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Medical and Dental involvement in the Nazi party.

Medical and dental education poses a challenge for the educator. The pull of the traditional approach juxtaposed against the advances of both the technological present day and the need to embrace the infinitesimal possibilities provided by artificial intelligent powered emergent worlds, makes the task of the medical educator complex and demands a three hundred and sixty degree observation. This author experiences that on a regular basis, often challenged by a generation living this modern world not just reading about it!.

Many of the challenges in the medical teaching world involve the use of eponyms to provide diseases or pathology processes an identity. The standard is that the condition is named after a place or a person. Many of these eponyms are seen as a recognition of the excellence of the medical professional's work in their field whatever. The names can cover a range of issues such as anatomical parts, microorganisms, a procedure or an illness. The name often can shorten a discussion where a range of symptoms and signs make up the condition e.g. Fallot Tetralogy¹. There is an argument put forward that the name would also provide historical context.²

It is against this background in which the author provides medical and dental education teaching. As many as 20 medical conditions have or do bear the names of doctors intimately associated with the Nazi regime, before and during the second world war! These include Reiter's syndrome, Asperger's disease and Wegener's granulomatosis.³

Overall historical sources appear to agree that these eponymously named doctors all participated in atrocities which were designed to achieve "Racial purity" so desired by the Nazi leadership. The medical hierarchy agreed a set of principles by which it could follow to achieve this aim. These involved the use of genetic material i) to prevent transmission by eliminating individuals with poor quality genetics ii) to try to improve those with questionable quality and to iii) promote the transmission of genes the party would consider "valuable"⁴

Three key questions emerge.

¹ Woywodt A, Lefrak S, Matteson E. Tainted eponyms in medicine: the "Clara" cell joins the list. *European Respiratory Journal*. 2010 Sep 30;36(4):706-8.

² Mora B, Bosch X. Medical Eponyms: Time for a Name Change. *Arch Intern Med*. 2010;170(16):1499–1500. doi:10.1001/archinternmed.2010.281

³ Shevell, M. "Rethinking the eponym: The case of Hallervorden-Spatz disease." *J Child Neurol*, 1997

⁴ Robert Proctor, *Racial Hygiene: Medicine under the Nazis*. Cambridge: Harvard University Press, 1988. p 238.

Firstly, why did so many German Doctors and Dentists join or work closely with the Nazi party?

To the western and contemporary eye the numbers and volume of German and Austrian doctors who joined the Nazi party appears bewildering. The reasons appear to be multifactorial and complex. For many there were Professional and Institutional pressures. The medical profession in Germany founded and prided itself on being highly organised and had developed a very strong sense of importance and identity. The Nazi party recognised this and ensured their party functionality embraced these aspects of German Professional society, especially the medical aspects. The party for many offered promotion opportunities and career advancement with unprecedented access to resources. Also for many the ability to be associated with the prevailing political movement proved attractive.

There is little doubt however that many were drawn to the party by the extolling of ideological belief in racial purity concepts with wrap around support for eugenics and social Darwinism. This easily progressed to involve physicians in practices such as euthanasia, forced sterilisation and elimination of those with disabilities. The sector justified the carrying out of these atrocities by categorising them under the terms “medical ethics and public health”.

Alongside these issues, the prevailing social and political climate in Germany at the time the Nazi party rose to power also played a significant role. There were important social and political upheavals, much of which found their origin in the post Versailles treaty legacy. National uncertainty was the dominant pervading feeling! The Nazi party offered hope, order, and a return to national pride which proved an intoxicating appeal to the population especially the medical community.

Secondly how did the Nazi doctors engage so significantly in the atrocities?

Complicity by the medical community in the Nazi party carrying out was identified by over 50% of the community joining the party and another 25 % working closely with machine. As highlighted, this revealed their support for the basic racial Nazi ideological beliefs especially around eugenics, They actively participated in the delivery of forced sterilizations and pre-war euthanasia programs such as T4. Reviews have pointed to the fact that their involvement was instrumental in legitimising and implanting the regimes genocidal policies.

The roles of individuals will give a flavour of their involvement, i) Karl Brandt was Hitler’s personal physician and Reich commissioner for Health and Sanitation. He played a pivotal role in the T4 euthanasia program murdering “unfit” individual. He also oversaw the human experimentation practised within the concentration camps. He was tried and executed after the war, ii) Josef Mengele (the Angel of Death) was stationed at Aushwitz-Birkenau, and personally carried out experiments on

prisoners especially twins without any regard for their wellbeing. He progressed to play a key role in choosing who would be chosen for execution on arrival at the camps. He justified his work as furthering medical science, iii) Wilhelm Beiglbock, was a Luftwaffe doctor who experimented on prisoners at Dachau, looking at the effects of the consumption of seawater leading to many deaths and iv) Helmuth Vetter was an SS Doctor at Auschwitz infected prisoners with diseases to study their effects and also contributed to the selection of those for execution.

Thirdly, how did these doctors escape identification and accountability in the immediate post war period?

There are multiple reasons put forward to explain how these individuals managed to escape trial in Nuremberg but also returned to their prewar positions and in many cases advanced their careers.

The immediate post war allies thirst for revenge quickly conceded to the emerging direction of allied priorities toward the perceived threat of the emerging soviet block and the beginning of the cold war. In fact many of the key Nazi players were actively headhunted to provide scientific and intelligence support to the allies e.g. operation paperclip in the USA. Despite the commitment of the allies to avoid including any of the nazi leadership in the re-emergence of the post war Germany, a process called Denazification, it became clear that there would be very few Doctors left to provide the health care the country would need! Allied with the lack of political will to investigate and prosecute Nazi doctors in an atmosphere where reconstruction and alignment against a threatening soviet communist power dominated, meant that many nazi doctors were allowed to reintegrate into society (along with law and teaching professionals)

In addition, there was a clear and strong professional level of protection and inherent silence within the medical profession. The German Medical Association remained complicit in failing (or refusing) to acknowledge the role of medical professionals in the Nazi war machine until the 1980s. Protection of fellow doctors was pervasive, allowing these individuals to return into clinical practice.

