

I. OVERVIEW OF MEDICINE AND THE ETHICAL VIOLATION DURING NATIONAL SOCIALISM

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Purpose of the Module: To describe medical practice in Nazi Germany and provide a general overview of the ethical violations committed by physicians, nurses, and scientists.

Suggested Readings:

Seidelman, W. (2010). "Academic Medicine during the Nazi Period: The Implications for Creating Awareness of Professional Responsibility Today." In Medicine after the Holocaust, edited by Sheldon Rubenfeld. New York: Palgrave McMillan, p. 29 – 36.

DeBakey, M. (2008). "Afterward." In Medicine after the Holocaust, edited by Sheldon Rubenfeld. New York: Palgrave McMillan, p. 221-223.

Suggested Video: "In the Shadow of the Reich: Nazi Medicine" by John Michalczyk. Available from Amazon.com.

Objectives:

1. Describe the practice of medicine in Nazi Germany.
2. Analyze medical practice and governmental policies that became united in their focus.
3. Discuss ethical violations that were perpetrated upon people deemed to be inferior.

Discussion Questions:

1. What were the factors that caused physicians to become so enthusiastic in their support of the governmental policies?
2. Have there been other examples in history of the involvement of medicine in politics to the same extent?

Synopsis:

The state of German medicine in the 1930s had evolved to be the best in the world. It was a common practice for US physicians of means to spend time in Europe,

and in particular in Germany, to study with physicians who had techniques superior to those in the US at the time. Among such physicians was Dr. Michael DeBakey, the renowned American heart surgeon who studied surgery at the University of Heidelberg. In his commentary about his time spent in Nazi Germany, Dr. DeBakey stated that he was too busy to be aware of the political policies of the country and experienced only a couple of instances of hearing about professors who had left Germany because of being Jewish. Dr. DeBakey stated, "I was very lucky my parents could afford to send me to Germany for a surgical residency during the Third Reich."¹

It is understandable that a young surgical resident would have little time for political awareness yet within the time that Dr. DeBakey was in Germany, the medical profession was becoming extremely involved in carrying out the policies of the nation, especially those related to anti-Semitism and racial hygiene. As described in detail in Module 2, anti-Semitism had been a sporadic occurrence in various parts of Europe at different times for many centuries² but when Adolf Hitler came to power, anti-Semitism had a powerful champion. Anti-Semitism became official state policy and laws were passed to severely limit the rights of the Jews. Coupled with the policy of racial hygiene which outlawed any sexual or marital relationships between Jews and non-Jews, Jews were the scapegoats, the "cause" of all of the economic woes of Germany.

Laws were passed which severely limited the rights of Jewish physicians and nurses. They were forbidden to care for any non-Jewish patients. In academic medicine, Jewish professors were removed from their positions. This action was strongly supported by non-Jewish academics partially because it opened up high faculty

positions for them. Within German medical schools, the atmosphere became tense for Jewish faculty as well as students. In Königsburg, Jews and foreign students were barred from the classroom. In Hannover, at the Technical University, the students' assembly decided by a two-thirds majority to exclude all students of Jewish descent.³

Hitler's secretary, Martin Bormann, stated "the Führer holds the cleansing of the medical profession far more important than, for example, that of the bureaucracy, since in his opinion the duty of the physician is or should be one of racial leadership."⁴

Physicians were to be organized under the leadership of the Reichsführer of physicians, Gerhard Wagner. To gain control of the profession, Wagner proceeded by absorbing the standing physicians' organization into the Nazi party's own physicians' league. Two new organizations were founded: the German Panel Fund Physicians' Union for physicians working in the area of public health insurance and the Reich's Chamber of Physicians which required membership of all practicing physicians in Germany.⁵ The National Socialist Physicians' League was organized under Wagner's command on March 24, 1933. Its primary purpose was the "de-Jewification of medicine."⁶ On this date, Wagner ordered the removal of all Jews and Marxists from committees and boards.⁷ Soon it became forbidden to quote Jewish scientists in academic theses and journals except for very rarely and briefly unless the intent was to discredit what they had discovered. It was even forbidden to mention the name of Emil von Behring, the winner of the first Nobel prize in medicine in 1901 because he had a Jewish wife.⁸

