

Justice in Nuremberg: The Doctors' Trial – 60 Years Later A Reminder

Yehuda G. Adam MD FACS

Key words: Holocaust, Doctors' trial, eugenics, experimentation

IMAJ 20078,9:194–195

On 9 December 1946, in the opening statement at the doctors' trial, the prosecutor, General Telford Taylor, asked the unanswerable question: "How was it possible that these physicians were fully able to comprehend the nature of their acts, could be responsible for wholesale murder and unspeakably cruel tortures?" Justice Robert H. Jackson had no explanation. In his words; "The wrongs we seek to condemn and punish have been so calculated, so indignant and so devastating that civilization can not tolerate their being ignored because it can not survive their being repeated."

This lofty statement in the court of law unfortunately was purely academic. No specific practical steps were taken to punish the indescribable atrocities that were committed by the German medical establishment during the Nazi rule. This is our duty – on the 60th anniversary of the doctors' trial at Nuremberg – to remember the unprecedented crimes perpetrated by the German medical profession.

The medical community of Germany and Austria, including those in academic medicine, played a critical role in the evolution of Nazi programs of human destruction, programs that culminated in genocide and even exploitation of death itself. As early as 1929, ten years before the outbreak of World War II, a number of German physicians organized the "National Social Physician League" to influence national medical policy, to rid the German medical community of "Jewish Bolshevism" [1]. The academic medical establishment not only provided "scientific" rationale that legitimized eugenics and racial selection, it also exploited human victims for inhumane research. By defining some human beings as "sub-human," Nazi medical science placed them in the category of "scientific specimens" without any legal protection.

Shortly after the Nazi seizure of power, nazification of the medical profession was initiated. The Nazi-dominated Reich Physician Chamber replaced the pre-Nazi medical societies to which all licensed physicians had to belong. The academic medical establishment then modified the medical curriculum, de-emphasized basic research, and made the study of race hygiene a major topic. Reliable Nazis were appointed as rectors and deans to represent the spirit of the national socialistic revolution. This reorganization was met with enthusiasm by faculty and practicing physicians throughout Germany. The severe economic depression combined with the promises of the Nazi party and the ever-present government-sanctioned antisemitism influenced the average German physician. Although Jews accounted for only 0.8% of the

German population in 1933, at least 16% of German physicians were Jewish. The professionally lucrative opportunities resulting from elimination of the Jewish competition were practically irresistible for the pure Aryan doctors. In 1936, 45% of the registered physicians in the Third Reich were members of the Nazi party. Furthermore, by 1937, physicians were seven times more likely to be in the SS than the average employed male in Germany [2].

The acceptance of radical racist eugenics resulted in over 350,000 sterilizations, which was rapidly advanced to the "mercy death" of patients with incurable problems. This program resulted in more than 70,000 deaths. Rank and file practitioners and university department faculty members expressed excessive zeal to get rid of the burden of "useless lives."

It did not take long for sterilization and euthanasia to turn to more overt forms of killing. State-sanctioned genocide, the "final solution," intended to achieve total racial purification. The German physicians had by then been indoctrinated by the relentless Nazi party apparatus to fulfill their role to apply Nazi eugenics to cleanse the German nation from "inferior subhuman elements." The road to Auschwitz was ready.

At Auschwitz, physicians chose who would die, supervised the killings in the gas chambers, and determined when the victims were dead. Physicians ordered, supervised and at times carried out the killing of debilitated patients in the medical blocks. At the same time they kept up the pretense of medical legitimacy by signing false death certificates listing spurious illnesses. Physicians helped to determine how many prisoners should be kept alive to fill the slave labor requirement of the I.C. Farben enterprise at Auschwitz and gave technical advice on how to dispose of the enormous number of corpses in the gas chamber.

At Auschwitz and countless other death camps, Jews, Gypsies and others were sterilized by injections, radiation or surgery, injected with vaccines made from dental infections, subjected to massive bleedings from blood group experiments, had their brains washed with chemicals, infected with typhus and tuberculosis, and exposed to toxic substances. Vivisections were performed and human flesh was used for culture media. The list of medical experiments is almost endless.

Medical science also plundered the remains of murdered prisoners in order to acquire specimens for university institutions of anatomy and pathology as well as for prestigious research institutions such as the Kaiser Wilhelm Society (today's Max Planck Society). Leading scientists and professors took an active part in

this ruthless abuse. Dr. Carl Schneider, professor and chairman of the Department of Psychiatry at the University of Heidelberg, is a prime example; he collected the brains of murdered Jews [3]. Dr. Herman Stieve, chief of anatomy at the University of Berlin, timed the execution of prisoners with the Gestapo to study the effects of psychic trauma on women's menstrual patterns. After execution, the bodies were dissected and the pelvic organs were removed for histological examination. He published reports based on these studies and lectured to medical students on the same subject. After the war, he became dean of the medical school of Humbolt University in East Berlin [4].