Considered alongside this was a perceived public and institutional amnesia marked by a deafening silence on the topics with little open discussion and even open denial! Amazingly the surviving victims of the atrocities were further marginalised, limiting the public vision of these individuals and their accounts of the events they had undergone.

In addition documentation required for evidential review remained delayed in availability or much of the archival record material had been lost or hidden. This had the effect of stiling any academic enquiry into these events and individuals until the 1970s and 1980s.

Nazi dentists

Unlike the well documented roles of Doctors within the Nazi party, the amount of detail available to report the role Dentists took during this period is far less detailed. It is clear however that they were not immune from the influence of the Nazi party propaganda machine and just as with their medical counterparts many of them became deeply involved in the unpleasant activities of the third Reich, such as ideological engagement, involvement in racial eugenics and war crimes.

Background

Alongside the Reich chamber of Physicians the Nazi regime also developed the Reich Chamber of Dentists bringing the German and Austrian Dentists into the Nazi state. Alongside this, Dentists were required to join the Nazi Dental Association. This facilitated the professionals to be infiltrated by Nazi ideology around eugenics and racial hygiene. This message was further perpetuated in the Dental Literature and Journals. At the same time as Jewish physicians were removed from the medical arena, so Jewish Dentists were expelled from practice by the introduction of the Law for the Restoration of the Professional civil service and policies designed to enable Aryanization.^{5 6} German dentists then took over the vacated practices.⁷

Did dentists participate to the activities in the concentration camps?

Some of the dental professionals became members of the SS and as a consequence worked in the concentration camps. They were involved in i) extraction of gold teeth from the dead bodies of the victims, used later to raise funds for the party,⁸ ii) some were involved in experiments involving dental pain, oral anatomy and anaesthesia. These included oral surgery procedures and extractions without anaesthesia as a means of either punishment or testing human endurance! Dentists were known to have collaborated on experiments on Jaws and facial injuries, focused on Russian or Jewish victims. These included reconstructive techniques, use of prostheses or implants with no consent or anaesthesia in some cases. Fatality or disfigurement were the only outcomes as none of the procedures were to address any clinical issues.⁹

⁵ Proctor, Robert. Racial Hygiene: Medicine Under the Nazis. Harvard University Press, 1988.

⁶ Seidelman, William E. "Nuremberg Lamentation: For the Forgotten Victims of Medical Science." BMJ 313, no. 7070 (1996): 1463–67.

⁷ Kater, Michael H. Doctors Under Hitler. University of North Carolina Press, 1989.

⁸ Reitlinger, Gerald. The SS: Alibi of a Nation, 1922–1945. Viking Press, 1957.

⁹ Lifton, Robert Jay. The Nazi Doctors: Medical Killing and the Psychology of Genocide. Basic Books, 1986.

Dentists also contributed to delivery of Racial Hygiene studies. They carried out dental examinations as part of the Nazi racial classification based on anthropometric criteria (bite patterns, jawline measurements and dental structures). Indeed, dentists contributed to statements about inferior dental features in the Jewish and Roma peoples.¹⁰ In addition, some dentists worked alongside medical colleagues taking part in the euthanasia program named T4. This targeted adults and children labelled as disabled and thus inferior, for extermination. Dentists contributed in this appalling program by carrying out medical assessments and screenings, whilst overtly supporting the racial hygiene policies. These ideas even penetrated the dental undergraduate curriculum under the heading of eugenics.¹¹

Examples of Dentists involvement.

The two most commonly noted names from the dental profession, known to have participated during this period are i) Dr. Willy Frank, a dentist in Auschwitz, who was involved in the extraction of gold from the mouths of victims and ii) Dr. Martin Hellinger, an SS dentist responsible for the collection and processing of gold teeth who was later tried in the Nuremberg Doctors' Trial.¹² However Dentists were also assigned to SS medical units to provide dental care to the SS personnel and help in the logistics and running of the concentration camps.¹³

One of the challenges facing the allies was in bringing to account those responsible for supporting and carrying out these atrocities. This included those from the dental profession. In truth very few dentists were called to trial. Their roles were mentioned during the Nuremberg. Perhaps as Dentistry was held as a peripheral field in the role of medicine and the extraction of gold teeth was not universally viewed as a war crime! This attitude remained even into the post war denazification period.¹⁴

Summary

Doctors and Dentists in the Nazi party were in many cases active participants in the party's ideological ambitions. They did contribute to crimes against humanity. Their activities do remind all lucky enough to be medically or dentally qualified how vital it is to adhere to one's ethical responsibilities and the dire consequences of abandoning them !

¹⁰ Proctor, Robert. Racial Hygiene: Medicine Under the Nazis. Harvard University Press, 1988.

¹¹ *ibid*

¹² United Nations War Crimes Commission. Law Reports of Trials of War Criminals, Vol. 1–15.

¹³ Weindling, Paul. Nazi Medicine and the Nuremberg Trials: From Medical War Crimes to Informed Consent. Palgrave Macmillan, 2004.

¹⁴ Seidelman, William. "Nazi Medicine and the Nuremberg Trials: From Medical War Crimes to Informed Consent." BMJ 313 (1996).