Throughout the 1930s, Jewish physicians lost their academic positions and saw their practices limited to Jewish patients only. The number of Jewish physicians in

Germany declined from 13% in 1933 to 7% in 1937.⁹ Not surprisingly, many attempted to immigrate. Others despaired and an estimated 5% of Jewish physicians living in Germany committed suicide.¹⁰

By 1939, 45% of all physicians were members of the Nazi party. This was the highest percentage of any professional group with 25% membership for lawyers, 24% for teachers, and 22% for musicians.¹¹ Among hospital and public health nurses, 25% were members of the Nazi party. Midwives had an even higher percentage of membership at 35%.¹² On a pragmatic level, joining the Nazi party made members eligible for postings and promotions that weren't available to non-party members. On a philosophical level, many members ardently believed in the policies of the government.

The National Socialist model of public health viewed the Volk as the "patient", a collective entity representing the racially-pure German people. Any threat to this biopolitical entity including racial impurity or genetic disease was a threat to the German nation and had to be removed by the medical community. As will be discussed in subsequent modules, laws were passed to prohibit Jews from "contaminating" the racial purity of the Volk. Genetic health courts were established to determine whether genetic conditions should forbid one to marry. Physicians were the "judges" in these courts.

The ethical violations committed by physicians and nurses had their origins in these policies. Subsequent modules will describe how physicians involuntarily sterilized people thought to be carriers of inferior genetic material. The removal of this threat of the inferior was then expanded to include the killing of the mentally and physically

handicapped including children. Midwives and public health nurses reported families having babies with specified conditions and received financial compensation.¹³

Physicians selected institutionalized psychiatric patients who were unable to work as having “lives unworthy of life” and sent them to specially designed gas chambers. Later, when public awareness of the gassings became widespread, individual patients were killed, usually by nurses, by administering an overdose of medication. Some institutionalized children were simply starved to death.¹⁴ The medicalization of murder continued in the concentration camps where physicians sent arriving Jews directly to the gas chambers and did inhumane and deadly experiments on other concentration camp prisoners. Despite having taken the Hippocratic Oath and despite having the Reich Circular of 1931 (See Module VIII)¹⁵ which prohibited unethical research, many physicians engaged in behaviors to advance research and protect the health of the Volk at the cost of the lives and health of hundreds of thousands of “inferior” people.

The subsequent curriculum modules will examine the policies of anti-Semitism and racial hygiene and how physicians, nurses, and midwives set aside personal morality to become the implementers of these policies.

References:

1. DeBakey, M. (2008). "Afterward." In Medicine after the Holocaust, edited by Sheldon Rubenfeld. New York: Palgrave McMillan, p. 221.
2. Weyers, W. (1998). "The History of Anti-Semitism." In Death of Medicine in Nazi Germany: Dermatology and Dermatopathology under the Swastika, edited by A. Bernard Ackerman. Philadelphia: Ardor Scribendi, Ltd., p. 5.
3. Ibid, p. 39.
4. Ibid, p. 45.
5. Ibid.
6. Ibid, p. 47.
7. Ibid, p. 48.
8. Ibid. p. 59.
9. Ibid, p. 224.
10. Ibid, p. 65.
11. Kater, M. (2002). "Criminal Physicians in the Third Reich." In Medicine and Medical Ethics in Nazi Germany, edited by Nicosia, R. and Huener, J. New York: Berghahn Books, p. 79.
12. Survey of German Nurses, Midwives, and Medical Social Workers (November 27, 1945). File of Geneva Panel, US Army Nurse Corps Historical Collection, Office of Medical History (DAG-MH), Office of the Surgeon General, US Army, Falls Church, VA.
13. Burleigh, M. (1994). Death and Deliverance. Cambridge, UK: Cambridge University Press, p. 99-100.
14. Kaul, F. K. (1979). Die Psychiatrie im Strudel der Euthanasie. Köln, Frankfurt am Main: Europäische Verlagsanstalt.
15. Reichsgesundheitsblatt 11, No. 10, March 1931, 174-175. Published in the International Digest of Health Legislation 31 (1980), p. 408-411. Cited in Grodin, M. (1992). "Historical Origins of the Nuremberg Code." In The Nazi Doctors and the Nuremberg Code, edited by George J. Annas and Michael Grodin. New York: Oxford University Press, p. 130-131.