were the Distrito Federal Workers' and the National ISSSTE Workers' unions, which negated union organizations' viability as legitimate mechanisms to lay out their demands to the authorities. We gave up unions and created medical labor societies, which gradually faded away then the Alliance disappeared.

During the last march we were verbally and physically attacked by Distrito Federal Sanitation and Transport Union agitators. Over 3000 demonstrating doctors

continued with our march without getting altered or responding to offenses and mistreatment, under the mandate not to give up to provocations.

During most part of the year of 1965, “silent” demonstrations were alternated with walkouts by doctors, interviews with the president, presidential agreements, attacks by unions and by the media, arrest warrants and undercover meetings in our homes to avert judicial tracking and plan next day’s activities in support of the medical movement.

Solidarity of the people and of multiple government and medical authorities was achieved.

Dr. Ismael Cosío Villegas, as the director, as well as all physicians of the Huipulco Sanatorium for tuberculosis patients, today *Instituto Nacional de Enfermedades Respiratorias Dr. Ismael Cosío Villegas*, submitted their resignation in support of the movement.

It would be an unforgivable oversight not to extend our gratitude to our faithful female workmates, the nurses, who in the *20 de Noviembre* Hospital, in solidarity with the doctors, remained secluded in the auditorium until the army’s arrival. Their condition as females and their loyalty deserve to be praised and specially mentioned.

Resident and intern doctors’ unity and struggle prompted the grouping of the national medical community. We thought that the Medical Alliance would be able to support the government and the National Academy of Medicine to promote not only the progress of medicine in Mexico, but the development of the country.

It is within this environment that the Mexican Medical Alliance was born and extinguished, with offices and sessions at Santo Domingo’s Palace of Medicine, with approval of the Faculty of Medicine’s director.

During its brief existence, salaries rose. However, by the month of June, until after three walkouts, the bonuses had been paid, but other presidential agreements had not been fulfilled and, therefore, the Alliance agreed the third presidential interview, after which staff doctors were granted a salary raise and dignified residences were built with adequate sanitary services to accommodate resident doctors, although later they were removed leaving only rooms for on-call duties. The contract-grant, safety in postgraduate teaching and support for books and medical journals, as well as other benefits were obtained. This, over time, and with the lack of a national medical association that would have demanded for it to be maintained, has been depreciating.

The cost was high: persecution started, many doctors were laid off and later were black listed. Rehiring was not allowed until Diaz Ordaz six-year period concluded. Some went to jail, and others, including myself, had to leave the country.

Why and by whom was the Mexican Medical Alliance dissolved?

- Government and unions, who instead of regarding us as a support pillar for health reforms and for the development of the country, characterized us as enemies of the government.
- Mistrust of some colleagues towards other leaders who had natural skills and political experience as leaders, instead of appreciating their strength and making the best of it.
- Lack of solidary professional support by some strike-breaking colleagues, pressed by the government.

Repression annihilated the Mexican Medical Alliance and, partially, the hope for some of its goals to be fulfilled.

I don’t pretend for things I have expressed to be shared by everyone, but surely many in the audience will agree and generously understand the lights and shadows of 10 months’ intense effort of thousands of doctors.

Since then, there has been a poor health service. If trust on the doctor is lost and his or her moral authority is undermined, everything gets lost. When people attend social health institutions and see the humiliating form they are treated, one has to think that on the other side there is a person that has no professional acknowledgement, because one knows that patient appointments must not last more than 15 minutes, that there is saturation of surgical times and diagnostic auxiliary procedures, lack of doctors and nurses, and that whatever it is prescribed is not available due to medicament scarcity and price increase.

The medical reform will be able to stop this gradual deterioration of the National Health System, and to address problems as medical, not as legal or judicial issues, which deserve prevention, treatment, rehabilitation and not jail, alcoholism, drug addiction, environmental pollution, traffic problems, inadequate management of sexuality, psychoneurosis, systematic intra-familial and street violence, as well as all forms of suicide, including fatal psychosomatic conditions.

Physicians will uphold our Hippocratic Oath to not only treat, but to look after patients, with the required consultation time, especially in those with end-stage diseases that have no cure, without telling them “there

is nothing else I can do". We should always have available time to reduce suffering and improve both patients and their relatives' quality of life. We must not incur therapeutic obstinacy trying to avoid death, but to contribute to dignified death, with advance directives, mourning preparation and other early palliative care measures, preferably at home.

