

"BLOODY SUNDAY"

TRAUMA IN TBILISI

THE EVENTS OF APRIL 9, 1989 AND THEIR AFTERMATH

**Report of a Medical Mission
to Soviet Georgia
by
Physicians for Human Rights**

February, 1990

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By

**Jennifer Leaning, M.D., Ruth A. Barron, M.D.,
and Barry H. Rumack, M.D.**

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PHYSICIANS FOR HUMAN RIGHTS

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Title page photo: View of the center of Tbilisi, Soviet Georgia.

Dedicated to the memory of
Dr. Andrei Dimitrievich Sakharov,
whose valiant efforts on behalf of human rights
gave voice and courage to us all.
He lives on as a conscience for the world.

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PREFACE

Physicians for Human Rights (PHR) has been concerned with the medical consequences of the use of toxic gas since the organization's founding in 1986. In recent years numerous governments have resorted to the use of toxic chemical agents - both in situations of international conflict, and in times of internal tension, against their own citizens.

Chemical weapons pose a unique threat to health and to our common sense of humanity. There is a particular abhorrence of the use of chemical weapons that is shared by those who have either studied or been exposed to their effects. Some chemical agents kill within seconds. Others cause horrible burns. Some persist in the environment and cause injury days or weeks later.

Chemical weapon agents, once released, are notoriously difficult to control, with dispersion greatly influenced by structural surroundings and by wind and other weather conditions. Infants, the elderly and the infirm are especially vulnerable to the agents.

These properties are shared by all chemical weapon agents including the lacrimating agents (tear gases) which are a subject of this report. Tear gas is used by police forces in many countries against civilians as a means of crowd control.

Physicians for Human Rights has sought to document in a precise and authoritative manner the physical and psychological consequences of the use of toxic agents in a variety of countries and settings.

In 1987, Physicians for Human Rights sent a medical delegation to South Korea to investigate the effects of use of massive quantities of CS gas (a form of tear gas) in the streets of Seoul. The team reported that even when used mainly on demonstrators, CS gas had an impact on the health of civilians at sites far from crowd gatherings. This toxic agent was found to have caused skin burns, eye injuries, and exacerbation of underlying heart and lung disease. In some cases, the physicians feared, chronic illness resulted from exposure.

In October 1988, Physicians for Human Rights sent a medical team to Turkish Kurdistan to gather documentation on the hundreds of deaths and injuries inflicted by the Government of Iraq when it used lethal toxic gas in attacks on Iraqi Kurdish villages in August 1988. These attacks resulted in the flight of 50,000 Kurds across the border into Turkey.

Physicians for Human Rights has also repeatedly documented and protested the excessive, indiscriminate and inappropriate use of force by governments against civilians. Missions to Panama in 1987, and Israel, Gaza and the West Bank in 1988 also focused on this subject.

The tragedy of the events of Sunday, April 9, 1989 in Tbilisi, Soviet Georgia, demonstrates yet again the serious physical and psychological damage caused by the unwarranted use of force, including toxic chemical agents, against a civilian population. PHR's team shed new light on the toxic chemicals used in Tbilisi, concluding for the first time that military units probably used chloropicrin along with CN and CS gases. The violent dispersal of a large, peaceful demonstration with toxic gases, truncheons and shovels has now been stamped in the memory of the Georgian people as "Bloody Sunday". The panic and fear that continued to affect residents of the city for weeks and months after the incident was exacerbated by the failure of Soviet authorities to disclose immediately the identities of the chemicals used on the population.

In publishing this report of a fact-finding delegation to Tbilisi, Physicians for Human Rights hopes to help deter not only the Soviet Government, but all others from resorting to the excessive use of force and the use of toxic gas as a means of crowd control and the suppression of dissent.

Susannah Sirkin
Associate Director
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MAP 1
SOVIET GEORGIA

SUMMARY

On April 9, 1989, troops from the Soviet Ministries of Defense and Interior used entrenching spades and, it was alleged, toxic gas, to break up a peaceful demonstration of 8,000 to 10,000 people in Tbilisi, Soviet Georgia. Sixteen people were known to have been killed on the scene. Another four people later died from injuries sustained on that day. Hundreds of people were injured and admitted to hospitals. On April 10, in protest of the event, the city of Tbilisi went out on strike and a 40-day period of mourning was declared.

In the first few days after the demonstration, hundreds more people sought medical attention complaining of headache, difficulty breathing, chest discomfort, nausea, abdominal pain, and eye and skin problems. The Georgian medical community began to suspect that in addition to entrenching tools the troops had used toxic agents against the demonstrators. Soviet authorities at first denied that toxic gas had been used and then, one week after the event, acknowledged the use of chloracetophenone (CN), a form of tear gas.