Dr. Julius Hallervorden, head of the Kaiser Wilhelm Institute of Brain Research, who was personally involved in the euthanasia killing center in Brandenburg, acquired hundreds of brain specimens from murdered psychiatric patients. It was probably the foremost neuropathological collection in the world. Despite his Nazi past, Hallervorden is considered one of the founders of child psychology [5]. The dean of the medical faculty at University of Pozen, Prof. Herman Voss, used executed prisoners' bodies for preparation of skeletons that he sold for profit. The Vienna Museum of National History owns these skeletons along with skulls of Jews and non Jewish Poles. Voss authored a textbook of anatomy after the war, which so far appears in 17 German-language editions and was translated to Spanish and Polish [6].

Leading figures in the social sciences – most specifically genetics, anthropology, sociology – and all fields of medicine carried out Nazi policies of ostracism, exclusion and extermination. Some provided theoretical leadership but others actively participated in human experimentations. A few received meaningful punishment and most returned to their prewar status by the 1950s. The doctors' trial at Nuremberg found 15 Nazi physicians guilty of war crimes and 7 were sentenced to death. But what happened to the rest of the Nazi criminal medical community? In most instances the bestial misdeeds were overlooked without any real consequences. The favorite theory of the post-Nazi era was that the medical crimes of the Hitler regime were committed by a few deranged demonic physicians working in isolation from the mainstream of German medicine! The fact that the medical profession as a whole and not just a handful of physicians was implicated in the indescribable offenses that occurred in the Nazi era is amply documented. The German doctors had become

involved in wholesale criminal activities to an extent and degree that is unprecedented in the history of medicine.

Most Nazi doctors who worked in the camps – there were over 300 voluntary physicians dispatched to the different concentration camps by the SS – fled from the approaching Allied armies. Quite a few killed themselves; a number have served prison sentences, which were generally light for the crimes committed. Most, however, returned to medical practice and continued until retirement or until, as in a few cases, they were discovered to have been criminals and tried. A few, like Dr. J. Mengele, escaped and were never caught. Many prominent Nazi academics were able to reestablish their domestic or even international positions. The leadership of the World Medical Association, for example, has included doctors associated in the past with Nazi SS terror organizations and linked to crimes prosecuted at Nuremberg.

In the retrospect of 60 years, the most barbaric crimes perpetrated by a state-directed medical organization practically escapes without punishment. Justice was not served and millions of victims did not receive even a shadow of retribution.

Let the medical profession remember these criminal acts and keep in mind what the German Nazi physicians perpetrated.

References

1. Proctor RN. Nazi doctors, radical medicine and human experimentation. In: Annas AJ, Gordin MA, eds. *The Nazi Doctors and the Nuremberg Code: Human Rights in Human Experimentation*. Tucson, AZ: Galen Press, 2001.
2. Karter MH. Hitlerjugend and Schule in Dritten Reich. *Historische Zeitschrift* 1979;609–10.
3. Richardson E. Julius Hallervorden. In: *Auschwitz, Founders of Child Neurology*. San Francisco: Norman Publishing, 1990.
4. Shevel M. Racial hygiene, active euthanasia and Julius Hallervorden. *Neurology* 1992;42:2214–19.
5. Burleigh M. *Death and Deliverance: Euthanasia in Germany, c. 1900-1945*. Cambridge, UK: Cambridge University Press, 1994.
6. Aly G. The Pozen diaries of anatomist Herman Voss. In: Aly G, (Hroust) Pross C, eds. *Cleaning the Fatherland: Nazi Medicine and Racial Hygiene*. Baltimore, MD: Johns Hopkins Press, 1994.

Correspondence: Dr. Y.A. Adam, 5 Hanadiv Street, Herzliya 46485, Israel.

Phone: (972-9) 957-2664

Fax: (972-9) 957-0192

email: eyadam@bezeqint.net

Capsule

The brain insula and smoking

The region of the brain called the insula has received relatively little attention in drug addiction literature. Naqvi et al. now report the results of a retrospective anatomic analysis of a large cohort of brain-damaged patients. The analysis was prompted by their observation of a single patient with insula damage who quit a severe nicotine addiction immediately

upon recovery from his acute neurologic damage without any apparent difficulty or relapse. Damage to the insula appears to reduce the urge to smoke rather than, for example, reducing the reward or reinforcement associated with smoking.

Science 2007;315:531

Eitan Israeli