In the National Academy of Medicine of Mexico session of past September 2, we asked our honorable corporation, as a federal government advisory body, to accept acting as the channel to convey to the authorities the concerns and possible solutions of contemporary social medicine; to agree to actively coordinate the health reform, which started when viability was given to medical specialty councils, progressively established in the decade that followed the conclusion of the Medical Movement and the way it's being done now, with the creation of the Ethics and Transparency Committee on the Physician-Industry Relationship.

Coordinating the actions of different social security bodies and public health branches is necessary in order to avoid effort and investment duplicity. Health

institutes, hospitals, health centers, clinics, sanatoriums and dispensaries should cover the country as a single and tight service network that turns the right of Mexicans to health into a practical possibility, with the aid of science and by effectively applying reference and counter-reference procedures.

Let big medical private chains millionaire profits impact to the benefit of the *seguro popular* or public institutions' affiliates that don't get to be attended to owing to saturation.

With a delay of 50 years, let's hope the health reform, which appears to be underway, framed with the green color of hope, turns into reality in the present of multiple reforms, to the benefit "of people's health and the progress of medicine in Mexico".

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## Literature related to the Medical Movement

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Written material on a character, social group, place or event, in the form of a description, review, analysis or essay published in newspapers, journals or books, regardless of grammatical structure or esthetics, constitutes literature, which is related and leaves proof of facts. Much has been written in relation to the 1964-1965 Medical Movement, with authors' different points of view according to their thought, criteria, particular interests, and social and political position and, therefore, the message that remains over time, as well as readers' interpretation, can be highly variable.

I consider that, on the occasion of the Medical Movement 50<sup>th</sup> anniversary, it is necessary and useful to review, analyze and reflect on materials written during its course, when the events of this important social movement were developing, as well as things written years later, with a more distant view. When half a century has already elapsed since that highly significant event, its interpretation may have changed. Due to the information extent and available space, it is impossible for all literature related to the Medical Movement to be addressed; we will restrict to approach those works that, due to the historical moment, the authors and their content, we consider more important and with higher impact on the medical community.

With the purpose to give an order to the materials to be exposed, we divided the literature according to the place it was published: newspapers, journals, the Mexican Medical Alliance (AMM – *Alianza de Médicos Mexicanos*) bulletin, information of the National Security and Investigation Center (CISEN – *Centro de Investigación y Seguridad Nacional*) and books.

### Newspapers

Literature in journalism is mostly informative, although not always adherent to the truth. It narrates the movement's initiation, all four walkouts, the meetings, marches and demonstrations, hospitals' seizure by the riot police and doctors' expulsion from hospitals, but it reports little or in a biased form about the harassment,

persecution, dismissal and incarceration of doctors, specially of the leaders of the Mexican Association of Resident and Intern Physicians (AMMRI – *Asociación Mexicana de Médicos Residentes e Internos*) and the Mexican Medical Alliance (AMM – *Alianza de Médicos Mexicanos*). They also refer the four presidential interviews and dogmatic, authoritarian statements, especially those appearing after President Gustavo Díaz Ordaz first state of the union address on September 1, 1965, about the events occurred in the ceremony on the occasion of the Doctor's Day, with measures of repression that were simultaneously taking place outside the celebration venue not being reported. Newspapers published open letters and statements from the health sector, SSA, IMSS and ISSSTE authorities, among others, union leaders, medical societies, hospitals, AMMRI and AMM. We must admit that some author-signed editorials were also published, where the problem was analyzed with more depth and equity.

The AMMRI open letter to the President of the Republic, appeared on December 6, 1964, was reproduced on several occasions. There, the motives, the rationale and the petitions are exposed in five points: 1) rehiring of all fired doctors; 2) increase in scholarship stipend and renewable contract; 3) preferential hiring of former residents; 4) solution of these problems at each and every hospital; and 5) increased access to post-graduate studies<sup>1</sup>.