The people of the city expressed their outrage and grief at the events of April 9 by bringing flowers to Government Plaza, the site of the demonstration. On April 28, Soviet authorities ordered the city's residents to move the massive collection of flowers to the courtyard of a nearby church. Beginning on April 28, and continuing for several days thereafter, hundreds and then thousands of people involved in moving the flowers began to experience symptoms similar to those felt by people exposed to toxic gas on April 9. Another wave of patients was admitted to the city's hospitals.

In early May, Dr. Andrei Sakharov and the International Committee of the Red Cross came to Tbilisi on an investigative mission. They reported that they had been told another gas (2-chlorobenzylidene malononitrile, or CS) had also been used on April 9.

Physicians for Human Rights (PHR) was asked by Dr. Andrei Sakharov and Dr. Irakli Menagarishvili, Minister of Public Health for Soviet Georgia, to provide technical expertise in assessing the possibility that toxic gas or gases had been used against the crowd. After weeks of attempting to obtain travel visas, on May 17, 1989, a team of three PHR physicians arrived in Tbilisi. That day, which also coincided with the end of the 40-day mourning period, scores and then hundreds of school children from around the city began complaining of symptoms attributed to a new wave of toxic exposure. The Georgian Ministry of Health asked the PHR team to assist in assessing the children who were hospitalized.

The members of the PHR team were Dr. Jennifer Leaning, an emergency physician and internist at Harvard Medical School and a member of the PHR Board of Directors, Dr. Barry Rumack, professor of pediatrics at the University of Colorado School of Medicine and Director of the Rocky Mountain Poison Center, Denver General Hospital, and Dr. Ruth A. Barron, a general psychiatrist at Harvard Medical School with expertise in both psychopharmacology and psychodynamics.

Methods

During the five-day mission, the team met with officials of the Georgian Ministry of Health, members of the Georgian Committee of Investigation, directors and department heads of the major hospitals, officials from the state departments of pathology, toxicology, and pharmacology, physicians present at the demonstration and physicians responsible for the direct care of patients who had been injured. The team reviewed the pathology and toxicologic evidence that was available and two videotapes that had been taken at the scene on April 9. One member of the team (Dr. Rumack) visited the state toxicology and pharmacology laboratories and one of the main analytic chemical laboratories of the University of Tbilisi, where he was provided access to a gas chromatography-mass spectrometer.

Of the several hundred people who were sufficiently symptomatic from the events of April 9 or April 28 still to be hospitalized in one of the 44 hospitals throughout the city, the PHR team (with the help of the Georgian physicians) administered a questionnaire to 113 and interviewed and examined 22 who, in the view of the Georgian physicians, were considered to be the most seriously ill. The PHR team also interviewed and examined two or three times, on at least two separate days, a total of 43 children who were hospitalized on May 17 through 22 for symptoms resulting from another possible exposure to toxic gas.

Findings

1) On the basis of clinical and toxicologic evidence available, the PHR team concluded that in addition to the use of one or two lacrimator (tearing) agents (CN and CS), the Soviet troops most probably used a third toxic agent, called chloropicrin. This gas was identified on the basis of mass spectroscopy in a cannister allegedly recovered on the scene. Chloropicrin, known for its unpredictable toxicities in crowd use, can cause skin and mucosal blisters, bronchoconstriction, and pulmonary edema, all of which were reported among the casualties of the April 9 demonstration.

2) The cause of death for the initial 16 victims of the demonstration could not be precisely determined on the basis of the evidence made available to the PHR team. In the absence of signs of external trauma, sudden death could have resulted from suffocation in the midst of crowd flight, asphyxiation from exposure to high concentrations at close range of a lacrimator, such as CN or CS, or a more toxic agent,

such as chloropicrin, or from direct exposure at close range to Freon, the propellant used in the CN cannisters.

3) Arriving three weeks after the event, it was not possible for the PHR team to establish the etiology of the symptoms people attributed to moving flowers on April 28 and thereafter. Although exposure to persistent toxic residues from the April 9 demonstration was the explanation most frequently advanced, in the view of the PHR team it is equally, if not more likely that a range of psychological reactions could explain these patient presentations.

4) On the basis of in-depth interviews and examination of all 43 children hospitalized from May 17 to May 22, the PHR team concluded that none were suffering from exposure to a toxic agent. Although a few presented with the characteristic signs and symptoms of common pediatric illnesses, the great majority were expressing psychological reactions to communal trauma.

5) The refusal of the Soviet military authorities to release to the Georgian medical community any information about the use of toxic agents against the demonstrators of April 9 hindered the physicians who were attempting to treat the thousands of people who complained of a confusing array of symptoms. Despite the absence of information, the Georgian physicians rendered compassionate care and managed throughout this extraordinarily difficult time to maintain an orderly and supportive medical environment.

Recommendations

The PHR team recommended:

- 1) an extension of the Geneva Protocol of 1925 to a ban on peacetime use of chemical agents by a government as a means of crowd control;
- 2) the use of lacrimators to control crowds only as a last resort and only according to strict protocols to safeguard against serious effects;
- 3) the prompt provision of all information regarding this use as described in Recommendation 2, to the responsible medical authorities.