Statements of medical associations' leaders were published, which disqualified and attacked the movement, such as one by Dr. Sergio Novelo, secretary of the Distrito Federal Doctors' Federation, published on December 10, 1964, and one by physician and Congressman Dr. Everardo Gamiz Fernández, Secretary of the Union of State Workers, published on December 25 that same year. These doctors missed the opportunity to legitimate and validate the existence and functions of the corporations they directed, as well as to offer their sympathy to the movement of the medical community they belonged to<sup>2,3</sup>. These publications are in contrast with those by the General Hospital of Mexico

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Medical Association and the Children's Hospital Medical Association, published on December 24, 1964 and January 15, 1965, respectively, where the background and the working, academic and teaching conditions at their hospitals are analyzed; on both, they express their support to the AMMRI movement<sup>4,5</sup>. One of the few expressions of support by workers was by the Revolutionary Workers' Federation, which was published on December 30, 1964<sup>6</sup>.

Different newspapers published news on the first walkout, which concluded on December 18 after 22 days' duration, as a gesture of trust to the promises made by the president of the Republic, and on the second walkout, which lasted 17 days and ended on January 30, 1965, as a token of solidarity and trust to staff doctors, heads of department and teachers that had expressed resolute support to their cause. In the session held at the General Hospital of Mexico on Saturday December 18, 1964, a call for unity is made to Mexican doctors of the entire country. In January 21 session, with attendance of representatives of 22 hospitals and medical groups, including the AMMRI, the formation of the Mexican Doctor's Alliance, later known as Medical Alliance, was decided. All this was informed in a historical manifesto, published on January 26, 1965<sup>7</sup>.

The press kept publishing news on the Medical Movement, and negative opinions were exacerbated during the third walkout, which started on April 17, 1965 and lasted 43 days, and the fourth and last walkout, which started on August 24 and only lasted 11 days, since it was lifted on September 6 as a consequence of events occurred after the presidential state of the union address.

Information on demonstrations and meetings was distorted, with doctors being attacked and even insulted, invoking the sacrifices inherent to the medical profession, while refusing their rights. Full-page spreads of medical groups against the movement began to appear, although the alleged authors expressed they hadn't authorized for their names to be included<sup>8,9</sup>. News appeared on meetings of bureaucrats, most of them Sanitation Department workers, where doctors' attitude was disapproved. Occupation of hospitals by riot policemen was announced, as well as doctors' evacuation, who were substituted by military doctors<sup>10,11</sup>. Throughout the time the movement lasted, AMMRI and AMM full-page spreads appeared on the press stating that the demands had not been solved, and that neither had the president's promises been fulfilled, with abuses being denounced and expressing an open disposition to dialogue in order to solve the problem<sup>12,13</sup>.

The presidential state of the union address, submitted on September 1, 1965, had wide diffusion. Things stated by President Gustavo Díaz Ordaz were fully published in several newspapers, as well as the answer to the state of the union address by Congressman Augusto González Villanueva, of the Institutional Revolutionary Party, which made it clear that there was no disposition to solve the medical conflict. Not only the movement was attacked, but the medical profession was also reviled, with frank threats to establish criminal trials against the participants<sup>14</sup>. Congressman Adolfo Christlieb Ibarrola, of the National Action Party, and Congressman Vicente Lombardo Toledano, of the Socialist Popular Party, had interventions moderately analyzing the problem and expressing their opinion in favor of doctors, which is noted in the ANM manifesto published on September 3, 1965. The same manifesto expressed that patients were never abandoned, since there were always on-call duties, and cases of emergencies were not left unattended<sup>15</sup>.

On October 23, 1965, ceremonies in recognition of doctors were carried out in different hospitals. A great celebration, organized by the National Union of Social Security Workers (STNSS – *Sindicato Nacional de Trabajadores del Seguro Social*), joined by the National Union of ISSTE workers, took place at the IMSS National Medical Center Auditorium. Sitting besides the president of the Republic were brothers Antonio Martínez Manatou, leader of the SNTSS, and Emilio Martínez Manatou, Secretary of Presidency. The president spoke about doctors' humanitarian work, while stressing on their obligation to comply with their altruistic duties and look after patients, stating the impossibility to meet economic demands that would turn them into an elite group. That night, a ball was celebrated at the *Salón Imperial*, where TV sets, sound systems and 10 cars were raffled out, while outside these premises, harassment, layoffs and even incarceration of many doctors continued and, therefore, October 23, 1965 Doctors Day, rather than a celebration, was to be a day of mourning. The SNTSS information body informed and commended all the above, they attributed to themselves the few achievements of doctors, and silence was kept on the abuses against them<sup>16</sup>.

The Medical Movement died little by little. Assemblies were attended by increasingly fewer doctors, with the same happening in the AMM Body of Government meetings. The press did not inform anymore about the meeting held on November 20, 1965, where Mexican medicine reforms, restructuration and planning were discussed and proposed. It also didn't inform on the

ceremony celebrated at Santo Domingo's old School of Medicine on January 26, 1965, to commemorate the AMMRI foundation or the one celebrated on January 18, 1966 at that same place to commemorate the AMM foundation.

Some editorials that addressed the Medical Movement with truth and equity and proposed possible solutions that remained unattended cannot be left without being mentioned<sup>17</sup>. They talk about the authoritarian attitude of the government, and unmet promises, which, being so reiterative, were a real mockery<sup>18</sup>.

## Journals

Some medical journals published information on the status of the Medical Movement as news or as information inserted among scientific articles<sup>19</sup>. Some social sciences-oriented journals addressed the background, problems, social repercussion, political situation and possible solutions<sup>20</sup>. The *Política* magazine commented all the unpleasant events occurred on Doctor's Day, with compliments to the medical profession simultaneously with the arrest of more than 500 physicians<sup>21</sup>. On the occasion of the 20<sup>th</sup> anniversary of the Medical Movement, one of the main participants published information on its background, initiation and conclusion, with reflections and a view on the situation of medicine in Mexico, with an emphasis on the significance of the movement, a social event that united Mexican doctors like never before and perhaps like never will happen again<sup>22,23</sup>. Some years after the movement ended, reviews and historical investigations were published, with chronological narrations and sociological and philosophical interpretations of the movement<sup>24</sup>.

## AMM bulletin

In order to provide all doctors with reliable information, the AMM decided to publish the Mexican Medical Alliance Bulletin. Up to 15 issues were published, some of which, owing to their contents, constitute real historical documents. The first issue, of March 15, 1965, published the names of the Provisional AMM Governing Council members<sup>25</sup>. March 30 number 2 published this Provisional Council inform, as well as the Definitive Governing Council members, most of them already part of the Provisional Council<sup>26</sup>. On August 21, 1965, ten days prior to the presidential state of the union address, number 8 was issued, where a recollection of the movement's evolution, of the unmet demands and of the purpose to proceed with the fourth walkout was made<sup>27</sup>.

September 1 presidential state of the union address was followed by acts of violence, attacks and disqualifications of doctors, especially of AMM board members. In number 10 of the Bulletin, dated October 1, 1965, the manifesto sent to the president of the Republic<sup>28</sup>, already partially published in different newspapers on September 3 and 6, was fully published, where the doctors' posture (who never abandoned their patients), the protest for retaliations, apprehensions and layoffs, their disposition for dialogue to put an end to the conflict and to improve doctors' working and academic conditions, as well as interns and residents teaching, were described, and the need to review the state of public and social medicine was mentioned, with the commitment to develop a national plan for medicine restructuration in our country.

The narration of the AMMRI first anniversary ceremony, celebrated in the Santo Domingo School of Medicine, appeared in December 1, 1965 number 12. The speeches by doctors Roberto Pedraza Montes de Oca and Víctor Manuel Calderón, who were to be laid off next day, were referred there. The speech delivered by Dr. Ismael Cosío Villegas, whose position and thought have remained as guidance for future generations, was entirely reproduced<sup>29</sup>. December 15, 1965 number 13 published the article by Dr. Alfredo Ortega Rivera entitled "Message of an incarcerated doctor", where he tells about all the vicissitudes of his arrest; although he was not put in jail, he was locked up for 52 days in the court's detention facilities of Pachuca, Hidalgo, known as *La Casa Colorada*, where he received support and gestures of sympathy of his colleagues, students and society in general<sup>30</sup>.

Number 14 of the Bulletin informed about the Mexican Medical Alliance first anniversary commemorative ceremony<sup>31</sup>, which took place at the Santo Domingo School of Medicine on January 18, 1966 with few attendants, most of them AMM Governing Council members, quite different to the sessions celebrated one year prior, with attendance of doctors coming from the entire country and where euphoria, hope and combativeness prevailed.

Number 15 of the Bulletin, which was to be the last<sup>32</sup>, published on April 30, 1966, included the National Plan for Medicine Restructuration in Mexico, which never could be delivered to the corresponding authorities. It also included an extract of the AMM Epilogue document, where doctors, sociologists, lawyers, writers and journalists participated; there, important scientific and technical, but especially social and human considerations were made, claiming for equity for medical

professionals, with Professor Dr. Raoul Fournier Villada clairvoyant opinions and Dr. Pedro Ramos guiding points of view, whereby the Alliance practically said goodbye.

## **CISEN confidential information**

There was high expectation to know the contents of the CISEN files, which were opened to public scrutiny in 2003. There was hope that many data that would help to clarify unanswered questions would be brought to light; however, things reported in these documents are facts that were already known by those who lived through the movement, information that, in due time, was delivered to incumbent authorities, both of the Health Sector and other official branches, Secretary of State, General Attorney's Office and the Presidency of the Republic itself. The CISEN information, sometimes written with syntactic and orthographic mistakes, is truthful. In contrast with information appeared in the press, it narrates things occurred in demonstrations, meetings and assemblies, with Xerox copies of minutes, letters and official notes from authorities and AMM and AMMRI members<sup>33,34</sup>. They also provide information with regard to health institutions, their authorities, their staffs and functioning, mainly of those where the conflict was generated<sup>35</sup>.

The 1964-1965 Medical Movement had great impact not only in Mexico but also in other countries. In studies conducted and articles published after the CISEN files were opened, information of these files was included and analyzed and contrasted with information existing through the press and journals<sup>36</sup>. It is not surprising the lack of consistency of official information directed to authorities, then confidential, which therefore necessarily had to be adherent to reality, with information published in massive media, often sensationalist and full of lies, to serve government, health authorities and union leaders interests.

## **Books**

The book written by Dr. Norberto Treviño Zapata, *El Movimiento Médico en México 1964-1965. Crónica documental y reflexiones* (The 1964-1965 Medical Movement in Mexico. Documentary chronicle and reflections), on the occasion of its 29<sup>th</sup> anniversary, was submitted for publication to the UNAM rector Dr. Jorge Carpizo; however, due to a change in the university authorities, the graphic materials were inexplicably lost. In 1987, a copy was delivered to Dr. Fernando Cano

Valle, director of the Faculty of Medicine, who was in charge to publish this magnificent historical work, where in a clear and entertaining form, a chronological account of the facts is made, and it includes a valuable documentary support contained in 163 appendices. Only one edition has been published and, therefore, it is not easy to consult. Let's hope that now, on the occasion of the 50<sup>th</sup> anniversary, another edition with larger print run is published, in order for more members of the medical community and society to have access to this valuable book<sup>37</sup>.

Ricardo Pozas Horcasitas published a very well documented book, *La democracia en blanco. El Movimiento Médico en México, 1964-1965* (Democracy in White. The Medical Movement in Mexico, 1964-1965), where an analysis is made of the deep social and political phenomena that preceded the Medical Movement, of those occurring during its course and the repercussions they had on both the health sector and the rest of society. It addresses educational and working aspects, as well as the participation of union and political leaders at different levels of command. It presents the Medical Movement as a legitimate demand of Mexican civil society to the corporate State, which promoted development and progress, but that wouldn't allow an independent social organization beyond the margins of State-controlled unions<sup>38</sup>.

Dr. Alfredo Rustrán, member of the AMMRI and the AMM Governance Council, published the e-book version of *La revolución de las batas blancas, 50 años después vigente. Movimiento Médico 64-65* (The white coat revolution, 50 years later still current) (the printed version is about to be launched). The prologue is written by Dr. Octavio Rivas Solís, who was also a noted participant in the movement and member of the AMM Governance Council. Although the title has certain resemblance with the last one, its approach is different. Rustrán narrates hospital life in an anecdotic and entertaining form; he speaks in first person of the events that occurred during the movement, where he was a very active participant, and focuses on and gives more importance to working and academic conditions of doctors, as well as their interests and feelings<sup>39</sup>.

Much has been written and said about the Medical Movement, but also much remains to be said and written, especially with regard to medicine current situation in Mexico: problems of services' saturation, lack of personnel and shortages in public health institutions, quality and opportunity of services, patient satisfaction and complaints; in private medicine, with regard to fees review and standardization, and payment of services

by third-party payers, such as health insurance companies and health service provider institutions, which often are the owners of hospitals and insurance companies themselves; and also much has to be said and written about public and private medicine practice with a humanistic sense, with quality, opportunity and safety of the provided services, always to the benefit of patients.

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## Mexican Medicine at 50 years' distance

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September 1965 was an especially critical period for the Mexican Medical Movement treacherous process. President Díaz Ordaz referred to the issue as follows:

“Problems should be solved in the light of justice being on the side of those who suffer its effects, and not dependent on pressure exerted against the authority.”

“Those who tried to obtain resolutions favorable to their interests were wrong, if the government cannot force doctors to provide services, it can and must sanction those responsible.”

On that first Díaz Ordaz state of the union address, his notorious lack of weighing certainty was profiled, and he also lacked visionary vision, by qualifying as minor the problems that were brought to him since the beginning of the movement.

History has placed Díaz Ordaz as an authoritarian president that didn't accept dissidence. His economic policy was based on promoting industrialization, and he was a conservative participant of a “stabilizing development” with encouragement of agricultural and livestock production, which grew 2.6% in 5 years. That Administration's main concern was characterized by foreign investment, in order to promote industrialization.

Social programs, represented in this case of Mexican medicine by 23,000 doctors for 4 million inhabitants at that moment, were no priority for the government. On September 11 50 years ago, the D.F. General Attorney Office asked the tenth criminal court judge for arrest warrants for 30 doctors, to whom responsibility for caused damages was attributed. In addition, the arrest was requested of female and male nurses who participated in the movement.

Relevant voices were then heard. Pedro Ramos wrote: “the so-called medical conflict offers a great opportunity to solve situations and set the bases for the development of next years. Standing up for the medical profession is a right and a duty”.

Attorney Mario de la Cueva, former rector of the Autonomous University of Mexico and relevant jurisconsult specialized in labor law, wrote:

“The century we live in has posed socialization of activities to all men, but this phenomenon, which is universal

and involves all professions, college or technical education-related, and work in general, should not be carried out neither with the sacrifice of the human person nor with the negation of values that make up our culture”.

“... the defense of the medical profession not only constitutes a right, but it is also a duty, since only that who stands up for his/her dignity can be dedicated to the service of man”.

“... Mexican doctors, separated from unions they are currently part of, exercising a constitutionally recognized right, can and should proceed to definitive organization and strengthening of an association, whichever its name is, which, based on the same principle of freedom of association, brings all doctors of the Republic together, to the benefit of medical practice and Mexican people's life and health”.

“... the Mexican Medical Alliance can be organized as a union, obtain its registry and act in the field of labor law...”.

It's a pity that the incumbent government didn't get to peak beyond the surface; it's a pity that it was impossible for it to know, to understand, that the problems the Medical Alliance pointed out alerted the country about the seriousness of collective importance and of an uncertain future.

There was no willingness, intelligence and tact; it's a pity that study of the Mexican medicine reform, restructuring and planning was not supported, and the consequences profile our current system, which is fragmented, disintegrated, with multiple structural limitations in state health systems. Today we are watching other fruits, so different from those that men with State vision, as Professor Norberto Treviño Zapata was, would have expected.

From different documents of the Ministry of Health, one can deduct, just as an example, the situation of human resources. In Mexico, human resources problems are of diverse nature. On one hand, we observe that the numbers of doctors and nurses for every thousand inhabitants are below the standards recommended by the World Health Organization. For example, by the end of 2010, there were 96,242 doctors in contact with patients recorded at the three major public institutions, which denotes a ratio of 1.1 per 1000 inhabitants,

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when the recommendation is a ratio of 3 doctors per 1000 inhabitants. On the other hand, these resources usually concentrate in urban areas, since there are no incentives for personal and professional development in units far away from cities. In consequence, the care offered in health centers does not look after rural population, which often largely depends on training doctors who are performing their social service. In addition, it should be pointed out that, in 2010, in Social Security and State Health Services hospitals, only 18% of doctors were general practitioners, 58% had some type of specialty (more often pediatrics, followed by anesthesiology, obstetrics & gynecology and surgery) and 24% were interns.

Human resources are strategic for any health system good performance. The challenge is to develop a working force for health that is available, competent and productive, and that responds to the population's needs with priority towards prevention and health promotion. Today, the public sector is facing several fundamental challenges with regard to human resources, particularly in terms of distribution and profile adjustment to the population's needs. Therefore, in order to strengthen primary care services, among other actions, a radical transformation in care resources generation is necessary, in order to revalue (economically and professionally) the practice of medicine at this level, gradually substituting the hegemonic medical model based on hospital-based care.

It's important noting that the National Health System has to be modified as soon as possible, since there is the risk to continue increasing public investment on health without a significant improvement in expenditure composition (between public, social security and private), in equity and in better use of system's resources being observed (Lankin 2010).

Aguilera and Scott (2011) have estimated that the expenditure status quo might reach nearly 8% of the domestic gross product by the year 2030, similar to that of countries of the Organization for Economic Co-operation and Development (OECD) currently, except for the USA, but that private expenditure would have an increasingly larger share of total expenditure, which would drastically change equity in the system throughout family income distribution and there are no arguments to believe there will be significant efficiency gains.

Developing a "national universal health system" to ensure efficacious access to high quality medical care for all Mexicans, regardless of their working situation, should be a high priority, just as the government proposed. The pact for Mexico recognized this need and committed itself with a quality and equitable access

system through all providers, where individuals can freely choose among them. However, differences of opinion with regard to the way to efficaciously increase health access have delayed actions.

Child mortality rates are among the highest in Latin America. Mortality for coronary diseases is on the rise, whereas in all OECD countries it is decreasing. Mexico has the second highest rate of obesity in the OECD, and nearly one out of every six adults is diabetic.

System fragmentation is an important source of inefficiency. The fact that all different social security institutions, private health insurance companies and federal and state health services have their own service providers vertically integrated, without access to services of the others, has generated a costly administrative and infrastructure duplication, restriction to patients' power of choice and lack of competence between providers.

Social Security tends to have weak regulation and supervision faculties. There is also lack of coordination between federal and state levels, and there are also marked differences in financial resources and management capabilities in Federal States. Moreover, States' autonomy with regard to organizing and operating health care services is restricted by the collective bargaining agreement of the employees who provide them, which is centrally negotiated and limits the funds for uses not related to salaries.

The new 3<sup>rd</sup> paragraph of Constitutional Article 1 picks up recognized international principles for adequate compliance with human rights, the demand of their compliance and the efficacy thereof:

"Progressiveness, as a principle, indicates the need that all measures around human rights translate into advances towards the attainment of better standards and, in turn, implies non-regressiveness, i.e., once until new advances are achieved, but no stagnation or backward measures are admitted"<sup>2</sup>.

Medical knowledge should be preponderant in national health and not an addendum of actors subjected to administrative, political or economic criteria or accepting indications contrary to their training and thought.

Being among colleagues, let me express the following: I think we have passively retracted in public health relevant decisions and, after 50 years, the scene and the actors have changed, but the play remains unfinished.

## References

1. Treviño Zapata N. El Movimiento Médico en México 1964-1965. Crónica documental y reflexiones. México, D.F.: UNAM, Facultad de Medicina; 1989. Apéndice No. 53.
2. Carmona Tinoco U, coordinador. La vinculación entre los derechos humanos y los derechos universitarios. Obra en homenaje al Dr. Jorge Carpizo Mac Gregor. p. 183.

## Conclusions

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In the book's final considerations, Norberto Treviño Zapata wrote: "Non-medical and medical authorities didn't get to understand the extraordinary and positive significance of the Medical Movement and its valuable and applicable content, useful to the country".

The Medical Movement was the most generalized and vigorous attempt to achieve medical unity.

Government reprisals, surveillance and political harassment, suspensions, layoffs and jail generated justified fear, almost terror. The medical community was silenced, entirely and by parts, it paralyzed. Everything was over.

I consider unlikely for the conditions and circumstances that enabled the vigorous occurrence of the Medical Movement, the enthusiastic and hopeful creation of the Mexican Medical Alliance and the promising beginning and progress of national medical unity to be able to coincide again.

Thus was the Medical Movement in 1964 and 1965.